

# **Prison Program**



West Tennessee State Penitentiary Men's Rehabilitative Center FY2019 RSAT funded program

#### OVERVIEW OF PROGRAM

The RSAT Program within the Men's Rehabilitative Center (MRC) is a 128-bed unit at one of two sites at the West Tennessee State Penitentiary. The other site is a similarly sized treatment facility for women. The MRC can house a maximum of 978 men who are in treatment for substance use disorder (SUD) at the most appropriate individualized level of care according to the American Society of Addiction Medicine (ASAM) criteria.

The MRC RSAT Program is a modified therapeutic community (MTC). Treatment is

based on cognitive behavioral methods and focuses on goal achievement, peer mentoring, and reentry planning, including family reunification.

The MRC first received RSAT funding in April 2018. Because there were men already incarcerated, participants were admitted almost immediately.

# What we can learn from this RSAT Program

A family reunification program is offered to men who are about to reenter the community. In this program, family members join the RSAT participant for at least three counseling sessions while he is still incarcerated. This is an opportunity for many issues to be addressed prior to release when the risk of relapse or recidivism may be heightened with family strain.

## ELIGIBILITY CRITERIA, SCREENING/ASSESSMENT, AND TREATMENT PLANNING

Men are classified to the facility at Tennessee's prison orientation site. Eligibility includes a substance use disorder. Once residents arrive onsite, staff assess potential participants using the Static Risk and Offender Needs Guide - Revised (STRONG-R), which was validated specifically for the state's criminal justice system. The men also are administered the Texas Christian University's Drug Screen 5 (T (TCUDS 5), an opioid specific screening (TCUDS 5 Opioid Supplement), and a biopsychosocial screen.

Participants can enroll in the program based on their needs or by mandate or recommendation of the Parole Department. Those in the latter group are released on parole supervision once they successfully complete the RSAT Program.

During the 3-month orientation phase, each participant contributes to his specific treatment plan, with goals and objectives reviewed as needed. Reentry staff use treatment plans to form a transition plan for participants who are preparing for release.

Co-occurring disorders (COD) are considered common among the men within the MRC. Corizon Correctional Healthcare medical and mental health staff conduct clinical assessments for all men who are admitted into the RSAT Program. Mental health disorders are not an ineligibility factor unless symptoms escalate into harmful behaviors to self and others.

#### MODALITY OF RSAT PROGRAM

The MRC is a modified therapeutic community with a trauma-informed approach. There are three phases:

- Phase 1: Orientation.
- Phase 2: Benchmarks.
- Phase 3: Big Brothers.

In phase 3, the more experienced RSAT members mentor newcomers, showing them the rules and regulations and helping them learn the rituals of the community. These "big brothers" are sometimes called liaisons or team leaders. There are ritualized community meetings with push-ups for others and pull-ups on oneself.

Core classes address SUD, anger management, victim impact, voluntary Alcoholics Anonymous/Narcotics Anonymous (AA/NA), and relapse prevention. All groups are facilitated from a trauma-informed perspective and some participants also receive ongoing individualized mental health sessions. The entire program can take 9 to 12 months depending on individualized goals and how one chooses to work the program.

Individuals who have completed the program

and remain incarcerated can take classes to become certified as Peer Recovery Specialists. If interested, they may begin this process while still in the RSAT Program and then provide certified peer recovery specialist services to other men once transferred back to general population. This certification is recognized by the state of Tennessee and can be an asset in finding employment upon release.

#### CONTINUING CARE/REINTEGRATION

Every man is assigned a forensic social worker who helps develop a reentry plan with goals, objectives, and action steps. Depending on needs, men can be recommended to sober homes or halfway houses, given mental health medications and referrals for continued treatment, or receive lists for AA/NA within the area that they are being released.

# PROGRAM CONTACT INFORMATION

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Information updated 7/31/2023.



#### **OVERVIEW OF PROGRAM**

The RSAT Program within the Women's Therapeutic Residential Center (WTRC) is a 96-bed unit at one of two sites at the West Tennessee State Penitentiary. Approximately 1,000 women reside at the WTRC.

The RSAT Program at the WTRC is a therapeutic community that is broken into three groups of 32. Those groups usually meet in two smaller groups of 16, but once a week meet all together. Groups are focused on accountability using dialectical behavior therapy (DBT), practicing cognitive behavioral skills, and teaching and utilizing peer recovery specialist skills.

The WTRC first admitted women into the program in 2016. Previously, it was for men only. The RSAT Program has a reported 95% completion rate.

## ELIGIBILITY CRITERIA, SCREENING/ASSESSMENT, AND TREATMENT PLANNING

Women are screened for eligibility to enter the WTRC and more specifically it's RSAT Program. Women can also put in a request for transfer to the program and women may be recommended by the Parole Board as well. However, if a woman doesn't meet the eligibility requirements, even if referred by Parole, they will not accept her into the RSAT Program.

To be eligible for the RSAT Program, a woman must have a substance use disorder (SUD), be either mandated or recommended by the Parole Department, or be deemed high-risk and in need for RSAT services by the Classification Department. The Tennessee DOC uses the Static Risk and Offender Needs Guide - Revised (STRONG-R), which was validated specifically for the state's criminal justice system.

Once in the RSAT Program, women participate in an assessment using the Texas Christian University's Drug Screen 5 (T (TCUDS 5), an opioid specific screening (TCUDS 5 Opioid Supplement), and a biopsychosocial screen. Mental health issues are not a factor for ineligibility; in fact, many women within the RSAT Program have co-occurring disorders (COD). Most of the women have already been identified by licensed and clinically trained mental health professionals as having COD by the time they are admitted into the RSAT Program. Treatment plans are developed with reentry in mind. The program is 9 to 12 months long depending on the individual's needs and how she progresses through the program and treatment goals.

## **MODALITY OF RSAT PROGRAM**

The WTRC is a trauma-informed therapeutic community. Groups include:

- Daily community meetings with pushups—focused on accountability for one's own behavior;
- An integrity group focusing on how to express oneself to others;
- Anger management;
- Relapse prevention;
- Victim impact group; and
- Peer-led Narcotics Anonymous (NA), Alcoholics Anonymous (AN), and Celebrate Recovery.

#### PROGRAM HIGHLIGHT

The WTRC has a visitation program that allows children to stay with their mother one weekend a month in a house-like building with bedrooms and semi-kitchens before her release. This program includes many security checks, such as specially trained officers and discrete monitoring cameras. A woman must complete a parenting course to qualify. This program has been very successful is helping to keep the bond between children and mother during incarceration.

Participants receive "tickets" for non-

compliance or inappropriate behaviors. Consequences are always given as immediately as possible, tied

to the inappropriate behavior, and are not traditionally disciplinary or punitive. If a woman is removed from the program for disciplinary reasons, she is permitted to re-enter the program again later.

Approximately 40% to 50% of women who complete the RSAT Program are released on parole. The other half are released to the general population. Individuals who have completed the program and remain incarcerated can take classes to become certified as Peer Recovery Specialists. If interested, they may begin this process while still in the RSAT Program and then provide certified peer recovery specialist services to other women once transferred back to general population. This certification is recognized by the state of Tennessee and can be an asset in finding employment upon release.

#### CONTINUING CARE/REINTEGRATION

Every woman is assigned a forensic social worker who helps develop a reentry plan with goals, objectives, and action steps. Depending on needs, women can be recommended to sober homes or halfway houses, given mental health medications and referrals for continued treatment, or receive lists for AA/NA within the area that they are being released.

#### PROGRAM CONTACT INFORMATION

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# **Morgan County Corrections Complex**

# **Current FY2024 RSAT funded program**

#### **OVERVIEW OF PROGRAM**

The RSAT Program within the Morgan County Corrections Complex (MMCX) is called the TCOM (Therapeutic Community), and it operates under the Tennessee Department of Corrections. It has been running for approximately 10 years. The program operates as a therapeutic community and has been able to help hundreds of participants.

## ELIGIBILITY CRITERIA, SCREENING/ASSESSMENT, AND TREATMENT PLANNING

In order to meet the criteria for the TCOM program, participants must have a diagnosed substance use disorder, be of minimum custody level with no Class A disciplinary within the past 6 months, and have at least 9 months left on their sentence.

The program utilizes the Texas Christian University (TCU) Drug Screen 5 Plus as a screening tool.

Treatment plans are developed first with an intake assessment that covers all areas of the participant's lives. Then a master problem list is developed in collaboration with the participant. Finally, a treatment plan is created.

# What we can learn from this RSAT Program

Participants are able to get their GED while in TCOM. In addition, the program has a staffed recovery housing unit that graduates can go to instead of integrating back into the general population.

## **MODALITY OF RSAT PROGRAM**

The TCOM program operates over a course of 9 months to 1 year, and the average completion time for participants is 9 months and 1 week.

The Therapeutic Community (TC) treatment model is utilized for the program, and it highlights cognitive-behavioral and behavior modification techniques. The TC is a highly structured environment where peer interaction is mediated through a variety of group processes and is emphasized as the medium for change. Since participants must work together, as in a family or community, a maximum number of peer-centered activities are used to allow members the opportunity to learn through experience, which is considered to be the most potent influence toward lasting change. Members and staff act as facilitators, emphasizing self-improvement and personal responsibility for one's life.

The major parts of the program's daily schedule include a morning meeting and dorm inspection, Didactic Recovery Group, Process Group, recreation, evening wrap-up, and lastly support group.

Program staff utilizes the following treatments and interventions: Push-Up, Pull-Ups, Learning Experiences, Alternative Disciplinary, Motivational Interviewing, Cognitive Behavioral Therapy (CBT), Positive Reinforcements, Phase-ups, and Integrity Groups.

The TCOM program utilizes peer mentors to serve the inmate population through reflective listening, engaging in healthy conversation, offering positive solutions, maintaining healthy boundaries, and leading by example concerning institutional rules and regulations. Peers are also available to assist in handing out curriculum and tutoring when needed.

When an individual needs support with co-occurring disorders, they are referred to mental health staff to coordinate services.

At Morgan County Corrections Complex, trauma informed care is incorporated into the program. Staff is educated on ACES and will refer to mental health for services. In addition, staff members utilize knowledge about the specific trauma to direct their interventions.

#### **MAT PROGRAMMING**

Participants of TCOM have access to buprenorphine in the form of Subutex. Subutex is available for both continuation and induction. However, there is no Medication Assisted Treatment (MAT) in place at the time.

#### CONTINUING CARE/REINTEGRATION

For reentry planning, a Transition Accountability Plan is developed. It covers goals for the first five years after release, across the following facets: living environment, employment, education, family, health, recovery support, daily schedule, financial planning, spiritual life, friends and recreation.

For those continuing care with medications for opioid use disorder, a medical case manager is in charge of medical discharge planning.

There is a recovery housing unit specifically for aftercare with meetings 4 times a week and a staff person to help with case management and recovery support services. Also, there is a Certified Peer Recovery Specialist that holds aftercare and 12 step groups.

#### PROGRAM CONTACT INFORMATION

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