



# South Carolina

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## PRISON PROGRAMS

Camille Griffin Graham Correctional Institution

Turbeville Correctional Facility

Wateree Correctional Institution

## Prison Programs



### Camille Griffin Graham Correctional Institution Current FY2020 RSAT funded program

#### OVERVIEW OF PROGRAM

The RSAT Program at the Camille Griffin Graham Correctional Institution is a separate 70-bed unit at a facility known as the Hope Program. The Hope Program provides services for women with co-occurring disorders (COD). It is a therapeutic community that provides cognitive-behavioral based treatment and utilizes standardized manuals throughout its three phases. The residents receive evidence-based services, trauma-informed care, and medication-assisted treatment (MAT) (i.e., Vivitrol).

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

Women who enter the program receive the Texas Christian University (TCU) Drug Screen, the Global Risk Assessment Device-Female Offenders (GRAD-FO) screening tool, and a biopsychosocial assessment. The RSAT team uses these to collaboratively develop a treatment plan with the participant, based on her goals. Treatment plan goals follow SMART criteria: specific, measurable, attainable, relevant, and time bound. Women must be within 6 to 48 months from max-out release date or be granted conditional parole relating to substance use treatment needs. They must not be convicted of a current and/or prior sexual-related crime; must not have a Category 4 or 5 detainer (open arrests or warrants); must be medically compliant and stabilized if diagnosed with a serious mental illness; and must have no documented acts of violence 6 months prior to admission.

#### MODALITY OF TREATMENT

The Hope Program is designed to provide individuals with 6 to 9 months of gender-specific structured programming and uses a therapeutic community treatment approach. Treatment modalities include cognitive behavioral therapy (CBT) and motivational interviewing group process (MIGP).

There are three phases of treatment.

- **Phase 1: Orientation.** The resident becomes familiar with the program and prepares for effective participation in the treatment process. As a new member of the community, the resident is encouraged and expected to meet other residents and to develop an

understanding and knowledge of the rules and expectations of the community. In addition, residents are expected to develop an understanding of substance use disorder (SUD) and break through any denial regarding her own SUD.

- **Phase 2: Main Phase.** This phase emphasizes psychosocial issues related to SUD. Residents' participation in groups is regular and consistent. Active participation in the community process and involvement in the levels of the house structure are expectations of this phase. Residents are expected to encourage their families to attend the family program during visits and other communication. The educational curriculum includes criminal thinking, family issues, and human sexuality.
- **Phase 3: Reentry.** The resident is expected to take a leadership role in the therapeutic community, be a visible role model, and take an active part in developing and maintaining the community's tradition. Residents participate in the relapse prevention curriculum and continue to work on criminal thinking and participate in rational emotive therapy. Residents continue to participate in groups and use tools learned in previous phases.

Classes and groups include:

- Depression,
- Grief,
- Substance Abuse Matrix (women's recovery journal, criminal justice matrix),
- Anger management (SAMSHA-based), and
- Victim impact group.

### PROGRAM HIGHLIGHT

The program incorporates a family focus group once a month that allows family members to receive family support and learn about the disease concept of SUD and about additional resources in the community for family member such as Al Anon/Alateen.

A resident graduates from the program after successfully working through all three phases, passing drugs screens, developing a recovery management plan, and meeting 80% of treatment goals.

Hope Program residents have a variety of pro-social programming and activities that are an important part of the therapeutic community. There are committees that are part of the community that meet regularly and are responsible for maintenance within the Unit, orienting newcomers, and building morale.

Other pro-social activities included a crocheting circle, fund-raising activities for breast cancer and domestic violence organizations and a regularly scheduled "Walk with the Warden" for those women who have been discipline free. The "Walk with the Warden" provides an opportunity for Hope Program participants to voice their ideas about making the program better and talk about their own personal recovery issues to the Warden of Camille G. Graham Correctional Facility.

## MAT PROGRAM INFORMATION

Hope Program participants with alcohol and/or opioid use disorders are assessed for eligibility for the MAT program which provides naltrexone / Vivitrol. Women are given a Vivitrol injection upon release with referrals to providers within their communities of release for continued treatment. When individuals enter the facility taking prescribed medication for opioid or alcohol used disorder, medical staff indicated that the institutional physician is notified and medication treatment and orders are arranged.

When a woman enters the facility from a county detention center with medications to treat mental health disorders on a “continuity of care” order, they will be continued until a psychiatric MD meets with the woman for assessment. Upon release, a five-day supply of medication is provided along with a prescription for 30-day’s worth of the medication. Referrals and/or appointment are made for mental health providers prior to release.

A new initiative will provide every woman leaving the facility with two doses (one box) of Narcan. It also will include educational sessions on identifying warning signs of overdose and the proper administration of Narcan along with educational materials for those assessed in need by DAODAS MAT Peer Support Specialists.

## CONTINUING CARE/REINTEGRATION

Participants who return to the general prison population before release attend weekly continuing care groups. The primary counselor establishes a follow-up appointment with a community service provider prior to the participant’s release. Approximately 2 weeks before graduation and release from the program, a program designee makes a referral and schedules an appointment at a substance abuse program in the resident’s home county. A transitional relapse prevention plan identifies a graduate’s family or friend “recovery partner” in the community. Additionally, women are linked to community support groups and given a list of meetings in their area based on their preference (e.g., Celebrate Recovery, Faces & Voices of Recovery (FAVOR), Alcoholics Anonymous/Narcotics Anonymous [AA/NA]).

Women who choose Vivitrol and/or are taking medication for mental health disorders are assured continuity of care with the help of DAODAS Peer Specialists who contact local providers in their communities of release. Peer Specialists will make sure that MAT providers accept State Opioid Response (SOR) funding that will fund continued medication to treat opioid use disorder for people released from prisons and jails. Peer Specialists also provide and/or arrange transportation for people to help remove barriers for continued treatment.

The Camille G. Graham Correctional Institution’s Medical staff provides at least a five-day supply of medication for medical and mental health disorders along with a 30-day prescription. Appointments are made whenever possible prior to release for serious medical issues and psychiatric care. Peer Specialists provide lists of an individual’s local agencies and resources within the county of release and will also reach out to other states to assist with setting up continued care as necessary.

## PROGRAM CONTACT INFORMATION

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*Information updated 7/27/2023*



## Turbeville Correctional Facility

### FY2020 RSAT funded program

## OVERVIEW OF PROGRAM

The Turbeville Correctional Facility is a medium-security prison with the capacity for 1,499 adult male residents ages 17 to 25. The RSAT Program at Turbeville Correctional is known as the Male Youthful Offender Act Addiction Treatment Unit (ATU). Residents reside in a separate housing unit called Wyboo A. The program provides cognitive-behavioral based treatment and utilizes standardized manuals throughout its three phases. The residents are provided evidence-based services, trauma-informed care, and are offered medication-assisted treatment (MAT) in the form of naltrexone (Vivitrol).

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

ATU program participants can be referred in the following ways:

- Self-referral,
- Referred by the institution,
- Court ordered,
- Through the Youthful Offender Program, or
- Through the Intensive Supervision Board.

Prior to entering the program, individuals are administered the Texas Christian University Drug Screening (TCUDS) to screen for a history of substance use. The admission process includes checking custody level, mental health clearance, if needed, and an initial drug screen. Participants must be enrolled in the Youthful Offender Program to qualify for services in the ATU. If the client screens negative on the TCUDS, he is deemed ineligible for the ATU program.

Once an individual is admitted to the program, the intake coordinator provides the client with the rules and regulations of the program, his rights and responsibilities as a participant, client consent forms, participant manual, information regarding the therapeutic community, and a curriculum. Once accepted into the ATU, participants will be administered the TCUDS-5 several more times throughout treatment to identify progress. They are also administered South Carolina DOC's GRAD-MO which is a comprehensive biopsychosocial assessment that includes items relating to criminal thinking, family and substance use. Trauma is assessed by their assigned Clinical Counselor and all staff are trauma-informed. Motivational level is determined within the first six weeks of orientation and is built into the curriculum although there is no specific instrument utilized. A Test for Adult Basic

Education (TABE) is administered by educational staff to assess skills and knowledge of adult learners.

There is a shorter program within the ATU for a few young men who are court-ordered to attend three courses that are offered within the ATU. Once they successfully complete these classes, they are usually released on Intensive Supervision.

## MODALITY OF RSAT PROGRAM

The ATU Program is a therapeutic community with the goal of helping participants understand substance use disorder (SUD), the role that criminal thinking and behavior have in facilitating recurring substance use and developing a long-term recovery plan. ATU employs the evidence-based treatment *Matrix Model for Teens and Young Adults* (Hazelden).

Residents advance through three phases based on progress in treatment, completion of an individual treatment plan, regular participation in individual and group sessions, building rapport with staff and other peers, and acclimating to the structure of the therapeutic community. These include:

### Phase 1: Orientation (Weeks 1–4).

- **Individual counseling** sessions address biopsychosocial assessment, treatment planning, completion of GRAD-MO, and acclimation to therapeutic community, and are critical for building rapport between the counselor and the resident.
- **MAT** is described by counselors, who then refer consenting residents with opioid use disorder (OUD) to a Department of Alcohol and Other Drug Abuse Services (DAODAS) peer support specialist to begin the first step in the naltrexone (Vivitrol) referral process.
- **Early recovery skills group** work emphasizes how to use cognitive tools to reduce craving, how to manage free time, the importance of discontinuing all illicit substances, and how to connect community resources and support. If a group has more than 16 residents, the counselor is supported by a co-facilitator. This allows the counselor to provide the necessary attention to each participant. Participants are required to take an orientation test in to advance to the next phase.

**Phase 2: Main Treatment** (Weeks 5–16). During this phase, the client has acclimated to the program and individuals focus on psychosocial issues and family relationships. Residents participate in relapse prevention groups, a family program, an adjustment group, and random drug screens.

- **Relapse prevention groups** provide residents with tools to avoid or reduce a recurrence of substance use. Topics are focused on behavior change, changing cognitive/affective orientation, and connecting with resources within the community and the institution.
- **The family program** educates participants and their families about SUD, how the brain's structure and function change when exposed to substances, tolerance, the effect of substances on

### PROGRAM HIGHLIGHT

The family program is essential for providing information for the resident and his family. This is done through slide presentations, videos, and group discussions.

individuals' health and family relationships, and how families can be supportive during the treatment process.

- **The adjustment group** provides tools to manage thinking errors, handling basic life skills, understanding the negative effects of criminal thinking, and remaining abstinent from illicit substances. During the adjustment group residents learn to think differently and live without using substances.
- **Random drug screens** determine if the client receives a relapse analysis (negative drug screen) or a relapse prevention plan (positive drug screen). The relapse prevention plan includes an updated treatment plan and an updated diagnosis. The counselor will help the resident understand what may have caused the recurrence and how to avoid this in the future.

**Phase 3: Reentry** (Weeks 17–24). During this phase, the resident mentally prepares to transition to the community or back to his family. During this phase, the client focuses on social support groups and drug screens.

- **Support groups** allow the resident to address issues regarding integration back into the community and his family. During this time, the client focuses on addressing the anxiety that is associated with being released, housing placement, and building bonds and support from other group members and family members.
- **Drug screens** determine if the client is released or receives a setback or an extended parole date. If the client receives a setback or an extended parole date, he is provided a relapse analysis or a relapse prevention plan. The relapse prevention plan includes an updated treatment plan and an updated diagnosis. The counselor will help the resident understand what may have caused the recurrence and how to avoid this in the future.

The young men in the ATU program have a variety of pro-social programming and activities that are an important part of the therapeutic community. There are committees that are part of the community that meet regularly and are responsible for maintenance within the Unit, orienting newcomers, and building morale.

## MAT PROGRAM INFORMATION

ATU participants with alcohol and/or opioid use disorders are assessed for eligibility for medication (naltrexone / long-acting injectable naltrexone). Peer Support Specialists funded by DAODAS interview and assess participants who have confirmed alcohol and/or opioid use disorder. After lab results confirm medical eligibility, participants are given long-acting injectable naltrexone upon release with referrals to providers within their communities of release for continued treatment.

When an individual enters the facility from a county detention center with medications to treat mental health disorders on a “continuity of care” order, they will be continued until a psychiatric MD meets with the young man for assessment. Upon release, a seven-day supply of medication is provided along with a prescription for 30-day’s worth of the medication. Referrals and/or appointment are made for mental health providers prior to release.

A new initiative will provide every individual leaving the facility with two doses (one box) of naloxone. It also will include educational sessions on identifying warning signs of overdose and the proper administration of naloxone along with educational materials for those assessed in need by DAODAS MAT Peer Support Specialists.



## CONTINUING CARE/REINTEGRATION

As part of Phase 3, the resident works with the intake/transition coordinator to seek assistance with housing, employment, initiation of MAT (naltrexone [Vivitrol]) and prepares for graduation from the program.

Discharge plans include release of information forms for correctional and community-based providers, as well as a checklist of services provided by the facility, recommendations for continuing care, follow-up plans and referrals. The Intake Discharge Coordinator in coordination with Peer Support Specialists and parole/probation officers ensures that all participants have continued treatment and services as needed, public benefits and family education / counseling. For those young men in need of public assistance upon release, they are referred to SC Thrive which is a non-profit organization that helps people access resources, assistance, and benefits.

South Carolina's DAODAS Peer Support Specialists follow-up with young men for at least three months after release or in some cases longer as necessary.

There are strong linkages with community-based and state/federal service providers. The transitional coordinator collaborates with South Carolina Employment Services, halfway houses, Social Security Administration, Department of Social Services, County Alcohol and Drug Commission, and Man 2 Man, a part of the SC Center for Fathers and Families organization.

## PROGRAM CONTACT INFORMATION

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## Wateree River Correctional Institution

Current FY2023 RSAT funded program

### OVERVIEW OF PROGRAM

The Wateree River Correctional Institution is a prison within the South Carolina Department of Corrections. A full description of the program will be available soon.

*Information updated 9/12/2023*