



West Virginia

PRISON PROGRAM

West Virginia Division of Rehabilitation and Corrections

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Current FY202219 RSAT funded program

~~Current FY19 Funding: \$219,466² (statewide)~~

OVERVIEW OF PROGRAM

The West Virginia Division of Rehabilitation and Corrections (WVDRC) currently operates 10 RSAT programs that provide services for men and women with co-occurring disorders (COD). Statewide, the program is serves 495 men and women. There are approximately 50 staff made up of unit managers, substance use counselors, and RSAT-trained counselors. The residents are provided evidence-based services, trauma-informed care, and are offered medication-assisted treatment (MAT) ~~(i.e., naltrexone [Vivitrol])~~.

The facilities that operate RSAT Programs are:

- Beckley Correctional Center (RSAT program serves men)
- Charleston Correctional Center (RSAT program serves women)
- Denmark Correctional Center (RSAT program serves men)
- Huttonsville Correctional Center (RSAT program serves men)
- Lakin Correctional Center (RSAT program serves women)
- Parkersburg Correctional Center (RSAT program serves men)
- Pruntytown Correctional Center (RSAT program serves men)
- Salem Correctional Center (RSAT program serves men)
- St. Mary's Correctional Center (RSAT program serves men)
- Southwestern Regional Jail (RSAT program serves men)

²~~Funding information estimated or extracted from best available information and may be subject to change~~

As a team building exercise, residents are empowered to come together and name the dedicated housing unit in which they reside.

The most common substances used by participants reportedly varies by region, with the southern part of the state reporting more methamphetamine and synthetic heroin use. Opioids and marijuana are used equally regardless of region.

ELIGIBILITY CRITERIA, SCREENING/ASSESSMENT, AND TREATMENT PLANNING

Individuals entering the WVDRC receive extensive mental health and substance use screening assessments that guide the admission and treatment planning process. Assessments include the level of service/case management inventory (LSCMI), the motivational interview guide (MIG), and the Texas Christian University Drug Screen (TCUDS). Clients can self-refer or may be mandated by a judge for assessment and treatment. Requests for admission to the RSAT Program are reviewed by the program manager and there is frequently a waitlist.

Once an individual is admitted to the program, the RSAT counselors and case managers develop a master treatment plan based on the assessment scores. RSAT programs can be up to 12 months in length with an average length of treatment of 8 months. Graduation from the program is based on the successful completion of all five phases of RSAT programming.

MODALITY OF RSAT TREATMENT

RSAT Programs in WVDCR are therapeutic communities. In addition to RSAT treatment, participants may receive treatment by an outside vendor, the behavioral health management company PSIMED. There are five phases of treatment.

- **Phase 1: Acclimation.** In the 2- to 4-week phase, the individual is introduced to the community and the healthy community lifestyle.
- **Phase 2: Orientation.** In this 1- to 3-month phase the individual is immersed into the community lifestyle and begins to practice the behaviors, attitudes, and values promoted by the community.
- **Phase 3: Primary Treatment.** In this 4- to 6-month phase, the community is the major agent of change for the participant through daily interactions with community members and staff. The goal of this phase is socialization through positive peer relations, substance use disorder (SUD) treatment, and addressing specific criminogenic risks and needs. An individual who has completed at least 2 months in this phase may be selected by staff to serve as an “elder.”
- **Phase 4: Practicum.** In this 2- to 4-week phase the individual has an opportunity to live a healthy lifestyle with appropriate structure and demonstrate competency regarding community attitudes, behaviors, and values. Participants in this phase of programming can

PROGRAM HIGHLIGHT

Many RSAT participants have co-occurring disorders and a history of trauma.

be retained by the community for mentoring purposes for up to 18 months. Participants who successfully complete this phase should begin continuing care/reintegration planning.

- **Phase 5: Transition.** This phase focuses on maintaining a healthy lifestyle and preparing to transition into continuing care, either within the Division of Corrections or in the community. Participants in this phase of programming may also be retained by the community for mentoring purposes. To achieve phase 5, the participant must successfully complete phases 1 through 4.

MAT PROGRAMMING

MAT is offered to all units the entire time participants are enrolled in the program and up until they are released. Vivitrol, Subutex and Sublocade (buprenorphine) are all offered. in the form of Vivitrol.

CONTINUING CARE/REINTEGRATION

The substance abuse therapist develops a reentry plan for each participant. Reentry plans vary according to the individual's specific needs. However, many of them are offered and receive help with housing, family issues, and legal issues, such as the 2nd Chance Driving Program. Substance abuse therapists also follow up by contacting the individual over the course of the next 2 years at 3, 6, 12, 18, and 24 months to follow their progress upon being released.

The program manager is currently tracking success of RSAT participants in the 3 to 6 months following release. Thus far, results show that individuals who complete the RSAT Program and are released to their own apartments or shelters and those who have a "home plan" (e.g., post-release planning regarding family, friends, and money so as not to go back to old habits and lifestyle) have the greatest success.

PROGRAM CONTACT INFORMATION

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