

# **County Jail Programs**



# **OVERVIEW OF PROGRAM**

The RSAT program in the Jefferson County Jail in Washington is contracted to operate by the private organization Believe in Recovery, LLC. The RSAT program first received funding in the last quarter of 2020 and serves both pre-trial and sentenced men and women with co-occurring disorders (CODs): substance use disorders (SUDs) and mental health disorders.

Residents are provided evidence-based services and trauma-informed care. The program is currently serving 12 participants and has a maximum capacity of 12. RSAT participants are housed in their own block, separate from the general population.

Since the program's inception, individual treatment plans have varied, depending on the individual. The shortest program has lasted 1 day; the longest, 365 days. The average for all participants who have been discharged from the program is 68 days.

# ELIGIBILITY CRITERIA, SCREENING/ASSESSMENT, AND TREATMENT PLANNING

Potential RSAT participants are screened to determine eligibility. Current eligibility criteria are:

- Meet diagnostic criteria for substance use disorder
- No infractions or no contact orders that would prohibit the individual from programming
- Willingness to submit to random urine drug tests

During the initial screening process, the individual fills out an application that is screened by correctional staff. Each potential candidate is screened for SUDs, CODs, and criminogenic risk/needs. The initial screening includes a Global Appraisal of Individual Needs-Short Screener (GAIN-SS) form and a standardized risk/needs assessment.

After individuals are accepted into the program, they undergo a comprehensive biopsychosocial evaluation. This process includes several questionnaires, including the Adult Substance Abuse Subtle Screening Inventory – 4 (SASSI-4), the Michigan Alcohol Screening Test (MAST), and the

Drug Abuse Screening Test (DAST); an American Society of Addiction Medicine (ASAM) evaluation; reviews of their driving record, criminal history, and police report; and a personal interview.

A treatment plan is developed for each individual, consisting of specific, measurable, attainable, relevant, and time-bound goals. Treatment plans are reviewed and revised at least weekly and include input from both participant and counselor.

Criteria for successful RSAT program graduation includes meeting all treatment plan goals and recommendations. This includes engaging with the case manager to ensure continuing care services have been arranged for the individual's transition back into the community. After graduation, each individual would also meet criteria to attend level two or below of care at an outpatient facility. The potential graduate would also need to provide negative drug screens for a minimum of 30 days prior.

## **MODALITY OF RSAT PROGRAM**

The RSAT Program at Jefferson County Jail serves both sentenced and pre-trial detainees. The program offers their services as long as a person is incarcerated at the facility, but this period of time is often shorter than 90 days due to their pre-trial status. Jefferson County Jail has a small facility census, the majority of whom participate in the RSAT Program. There is a separate unit available to house participants, and classes and groups are all held in a separate area within the facility.

The RSAT Program is structured into 4 phases, including an induction phase when orientation is completed. Individuals progress through these phases according to their

## PROGRAM HIGHLIGHT

The RSAT program at Jefferson County Jail utilizes a holistic therapeutic approach. With 40 weekly hours of evidence-based cognitive behavioral therapy and personalized treatment plans, participants progress through three phases towards behavioral change and successful reintegration. This approach equips individuals with the tools needed for a comprehensive recovery journey.

individual needs and meeting goals and not based on specific periods of time. The program also offers a post-graduation phase for individuals who remain incarcerated following the completion of the program. Pro-social programs available outside of treatment include AA/NA and church groups. Peer support services such as the use of peer support specialists are utilized.

Evidence-based cognitive behavioral therapy programming is based on Hazelden's A New Direction curriculum. This curriculum covers a number of different modules, including alcohol and drug information, criminal and addictive behaviors, socialization, relapse prevention, preparing for release, and co-occurring modules. A mental health professional meets individually with each participant weekly.

#### MAT PROGRAMMING

Individuals who enter the facility with a current prescription for oral naltrexone or buprenorphine (Suboxone) are continued on their prescriptions pending medical/psychiatric assessments. All individuals entering the facility undergo a medical screening and individuals in withdrawal are assessed using the COWS/CIWA protocol. Individuals can continue or start new prescriptions for

psychiatric medications pending medical/psychiatric assessment. Participants are also provided naloxone and overdose prevention education prior to release.

Naltrexone (Vivitrol) and Buprenorphine (Suboxone, Subutex, Sublocade) are offered in the program.

### CONTINUING CARE/REINTEGRATION

Reentry needs are considered from the time a person enters the facility. Individuals meet with case managers on a weekly basis to discuss reentry needs and work on continuing care plans. These plans address a variety of needs including linkages to health care providers, continuing treatment services, housing, public assistance, and more. Individuals are also able to make connections with community-based providers prior to release.

Case managers work to ensure continuity of medical care and prescription medication. Bridge doses are provided for individuals though program staff and they ideally work to set up appointments the same day as release, or as soon as possible. For medications for opioid use disorder, same day appointments are always made.

RSAT participants have the opportunity to meet with a community-based peer on a daily basis while incarcerated and can continue these services post release. AA and NA supports are available and encouraged. RSAT participants in later phases in the program can be given the role of "big brother" and will help to orient new participants to the program. There are similar supports available for participants with co-occurring disorders.

### PROGRAM CONTACT INFORMATION

#### **David Fortino**

Chief Corrections Deputy
Jefferson County Sheriff's Office
81 Elkins Rd Port Hadlock, WA 98339
360-344-9743
dfortino@co.jefferson.wa.us

#### **COMMUNITY PARTNERS**

Housing: Olympic Community Action Programs (OlyCAP) 228 W 1st Street

Port Angeles, WA 98362 360-385-2571

**Outpatient: Believe in Recovery** 

3051 West Sims Way Port Townsend, WA 98368 360-385-1258 Mental Health: Discovery Behavioral Healthcare

884 West Park Ave Port Townsend, WA 98368 360-385-0321

Information updated 8/1/2023

# **Prison Programs**



#### **OVERVIEW OF PROGRAM**

The program at the Washington Corrections Center for Women is overseen by the Washington State Department of Corrections and initially began as a Therapeutic Community for substance use disorder in 2016. A small pilot program was created in February 2023 for individuals with severe mental illness before launching their full RSAT program in July 2023.

# ELIGIBILITY CRITERIA, SCREENING/ASSESSMENT, AND TREATMENT PLANNING

Individuals who are housed at the minimum-security level and have a substance use disorder are eligible for this program. Three assessment tools are used by the program to screen participants. A biopsychosocial substance user disorder screening is used in conjunction with a mental health appraisal and the University of Rhode Island Change Assessment Scale (URICA), which measures stages of change such as precontemplation, contemplation, action, and maintenance.

The self-report questionnaire uses a Likert scale from 1 - strong disagreement to 5 - strong agreement. A participant is asked to respond with how they currently feel when starting therapy or approaching problems in their lives. After screening, mental health and individual service plans for participants are developed with their individual providers.

# **MODALITY OF RSAT PROGRAM**

The length of time it takes for a participant to complete the program varies and is dependent on the individual. The average completion time is 6 months. The program operates as a therapeutic community to treat both substance use disorders and trauma. This model allows participants to be treated on an individualized basis and supports recovery and healing. Participants take part in groups as part of their daily schedule which include weekly trauma groups, daily morning meetings as well as recovery and right living groups.

Evidence based services include the Hazelden curriculum and the therapeutic community model. Other interventions utilized by program staff include individualized treatment plans, trauma informed yoga groups, and cognitive processing therapy groups.

Additionally, the program uses peer support services and mentors. Based on social learning theory in the TC model, participants are able to learn from their peers continuously. Peer mentors are also used, and the program hopes to have certified peer counseling in the future.

Support for individuals with co-occurring mental health disorders is available. When a participant is diagnosed with a mental health disorder or trauma, they participate in group and individual courses of trauma treatment. Trauma informed care is utilized throughout the program.

### **MAT PROGRAMMING**

Medications provided at the program include naltrexone (Vivitrol), buprenorphine (Suboxone, Subutex, and Sublocade), and methadone.

Medication at this program is available under specific circumstances. Vivitrol, Suboxone, and Sublocade are available for induction within the program. Participants can begin medication assisted treatment three months from their release date.

Participants in the program are provided with overdose education training as well as naloxone (Narcan) upon release.

#### CONTINUING CARE/REINTEGRATION

This program utilizes re-entry navigators to manage the process of reintegration into the community. The program also supports reentry of a participant into the general population of the prison so that there is a more successful transition into the community upon release. As the program is new and no participants have been released back into the community yet, the aftercare portion of the program is still under development. It is planned that a specific reentry navigator will be designated to the RSAT program.

#### PROGRAM CONTACT INFORMATION

#### Julie Dames-Ryan

Grants Administrator, Budget Office Washington State Department of Corrections 7345 Linderson Way SW, Turnwater, WA 98501 307-790-5825

julie.damesryan@doc1.wa.gov

Information updated 8/1/2023