

# **Prison Program**



## **PROGRAM OVERVIEW**

The RSAT Program at the Greene Correctional Institution (GCI) is currently known as the Alcohol and Chemical Dependency Program (ACDP). It typically serves 64 male residents but was temporarily suspended on July 15, 2020, due to a staffing shortage. However, it was restarted in October of 2021. GCI now has a dedicated Substance Abuse Program Coordinator and two full time Counselor positions with plans of adding a third Counselor position.

The program clients reside in a separate dorm and treatment services are offered in the dorm day room, with a dedicated recreation yard outside. Men enrolled in the program are given evidence-based services and trauma- informed care.

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

Men enter the RSAT Program via court referral for substance use disorder (SUD) treatment. The individual must be at least 21 years old, have a recommended wide range achievement test (WRAT) reading level of 3.0 or above, speak and understand English, and have no active detainer.

The Substance Abuse Subtle Screening Inventory (SASSI) is the primary screening tool to determine eligibility and appropriateness for ACDP prison-based services. Clients take the SASSI as part of the prison admission process at a Prisons Diagnostic Center. Individuals with prior admissions that scored 3, 4, or 5 are not retested. Recommendations for the client's level of care are based on the following placement criteria:

- Level 1: No treatment is recommended at this time
- Level 2: Substance use intervention services

- Level 3: Intermediate treatment services
- Level 4: Intermediate/long-term treatment services
- Level 5: Long-term treatment services

Once an individual has been referred for services, the substance abuse program coordinator facilitates the intake and orientation process. Then the substance abuse counselor (SAC) completes the common assessment, a biopsychosocial assessment that assesses legal status and criminal justice system history, education and employment history, family and social relationships, drug and alcohol use history, medical and psychiatric history. This assessment process also evaluates the client's strengths and challenges, problems and needs, relapse and recidivism potential, and impact on family and community. The assessment and screening tools establish the final recommended treatment placement for an individual in an ACDP program.

The master treatment plan is a collaborative effort between the client and the SAC. Utilizing the information obtained from the assessment, the SAC and client identify and rank problems and goals to be addressed during the treatment program. They both review the completed treatment plan to ensure agreement and comprehension and the client, SAC, and substance abuse program coordinator sign and file appropriately.

The treatment plan is reviewed at a minimum of every 30 days and updated as needed to reflect current issues, maintain relevance, and to modify goals, objectives, interventions, and time frames.

#### MODALITY OF RSAT PROGRAM

The RSAT Program at GCI is a modified 6-month therapeutic community, with a heavy emphasis on cognitive behavioral therapy (CBT). The program utilizes the evidence-based practice curriculum, *A New Direction* [Hazelden], as well as *Anger Management for Substance Abuse and Mental Health Clients* [SAMHSA]. The client enters orientation and transitions through the stages of treatment by successfully completing treatment tasks, learning activities, and staff recommendation.

- Phase 1: Orientation. The phase is a minimum of 1 month and includes completion of the
  orientation workbook, a heavy focus on how to complete a "thinking report," and the creation
  of an individualized treatment plan.
- Phase 2: Main Treatment. This phase is a minimum of 2 months and includes completion of the alcohol and substance use workbook, criminal and addictive thinking workbook, and socialization workbook; thinking reports; and completion of treatment plan goals and objectives.
- Phase 3: Relapse Prevention. This phase is a minimum of 1 month and includes completion of the relapse prevention workbook and release and reintegration workbook; thinking reports; and a heavy focus on completion a relapse prevention plan.
- Phase 4: Transition. This phase is 1 to 2 months and includes a modified treatment schedule, completion of assignments, and a heavy focus on application of skills learned.

The discharge process take place when the client has completed their treatment goals and coursework. During weekly treatment team meetings, the team reviews cases to determine the client's treatment plan progress and if a client has met the goals and objectives for program completion.

### CONTINUING CARE/REINTEGRATION

The continuing care and referral process begins as early as possible and continues throughout the course of treatment. Planning discussions to identify continuing care needs and case management services are coordinated between the client, SAC, and program case manager.

A collaborative reintegration plan identifies the resources that an RSAT participant can access upon release from prison. The individual's Division of Adult Correction/Prison case manager receives a copy of the reintegration plan to help develop a formal transition plan. The RSAT participant and their SAC sign the reintegration plan and the original is placed in the chart.

There are several minimum custody facilities with the primary mission as reentry facilities where RSAT participants can spend the last 1 to 2 years of their sentences engaging in intense

programming related to release and reintegration. Men assigned to these facilities are within the local catchment area and can connect and engage with local reentry councils as well as Probation and Parole Departments for post-release supervision, employment services, and other local nonprofit organizations before release to the community.

#### PROGRAM HIGHLIGHT

The RSAT Program serves many individuals with significant medical issues in addition to SUD.

#### PROGRAM CONTACT INFORMATION

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