



North Carolina Department of Public Safety

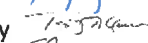
Adult Correction and Juvenile Justice

Roy Cooper, Governor
Eddie M. Buffaloe, Jr., Secretary

Timothy D. Moose, Chief Deputy Secretary

MEMORANDUM

TO: Chairs, House Committee on Appropriations
Chairs, Senate Committee on Appropriations / Base Budget
Chairs, House Appropriations Committee on Justice and Public Safety
Chairs, Senate Appropriations Committee on Justice and Public Safety

FROM: Eddie M. Buffaloe, Jr., Secretary 
Timothy Moose, Chief Deputy Secretary 
Todd Ishee, Commissioner of Prisons 

RE: Report on Substance Use Disorder Treatment Programs

DATE: March 1, 2022

Pursuant to G.S. 143B-707, please see the attached report, *Report on Substance Use Disorder Treatment Programs*. Feel free to contact us if you have any questions.

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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, 2022

**Roy Cooper
Governor**

**Todd E. Ishee
Commissioner**

**Eddie M. Buffaloe, Jr.
Secretary**

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**North Carolina Department of Public Safety – Adult Correction
Alcoholism and Chemical Dependency Programs Section
Fiscal Year 2020-2021 Annual Report to the N. C. General Assembly**

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 on 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 Center 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- (4), (5) Repealed by Session Laws 2007-323, s.17.3 (a), effective July 1, 2007.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 offenders 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 (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) 2020-2021 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 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.

In early 2016, ACDP was realigned within the NCDPS Division of Prisons organizational structure to reside within Behavioral Health 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.

COVID-19 PANDEMIC

Beginning in March 2020, ACDP programming and overall capacity utilization rates were directly impacted by the COVID-19 pandemic. Due to the COVID-19 pandemic mitigation protocols, Center for Disease Control guidelines, and subsequent Division of Prisons transportation/movement restrictions, ACDP was required to implement a modified programming response across the state. Despite programming limitations and restrictions, ACDP staff continued to report to their respective duty stations and provide services as directed.

DEPARTMENT OF PUBLIC SAFETY/PRISONS FACILITY NAME CHANGES

Effective October 2021, the Department changed the names of the following facilities: the name changes will be reflected throughout this report. Morrison Correctional Institution facility name has been changed to Richmond Correctional Institution, Swannanoa Correctional Center for Women facility name has been changed to Western Correctional Center for Women, and DART Cherry facility name has been changed to DART Center.

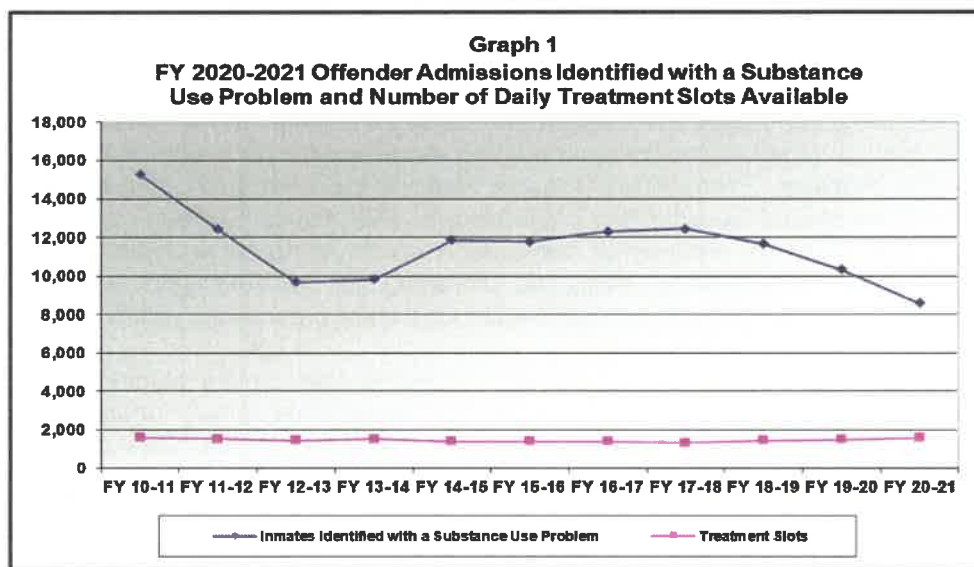
TREATMENT NEEDS

Due to the COVID-19 pandemic mitigation protocols, CDC guidelines, and the subsequent Prison facility's entrance restrictions, ACDP staff access to offenders was limited, reducing the total SASSI screenings conducted. ACDP utilizes the Substance Abuse Subtle Screening Inventory (SASSI) to screen new prison admissions at the diagnostic centers to identify offenders with a substance use problem and the appropriate level of treatment needed. Below is a statistical snapshot of the FY 2020-2021 prison admission SASSI testing results:

- Of the 10,933 offenders screened, 78% or 8,567 indicated a need for intermediate or long-term substance use disorder treatment, which is a 4% increase from FY 2019-2020.
- Of the 896 adult female offenders screened, 86% or 768 indicated a need for intermediate or long-term substance use disorder treatment.
- Of the 9,619 adult male offenders screened, 78% or 7,513 indicated a need for intermediate or long-term substance use disorder treatment.
- Of the 418 youthful male offenders in the adult system (under age 22) screened, 68% or 286 indicated a need for intermediate or long-term substance use disorder treatment.

TREATMENT RESOURCES

During the FY 2020-2021, ACDP resources provided one in three offenders the opportunity for placement in a long-term or intermediate treatment 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 offender admissions from FY 2010-2011 through FY 2020-2021 identified as having a substance use problem during the admission process and the total number of daily treatment slots available to that population.



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

During FY 2020-2021, the average cost per day per offender was impacted due to the COVID-19 pandemic mitigation protocols, CDC guidelines, subsequent Prisons' transportation/movement restrictions, and limitations to bed utilization. In addition, at both DART Center and Black Mountain, the average cost per day per offender was dramatically impacted due to the temporary suspension of operations and the subsequent reduction in capacity rates upon resuming operations. Through June 2021, DART Center operated at 25% capacity and Black Mountain operated at 45% capacity. The NCDPS Controller's Office computes agency and program costs annually. The figures below represent FY 2020-2021.

- The DART Center facility average cost per day per offender was \$416.14.
- The Black Mountain Substance Abuse Treatment Center for Women facility average cost per day per offender was \$444.78.
- The prison-based program average cost per day per offender was \$87.85, this cost estimation was calculated using the program and custody costs. The ACDP prison-based program per day per offender cost was \$38.31.

STAFF RECRUITMENT AND RETENTION

G.S. § 90-113.40 - Requirements for certification and licensure (September 2005), requires all substance use disorder professionals be duly credentialed or registered and established a 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, population, and length of treatment.

**Table 1 – FY 2020-2021 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 Center	300	90 Days
Adult Female	*Black Mountain Substance Abuse Treatment Center for Women	64	90 Days
Total		364	
Prison-Based Intermediate Intensive Outpatient Treatment Programs			
Adult Male	Alexander Correctional Institution (Inter)	100	90 Days
	Catawba Correctional Center	32	90 Days
	Craggy Correctional Center	68	90 Days
	Lincoln Correctional Center (Inter)	32	90 Days
	Harnett Correctional Center	33	90 Days
	Johnston Correctional Institution	68	90 Days
	Lumberton Correctional Institution	64	90 Days
	Pender Correctional Institution	106	90 Days
	Rutherford Correctional Center	34	90 Days
Adult Female	Western Correctional Center for Women	64	90 Days
Total		601	
Prison-Based Long-Term Intensive Outpatient Treatment Programs			
Adult Male	Alexander Correctional Institution	20	180-365 Days
	Neuse Correctional Institution	62	120-180 Days
	Dan River PWF	68	180-365 Days
	Greene Correctional Institution (RSAT)	64	180-365 Days
	Lincoln Correctional Center (LT)	32	180-365 Days
	Richmond Correctional Institution	88	180-365 Days
Youth Male	Foothills Correctional Institution	32	180 Days
Adult Female	*Anson Correctional Institution (RSAT)	140	180-365 Days
	NC Correctional Institution for Women	102	180-365 Days
Total		608	
Community-Based Residential Treatment Programs		364	
Prison-Based Intensive Outpatient Treatment Programs		1,209	
Total Treatment Slots		1,573	

FY 2020-2021 PROGRAM EXPANSIONS AND REDUCTIONS

*In January 2021, Anson Correctional Institution adult female, 140 bed, 180-365 day, long-term treatment program began operations.

In November 2020, Piedmont Correctional Institution adult male, 33 bed, 90-day, intermediate treatment program suspended operations.

*In October 2020, Black Mountain SATCW transitioned from a 60 bed facility to a 64 bed facility.

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 215 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 (Drug Abuse & Alcoholism Residential Treatment) Center 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 offenders 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 offenders 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

▪ 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 offenders 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 offender 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:

<u>SASSI Score</u>	<u>Recommendation</u>	<u>Program</u>
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

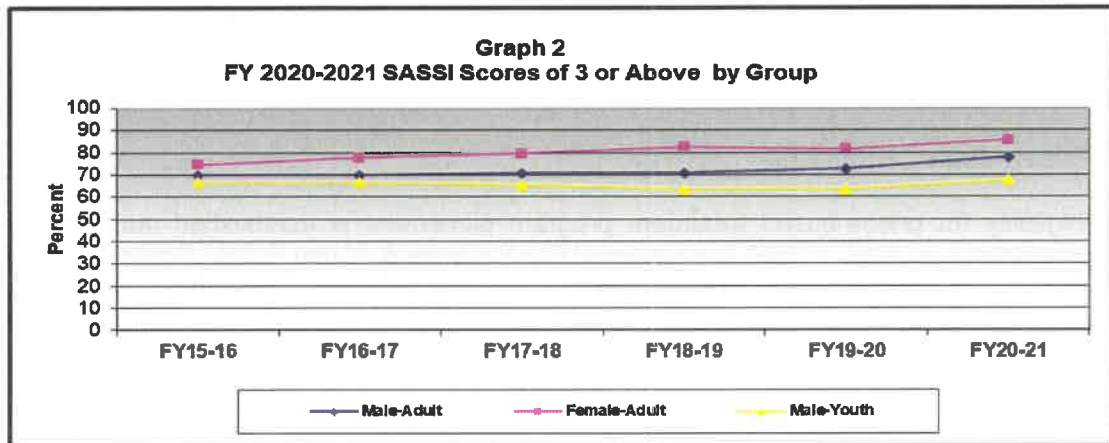
During FY 2020-2021, 10,933 newly admitted offenders, who had not been previously tested or scored below a 3 on previous tests, completed the SASSI. The SASSI identified 78% of the offenders screened needed intermediate or long-term treatment services (scores 3, 4, or 5) and an additional 13% needed substance use intervention. The differences in SASSI scores among the three demographic groups are presented in Table 2 below.

Table 2 – FY 2020-2021 Prison Entries and SASSI Scores

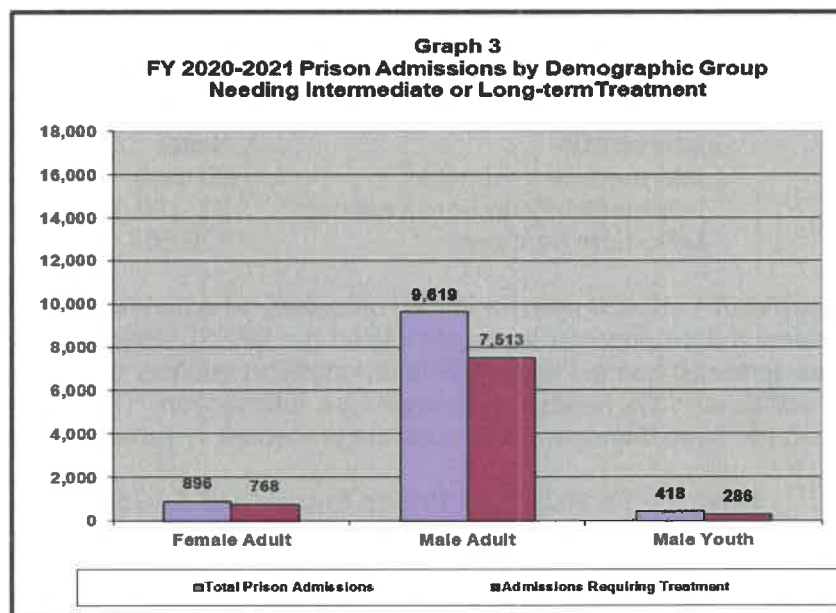
Offender Group	SASSI Score				
	1	2	3	4	5
Adult Female	51 (6%)	77 (9%)	233 (26%)	306 (34%)	229 (26%)
Adult Male	858 (9%)	1,248 (13%)	4,062 (42%)	2,394 (25%)	1,057 (11%)
*Youthful Male	66 (16%)	66 (16%)	137 (33%)	84 (20%)	65 (16%)
Totals	975 (9%)	1,391 (13%)	4,432 (41%)	2,784 (25%)	1,351 (12%)

*Youthful Male offenders in the adult system (under age 22).

Graph 2 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 three demographic groups demonstrated a slight increased need for treatment during FY 2020-2021. The need for intermediate and long-term treatment for all three groups ranges from 68% to 86%.



Graph 3 compares FY 2020-2021 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.

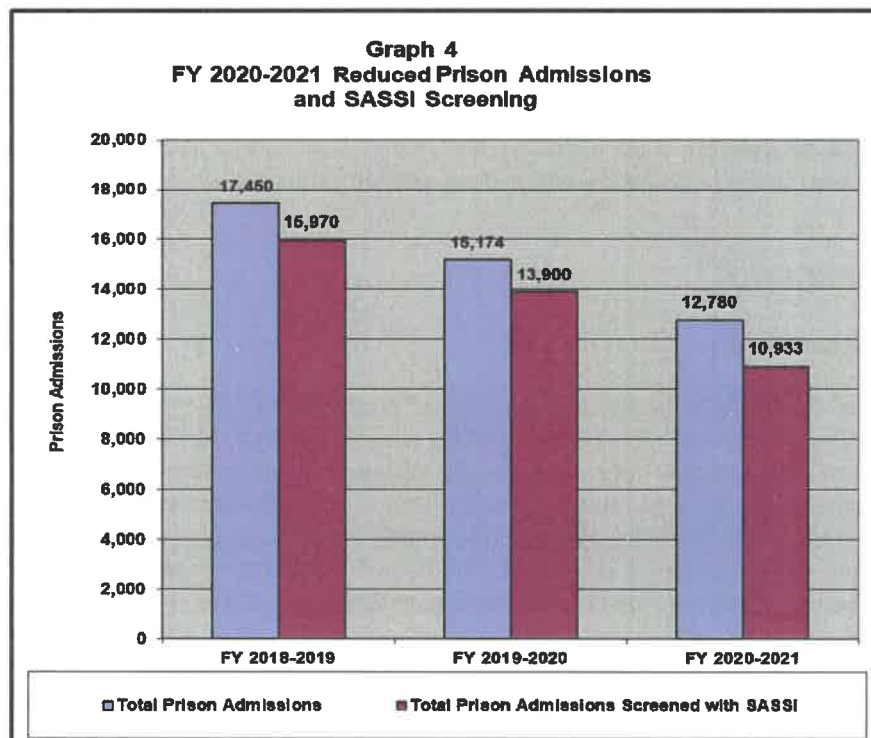


As reflected in Graph 3, the youthful male offenders in the adult system (under age 22) and adult female demographic groups have smaller prison admission numbers than the male population, however during FY 2020-2021 the female demographic group had a higher

percentage of population in need of intermediate or long-term treatment services, 86% 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 7,513 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, 78% of females and 30% of males 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 2020-2021, 86% completed the SASSI. As reflected in Graph 4, with the decrease in prison admissions in FY 2020-2021, SASSI screenings also experienced a slight decrease from 13,900 in FY 2019-2020 to 10,933 in FY 2020-2021. Approximately 14% of offenders were not screened due to complications in the diagnostic center protocols, a score of 3 or higher on a previous SASSI, the COVID-19 pandemic mitigation protocols, CDC guidelines, or the subsequent Prison facility's entrance restrictions limiting ACDP staff access to offenders.



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 offender has a SASSI score of three or above providing prisons with an identified pool of offenders eligible for substance use disorder programming. Depending on program type and program space availability, some offenders 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 offender is then assigned to the ACDP

program on the *Inmate Activity Assignment* screen in OPUS. This is one of many opportunities for offender assignment to an ACDP program.

Other offenders 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 offenders are not referred due to the offender's need for other programs, scheduling constraints, operational needs in prisons, or sentences which are shorter than available treatment.

- **Community-Based Facilities**

DART Center 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**

Due to the COVID-19 pandemic mitigation protocols, CDC guidelines, and subsequent Prison facility's entrance restrictions limiting access to the facilities, the Clinical Supervision process was dramatically impacted. ACDP implemented online and virtual supervision to meet requirements as authorized by the North Carolina Addictions Specialist Professional Practice Board (NCASPPB). 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 130 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 30.

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 Center 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 Center program implemented the CTS in March 2010. Black Mountain implemented the CTS in November 2010.

▪ **Training**

Due to the COVID-19 pandemic mitigation protocols, CDC guidelines, and subsequent Prison facility's entrance restrictions limiting access to the facilities, the in-person trainings were dramatically impacted. ACDP implemented online and virtual training to meet requirements as authorized by the North Carolina Addictions Specialist Professional Practice Board (NCASPPB). Trainings during FY 2020-2021 focused on enhancing professional development by providing approved hours for counselor certification/recertification. During FY 2020-2021, ACDP offered approximately 260 hours of training. The following training modules were offered:

1. Combat Combo: Treating Veterans and Tobacco Use Disorder
2. Self-Care: Preserving the Addiction Professional
3. Security Threat Groups, Gangs, and Drugs on the Wrong Side of the Gate, Now What?
4. Sex Offenders: Treating Specialty Populations in a Group Setting
5. Secrets Keep You Sick: Moving Beyond Guilt and Shame with Gratitude
6. Don't Stress, Decompress! Practical Applications of Self-Care for addictions Professionals During COVID-19
7. Clinical Documentation: Connecting the Dots
8. HIV/Aids and Ethical Issues in Treating Offenders
9. Cognitive Behavioral Therapy

During FY 2020-2021, ACDP offered staff from the following outside agencies the opportunity to participate in ACDP trainings:

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

DETAILS OF NEW INITIATIVES, EXPANSIONS OR REDUCTION OF PROGRAMS

PROGRAM EXPANSIONS AND NEW INITIATIVES

Black Mountain Substance Abuse Treatment Center for Women: In October 2020, ACDP worked in collaboration with Prisons to begin Black Mountain program operations in the Sweatt Building located on the Western Correctional Center for Women campus, allowing for the increase in program beds from 60 to 64. In addition, ACDP has identified the Arledge Building on that campus to be utilized for Black Mountain's administration and classroom space. The full utilization of this building will require extensive repair and an increase in budgetary funding, the end result will allow for program bed expansion from 64 to 96. Until that time limited use of the Arledge Building is schedule to begin in Fall of 2021.

Anson Correctional Institution: In January 2021, ACDP worked in collaboration with Prisons to select Anson Correctional Institution to house an adult female, 140 bed, 180-365 day, long-term intensive outpatient program.

Outpatient Substance Use Disorder Treatment Services (Recovery Road): In collaboration with Behavioral Health Services, ACDP has developed a new initiative that will extend services to identified offenders across the state at all custody levels. This initiative will address engagement, treatment access, aftercare, and re-entry need of offenders identified with a substance use disorder treatment need and may include offenders with co-occurring mental health disorders. The extended outpatient services may include direct aftercare, relapse management, medication assisted treatment (MAT) education and engagement, linkage to mental health, home planning, education, vocational rehabilitation, and other community resource/re-entry related services. The aftercare and reentry program activities are designed to provide a seamless transition for offenders pending release back to community living.

PROGRAM REDUCTIONS

Piedmont Correctional Institution: In November 2020, the Piedmont Correctional Institution 33 bed, adult male, 90-day, intermediate program was officially suspended. The program's suspension was due to Prisons closing the facility in response to the COVID-19 Pandemic.

TEMPORARY PROGRAM DISRUPTIONS DUE TO 2020 COVID-19 PANDEMIC

ACDP Program Census Across the Section: In April 2020, ACDP program bed utilization across the Section began to drop due to the COVID-19 pandemic mitigation protocols, CDC guidelines, Prison facility entry restrictions, and the Department's transfer/transportation restrictions.

Johnston Correctional Institution: In July 2020, ACDP reopened operations after the Johnston Correctional Institution program suspended services in April 2020 as offenders were transferred to other facilities due to the COVID-19 pandemic.

Greene Correctional Institution: In September 2020, ACDP reopened operations after the Greene Correctional Institution program suspended services in July 2020 due to staff shortages and the COVID-19 pandemic.

DART Center Program: In August 2020, ACDP reopened operations after the DART Center program suspended services in May 2020 due to the COVID-19 pandemic.

Black Mountain Substance Abuse Treatment Center for Women: In October 2020, ACDP reopened operations after the Black Mountain program suspended services in June 2020 due to the COVID-19 pandemic and relocating the program to a new facility.

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.

Due to the COVID-19 pandemic mitigation protocols, CDC guidelines, and subsequent Prison facility's entrance restrictions limiting access to the facilities, NCDHHS suspended all FY 2020-2021 program evaluations until 2022. Each ACDP intensive outpatient program is evaluated every two years and each residential program is evaluated annually. 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 Center 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 CENTER 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 (Drug Abuse & Alcoholism Residential Treatment) Center and Black Mountain Substance Abuse Treatment Center for Women.

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 above, 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 CENTER (formally DART Cherry)

Due to the COVID-19 pandemic mitigation protocols, CDC guidelines, and subsequent program temporary suspension from May 2020 to August 2020, DART Center program enrollment totals were dramatically impacted. DART Center 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 2020-2021, the facility had 259 admissions into the program as noted in Table 3 below. DART Center has weekly 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 Center 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 2020-2021 DART Center Enrollments

Facility	Treatment Slots	Annual Enrollment	Average Daily Offenders	Days with Offenders	Capacity Utilization Rate (%)
1061 – DART Center Probation	300	218	39	316	13%
1061 – DART Center Parole	300	41	9	316	3%
Totals	300	259	48		16%

Table 4 below presents the exits from DART Center for FY 2020-2021. Completions, or the satisfactory participation in the program for the required number of treatment days, represented 61% of the exits.

Table 4 – FY 2020-2021 DART Center Exits

Exit Reason	90-Day Program	
Absconded/Withdrawn	45	17%
Completed	157	61%
Inappropriate for Treatment	10	4%
Other	22	8%
Removed/Discipline	25	10%
Transferred/Released	0	0%
Totals	259	100%

DART Center Additional Programming

During FY 2020-2021, all classes offered to DART Center residents through Wayne Community College were suspended due to the COVID-19 pandemic mitigation protocols, CDC guidelines, and subsequent program temporary suspension from May 2020 through August 2020. ACDP remains in communication with Wayne Community College management to reestablish the classes once the COVID-19 mitigation protocols allow for the safe delivery of these services. The following career and personal enrichment classes are offered to DART Center residents through the partnership with Wayne Community College.

Basic Skills

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

Employment Readiness Program (ERP)

The ERP class provides students 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 students may test for the National Career Readiness Certificate which assesses three areas: reading for information, locating information, and applied mathematics.

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. Students enjoy an interactive, hands-on learning experience and earn a portable credential upon successful completion.

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. Students have an interactive, hands-on learning experience and will be evaluated on skills such as applications, resumes, and interviewing skills. Training will include lecture and hands-on activities with evaluation based on attendance, class participation and demonstration of skills.

BLACK MOUNTAIN SUBSTANCE ABUSE TREATMENT CENTER FOR WOMEN

Due to the COVID-19 pandemic mitigation protocols, CDC guidelines, and subsequent program temporary suspension from June 2020 to October 2020, Black Mountain program enrollment totals were dramatically impacted. Black Mountain is a 64 bed community-based residential facility located in Swannanoa, NC providing substance use disorder treatment services to female probationers and parolees. During FY 2020-2021, the facility had 87 admissions into the program as noted in Table 5 below. 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 2020-2021 Black Mountain Enrollments

Facility	Treatment Slots	Annual Enrollment	Average Daily Offenders	Days with Offenders	Capacity Utilization Rate (%)
1116 – Black Mountain Probation	64	79	18	255	30%
1116 – Black Mountain Parole	64	8	3	255	5%
Totals	64	87	21		35%

Table 6 below presents the exits from Black Mountain for FY 2020-2021. Completions, or the satisfactory participation in the program for the required number of treatment days, represented 52% of the exits.

Table 6 – FY 2020-2021 Black Mountain Exits

Exit Reason	90-Day Program	
Absconded/Withdrawn	15	17%
Completed	45	52%
Inappropriate for Treatment	8	9%
Other	16	18%
Removed/Discipline	3	4%
Transferred/Released	0	0%
Totals	87	100%

Black Mountain Additional Programming

During FY 2020-2021, all classes offered to Black Mountain residents through Asheville-Buncombe Technical Community College were suspended due to the COVID-19 pandemic mitigation protocols, CDC guidelines, and subsequent program temporary suspension from June 2020 through October 2020. ACDP remains in communication with Asheville-Buncombe Technical Community College management to reestablish the classes once the COVID-19 mitigation protocols allow for the safe delivery of these services. The following career and personal enrichment classes are offered to Black Mountain residents through the partnership with Asheville-Buncombe Technical Community College.

Hospitality (Certification Class)

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

ServSafe Food Handler (Certification Class)

The ServSafe program prepares students 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 students receive a certificate; this certificate will assist with obtaining gainful employment.

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.

Computer Basics

The Computer Basics class students 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 student composes and saves a resume to a flash drive. The flash drives are kept in the student's transition folder for their transition back into the community.

Working Smart

The Working Smart class students learn soft skills for workplace and life skills that enhance their productivity and increase their value to employers. The Working Smart class provides the tools to help students keep a job, excel at their job, and be more productive.

Pathways to Employment

The Pathways to Employment students 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.

Career Readiness (WIN)

Career Readiness is a class that tests students to find their level of aptitude in areas such as Math. This test is required by some employers in order for an applicant to be considered for employment. The student can earn a Bronze, Silver, Gold, or Platinum level depending on the test scores.

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

INTERMEDIATE TREATMENT PROGRAMS

In the beginning of FY 2020-2021, ACDP 90-day intermediate treatment programs were available in 11 prison facilities across the state. With the Piedmont Correctional Institution adult male, 33 bed, intermediate program's suspension of operations in November 2020, ACDP decreased intermediate treatment program availability to 10 prison facilities. Intermediate programs begin with a mandatory orientation period, where ACDP staff members conduct assessments to confirm the offender's need for treatment.

After the orientation period and depending upon the results of the assessment and the offender's level of motivation, the offender may opt to leave the program. Otherwise, the offender 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 offender 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 offenders enrolled in the treatment program.

The overall capacity utilization rate for intermediate programs decreased from 83% in FY 2019-2020 to 47% in FY 2020-2021. Additional information on these programs is provided in Table 7 below.

Table 7 – FY 2020-2021 Intermediate Prison-Based Program Enrollments

Facility	Treatment Slots	Annual Enrollment	Average Daily Enrollment	Days with Offenders	Capacity Utilization Rate (%)
Piedmont Correctional Institution (Min)	33	30	14	147	42%
Harnett Correctional Institution	33	32	10	365	30%
Pender Correctional Institution	106	190	43	365	41%
Johnston Correctional Institution	68	128	21	352	31%
Lumberton Correctional Institution	64	108	20	365	31%
Lincoln Correctional Center	32	96	25	365	78%
Catawba Correctional Center	32	131	30	365	94%
Craggy Correctional Center	68	198	32	365	47%
Western Correctional Center for Women	64	193	32	365	50%
Rutherford Correctional Center	34	84	16	365	47%
Alexander Correctional Center	100	208	31	365	31%
Totals	634	1,398	274		47%

The total annual enrollment for intermediate programs decreased from 2,962 in FY 2019-2020 to 1,398 in FY 2020-2021. As noted earlier in this report, the overall capacity utilization rate for intermediate programs were directly impacted by the COVID-19 pandemic mitigation protocols, CDC guidelines, subsequent Prisons' transportation/movement restrictions, the temporary Johnston Correctional Institution program suspension in April 2020, available staffing, and the following program expansions/reductions/closures:

Piedmont Correctional Institution: In November 2020, the Piedmont Correctional Institution 33 bed, adult male, 90-day, intermediate program was officially suspended. The program's suspension was due to the facility's closure related to the COVID-19 Pandemic.

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 offenders in need of intermediate services. As shown in Table 8 below, 76% of female offender and 37% of male offenders in need of intermediate treatment had a chance of being assigned to an ACDP intermediate treatment program during FY 2020-2021. While these statistics reflect the need versus availability for the particular reporting year, the actual number of offenders requiring treatment grows exponentially as new offenders enter the system.

Table 8 – FY 2020-2021 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	244	323	76%
Males	Intermediate	1846	5,039	37%
	Total	2090	5,362	39%

The need for intermediate substance use disorder treatment services for male and female offenders are significant within the prison population and presents a major challenge to ACDP.

Table 9 – FY 2020-2021 Exits from Intermediate ACDP Programs

Type of Exit	Number of Exits	Percent of all Exits
Completion	655	55%
Inappropriate for Treatment	70	6%
Other	77	6%
Removed/Discipline	216	18%
Transferred/Released	108	9%
Withdrawal	70	6%
Total	1,196	100%

Table 9 above presents the exits from the ACDP intermediate treatment programs. Of all exits from the programs, 55% were completions - the satisfactory participation in the program for the required number of treatment days.

LONG-TERM TREATMENT PROGRAMS

In FY 2020-2021, ACDP long-term treatment programs were available in 8 prison facilities across the state with program lengths ranging from 120 to 365 days. With the Anson Correctional Institution program beginning operations in January 2021, ACDP was able to increase the long-term treatment program availability to 9 prison facilities through the remainder of the fiscal year. These programs are best indicated for offenders 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 offender's need for treatment. After the orientation period and depending upon the results of the assessment and the offender's level of motivation, the offender may opt to leave the program. Otherwise, the offender 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, offenders leave prison immediately or as soon as possible after successful completion the program.

The overall capacity utilization rate for long-term programs decreased from 79% in FY 2019-2020 to 46% in FY 2020-2021. Annual enrollment figures for each long-term prison-based program are listed in Table 10 below.

Table 10 – FY 2020-2021 Long-Term Prison-Based Treatment Program Enrollments

Facility	Treatment Slots	Annual Enrollment	Average Daily Offenders	Days with Offenders	Capacity Utilization Rate (%)
NC Correctional Institution for Women	102	192	41	365	40%
Neuse Correctional Institution	62	250	42	360	68%
Dan River PWF	68	156	41	365	60%
Foothills Correctional Institution	32	100	20	365	63%
Richmond Correctional Institution	88	147	40	365	45%
Greene Correctional Institution	64	54	14	318	22%
Lincoln Correctional Institution	32	28	7	365	22%
Anson Correctional Institution	140	73	28	153	20%
Alexander Correctional Institution	20	55	14	365	70%
Totals	608	1,055	247		46%

The total annual enrollment for long-term programs decreased from 1,712 in FY 2019-2020 to 1,055 in FY 2020-2021. As noted earlier in this report, the overall capacity utilization rate for long-term programs were directly impacted by the COVID-19 pandemic mitigation protocols, CDC guidelines, subsequent Prisons' transportation/movement restrictions, available staffing, and the following program expansions/reductions/closures:

Anson Correctional Institution: In January 2021, ACDP worked in collaboration with Prisons to select Anson Correctional Institution to house an adult female, 140 bed, 180-365 day, long-term program.

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 offenders within the prison population in need of long-term substance use disorder treatment. ACDP continued this assessment in FY 2020-2021 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 offenders and the number of male offenders in need of treatment. During FY 2020-2021, 78% of female offenders and 30% of male offenders had a 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 offenders enter the system.

Table 11 – FY 2020-2021 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	291	373	78%
Males	Long-term	868	2,857	30%
Totals		1,159	3,230	36%

Table 12 – FY 2020-2021 Exits from Long-Term Treatment Programs

Type of Exit	Number of Exits	Percent of all Exits
Completion	375	43%
Inappropriate for Treatment	34	4%
Other	90	10%
Removed/Discipline	220	25%
Transferred/Released	117	13%
Withdrawal	39	4%
Totals	875	100%

Table 12 above presents the exits from the ACDP long-term treatment programs. Of all the exits from the programs, 43% were completions - the satisfactory participation in the program throughout the treatment process.

The prison-based long-term treatment programs have the highest percentage of exits due to removals and withdrawals. During FY 2020-2021, Anson Correctional Institution and Foothills Correctional Institution had the highest removal rates. Whereas Dan River Prison Work Farm had the highest withdrawal rate. These are the longest treatment programs with more opportunity for an offender to be charged with a disciplinary infraction unrelated to the program. Additionally, the population served is a significant factor in that higher-risk offenders are assigned to these programs.

Within the long-term programs, there are occasions where offenders 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 2020-2021.

All ACDP programs were evaluated jointly by program type. The programs include DART Center and Black Mountain, both community-based residential facilities that provide 90-day length of stay treatment programs to probationers and parolees; prison-based intermediate intensive outpatient treatment programs that provide a 90-day length of stay to accommodate offenders with more serious substance use disorder issues; and prison-based long-term intensive outpatient treatment programs, with a 120 to 365 day length of stay, that provide serves to offenders 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 an ACDP program in FY 2020-2021 universally improved their confidence to resist the urge to drink heavily or use drugs in a variety of situations. At the community-based treatment programs and the prison-based long-term treatment programs scores moved significantly in the confidence range. Whereas offenders participating in the prison-based intermediate treatment programs had the most modest improvement. Yet the increase in confidence for all populations were statistically significant in all sampled circumstances. Participants in all programs, rated confidence at entry into the program as low, but participant confidence increased significantly at program exit.

The BSCQ is a relevant measure to the treatment model and provides a consistent measure that can be used on all offenders assigned to an ACDP treatment program. 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") and 100% ("totally confident") and participants are asked to place an "X" along the line, from 0% to 100%. Because the BSCQ is a stated 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 program 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 offenders who completed a prison-based intermediate or long-term treatment program in FY 2020-2021 and remained in prison after exiting the program, the number and severity of infractions were significantly decreased after treatment. Likewise, the number and severity of infractions committed by offenders who remained in prison after dropping out of a program were significantly reduced after program participation. Furthermore, offenders who successfully completed treatment reduced both the number and severity of infractions when compared to offenders who dropped out of a program.

Please note infractions are a primary reason an offender is removed from a treatment program and offenders who are released from prisons cannot be evaluated on this measure because they are no longer in prison. As such, ACDP incorporates an additional measure of change in offender behavior that can be used on all offenders assigned to a program. 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 treatment 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 offenders 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 offender may have completed while incarcerated. For these reasons, ACDP evaluated each program’s impact on recidivism (defined as a return to prison with 3 years) using statistical techniques that consider potential differences among offenders 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 offenders not assigned to an ACDP program. Because these techniques (i.e., propensity score analysis) produce a matched subset of offenders, summary statistics using base rate calculations or alternate methodologies for determining return-to-prison rates may produce different figures.

For FY 2020-2021, ACDP evaluated the three-year return-to-prison rates for FY 2017-2018 offenders by gender. These offenders either exited from a prison-based treatment program or from a community-based treatment facility, DART Center or Black Mountain, as a condition of their early release from prison. Return-to-prison rates were lower for most offenders who completed a treatment program compared to a matched comparison group. Offenders who began a ACDP treatment program 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 a program. Offenders who participated and completed a ACDP program returned to prison less frequently than did those who began a treatment program and did not complete. Offender

return-to-prison rate impact was statistically significant for offenders who completed a male prison-based intermediate treatment program.

OTHER MEASURES OF PROGRAMS' SUCCESS

ACDP continues to incorporate an additional measure of behavior change within their programs. The TCU Criminal Thinking Scales (CTS) is relevant to the treatment model and provides a consistent measure that can be used on all offenders assigned to a program. 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 crimes both before and after criminal justice sanctions have been applied. Research has shown that 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 substance use and criminal activity.

FY 2020-2021 results of testing show that participating offenders lower their scores on almost all the CTS subscales. In general, offenders participating in a community-based residential treatment facility, DART Center or Black Mountain, had a statistically significant change in all subscales. Offenders participating in a prison-based intermediate treatment program had a statistically significant change in almost all subscales however, scores in power orientation were not statistically significant. Offenders participating in a prison-based long-term treatment program had a statistically significant change in both personal irresponsibility and criminal rationalization however, cold heartedness scores were not statistically significant. These results are consistent with those of several year's participants.

FY 2020-2021 SUMMARY OF FINDINGS

- Offenders who exited ACDP programs in FY 2020-2021 universally improved their confidence to resist the urge to drink heavily or use drugs in a variety of situations.
 - Offenders in all programs, rated confidence at entry into the program as low, but participant confidence increased significantly at program exit.
 - Offenders that participated in the community-based treatment programs and the prison-based long-term treatment programs scores moved significantly in the confidence range.
 - Offenders that participated in the prison-based intermediate treatment programs had the most modest improvement.
 - Offenders increase in confidence for all populations/programs were statistically significant in all sampled circumstances.
- Offenders who successfully completed treatment reduced both the number and severity of infractions when compared to offenders who dropped out of a treatment program in FY 2020-2021.
 - Offenders who completed a prison-based intermediate or long-term treatment program and remained in prison after exiting the program significantly reduced the number and severity of infractions after treatment.

- Offenders who remained in prison after dropping out of a prison-based treatment program significantly reduced the number and severity of infractions after program participation.
- For FY 2020-2021, ACDP evaluated the three-year return-to-prison rates for FY 2017-2018 offenders by gender. These offenders either exited from a prison-based treatment program or from a community-based treatment facility, DART Center or Black Mountain, as a condition of their early release from prison.
 - Return-to-prison rates were lower for most offenders who completed a treatment program compared to a matched comparison group.
 - Offenders who began a ACDP treatment program 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 a program.
 - Offenders who participated and completed a ACDP program returned to prison less frequently than did those who began a treatment program and did not complete.
 - Offender return-to-prison rate impact was statistically significant for offenders who completed a male prison-based intermediate treatment program.
- FY 2020-2021, 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 testing show that participating offenders lower their scores on almost all the CTS subscales.
 - Offenders participating in a community-based residential treatment facility, DART Center or Black Mountain, had a statistically significant change in all subscales.
 - Offenders participating in a prison-based intermediate treatment program had a significant change in almost all subscales however, scores in power orientation were not statistically significant.
 - Offenders participating in a prison-based long-term treatment program had a significant change in both personal irresponsibility and criminal rationalization however, cold heartedness scores were not statistically significant.