



# Vermont

---

PRISON PROGRAM

Chittenden Regional Correctional Facility (CRCF)

## Prison Program



**Chittenden Regional Correctional Facility (CRCF)**

**Current FY2019 RSAT funded program**

### OVERVIEW OF PROGRAM

The RSAT Program at the Chittenden Regional Correctional Facility (CRCF) is currently the only RSAT Program in Vermont. Admission to the program is strictly voluntary and based on self-referral or by referral from WellPath, the healthcare contractor who provides all medical services in the facility. The program is integrated into a larger MAT program at CRCF that serves adult women who meet diagnostic criteria for substance use disorder (SUD) with an indeterminate length of stay.

Individuals who are within 6 to 12 months of release are recognized as a priority population. The program aims to engage and provide services to women who may or may not seek medical attention and intervention services in traditional community-based treatment systems, such as federally funded specialty substance use providers, primary care offices, Federally Qualified Health Centers (FQHCs), hospital systems, and other community health or behavioral health centers. Residents are offered all three FDA-approved medications for opioid use disorder: buprenorphine, methadone, and naltrexone.

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

Contracted, qualified healthcare professionals screen and assess all women who enter CRCF for SUD using validated instruments based on DSM-5 (or DSM-IV) criteria, urinalysis, the Clinical Opioid Withdrawal Scale (COWS), or Clinical Institute Withdrawal Assessment for Alcohol (CIWA) protocols. When clinically indicated, screeners also use the Vermont Prescription Monitoring System (VPMS) and/or community records. Treatment planning is based on the needs of the individual.

## MODALITY OF TREATMENT

Individuals engaged in the RSAT Program receive evidence-based co-occurring disorder (COD) treatment services that are based on SAMHSA's recovery-oriented system of care (ROSC). Women receive services that include a continuum of individual, group, and case management sessions each week. Peer coaching is available through a forensic peer recovery program called Open Ears. Peer coaches offer lived support of incarceration as well as mental health and substance use disorder support. Provided in the contract with WellPath is a tablet-based app called "Breaking Free" based on the online program *Breaking Free*, a treatment and recovery program for drug and alcohol use. The app has activities that let individuals set alerts to use certain skills, shift their focus and manage cravings.

There are no formal phases of treatment; rather participants are "met where they are." Current modes of evidenced-based therapy include but are not limited to:

- Dialectical behavior therapy (DBT),
- Cognitive behavior therapy (CBT) and mindfulness,
- *Seeking Safety* [Treatment Innovations, Lisa Najavits] curriculum-based model that helps people with trauma, post-traumatic stress disorder (PTSD) and substance use disorder,
- 12 steps for recovery, and
- *Road Map to Recovery* (R2R).

A *Women's Addiction Workbook* curriculum [Treatment Innovations, Lisa Najavits] is another resource offered to participants. Counselors are contracted from WellPath for individual counseling and group programming.

## MAT PROGRAM INFORMATION

Residents are offered all three FDA-approved medications for opioid use disorder: buprenorphine, methadone, and naltrexone.

## CONTINUING CARE/REINTEGRATION

The individual, their chosen designated community-based treatment provider, contracted health services staff, and the DOC caseworkers (as appropriate) work together on reentry planning. A woman's discharge plan includes her current treatment plan, recommendations for follow-up care, keep on person (KOP) medications, if indicated, and prescriptions called into their pharmacy of choice, as well as referral and contact information to access MAT (if applicable) and other services at designated community-based treatment providers.

If a woman is receiving MAT at the time of release, her access to insurance will be verified and she will be provided with a last dose letter, a prescription for buprenorphine and an appointment or designated time to present at a Vermont HUB for methadone or Spoke community based provider.

## PROGRAM CONTACT INFORMATION

Max Titus, Director of Health and Wellness  
Vermont Department of Corrections  
280 State Drive  
Waterbury, Vermont 05671-2000  
[Max.Titus@vermont.gov](mailto:Max.Titus@vermont.gov)  
802-241-0949

*Information updated 9/13/23*