



Wyoming

PRISON PROGRAMS

Wyoming Medium Correctional Institution Intensive Treatment Unit, Wyoming Department of Corrections

Wyoming Women's Center Intensive Treatment Unit, Wyoming Department of Corrections

CONTINUING CARE/REINTEGRATION PROGRAMS

Caspar Reentry Center – Therapeutic Community Treatment (CRC-TC) Program, Wyoming Department of Corrections

Prison Programs



Wyoming Medium Correctional Institution Intensive Treatment Unit, Wyoming Department of Corrections

Current FY2023 RSAT funded program

OVERVIEW OF PROGRAM

The RSAT program in the Wyoming Medium Correctional Institution's Intensive Treatment Unit (WMCI-ITU) was established in conjunction with the opening of the facility in January of 2010. The WMCI-ITU can accommodate 72 men and is designed to operate as a modified therapeutic community using a holistic treatment approach. Like the Wyoming Women's Center-ITU, the WMCI-ITU program is in a unit separate from the general population and is certified under the Wyoming Department of Health's substance abuse certification standards.

ELIGIBILITY CRITERIA, SCREENING/ASSESSMENT, AND TREATMENT PLANNING

Men who enter the WMCI are assessed over a two-week period in order to identify level of care and classification according to American Society of Addiction Medicine (ASAM) criteria. Those who score high on the Texas Christian University (TCU) Drug Screen-5 and the COMPAS (Correctional Offender Management Profiling for Alternative Sanctions) qualify for substance use treatment. Depending on an individual's current conviction, self-report score, collateral information, and mental health status, he will be interviewed for the Intensive Treatment Unit (ITU) program.

Other routes to RSAT program treatment are through Parole, staff recommendations and incarcerated men requesting treatment. However, all men must also be eligible through the criteria listed above.

All men who are accepted into the ITU must have enough time prior to release to complete the program. ITU is a six-month program with step-down phases in the facility's intensive out-patient program unit as necessary. If an individual is granted parole, it is understood that he must successfully complete ITU prior to his supervised release.

Corizon is the mental health vendor for the WMCI. Within the two-week period of initial screening and assessment, mental health and co-occurring disorders are identified with a proprietary mental health instrument administered by Corizon staff. Community-based mental health / psychiatric records are obtained with a release of information if available for additional information. Individuals

may be referred to a psychiatrist, if necessary, for medication. For those people with additional mental health needs, classification to a Mental Health unit is an option.

Once men are admitted into the ITU more information is obtained about their substance use history, motivation, social supports, criminal thinking, and criminal history using the Addiction Severity Index (ASI) and TCU Core Forms. Other information attained includes family involvement, treatment history for both substance use and mental health and history of trauma. Although intake screenings / assessments upon entry into the facility help decide the ITU is the most appropriate level of care, the results of the TCU Core Forms help establish a better understanding of needs and goals for a resident to work towards while participating in the ITU.

ITU staff also use the Strengths, Needs, Abilities and Preferences (SNAP) approach when developing treatment plans for residents. SNAP worksheets help create an individualized and collaborative plan that has been endorsed by SAMHSA as a trauma and evidence informed family and community-centered process. This method along with ASAM level of care guides placement and classification of men according to their substance use, mental health, health, and other needs.

MODALITY OF RSAT PROGRAM

The intent of the program is to create an environment that provides a 24/7 learning experience that supports and reinforces positive life choices, the acquisition of life and recovery skills, and the acceptance of ongoing recovery maintenance. Treatment integrates social learning, cognitive behavioral intervention, and therapeutic community principles and methods to provide a powerful intervention that addresses both substance use disorder (SUD) and criminogenic treatment needs.

PROGRAM HIGHLIGHT

The WMCI responds to the cultural and religious beliefs of indigenous people who are incarcerated within the facility through the inclusion of sweat lodges, recovery curricula and groups specially designed for them.

The ITU utilizes evidence-based curriculums in groups that address criminal thinking and substance use such as:

- Hazelden's "New Direction" that helps reduce relapse and recidivism
- National Institute of Correction's (NIC) "Thinking For a Change" that addresses the cognitive, social, and emotional needs of residents with a goal of reducing at-risk and criminal behaviors
- Texas Christian University (TCU) Mapping Interventions which improves communication and decision making that results in increased treatment engagement and client progress.

ITU staff use cognitive behavioral treatment skills in treatment groups to help residents identify and replace unhealthy antisocial thinking in order to change criminal and addictive behavior patterns and support long-term recovery. Certified Peer Specialists model pro-social skills and behaviors through daily interactions with residents, as do all ITU staff and Officers. Residents understand that to be a member of the ITU modified therapeutic community is to be held to a higher accountability standard. Positive peer pressure that reinforces pro-social healthy interaction works with treatment to target criminogenic needs.

The ITU is at least six months in length. There are three phases within the ITU with hierarchical structures in place for residents. Phase 1 is the Orientation Phase which lasts at least 30 days. Men learn the rules and regulation of the Program, become acclimated to living within a therapeutic community and begin to accept help from community brothers. Phase 2 is the Treatment Phase where men spend at least 4 months attending groups, individual meetings, and case management. During this phase, residents hold higher positions of responsibility within the community. Residents in Phase 2 also have more privileges such as playing board and card games after hours. The final stage is Re-Entry. This 30-day phase provides the most privileges as well as the most responsibilities. Residents may become Big Brothers in this phase as long as they exhibit maturity and pro-social growth. Re-Entry plans are fully developed and the ITU resident should be ready for successful transition.

The ITU staff meets with an ITU family member at the 90-day mark in the ITU program to provide him specific and detailed feedback of progress and any necessary improvement needed in particular target areas. Similarly, ITU staff meets to discuss family members who will be reaching their six-month mark soon. If the ITU staff agree that a family member has met all their treatment goals and program requirement, he will be notified and begin the process of program completion. If the treatment team decides there are still areas to be worked on, the family member will be reviewed again in one month.

MAT PROGRAMMING

Medicated-assisted treatment (MAT) is offered in all RSAT funded ITUs in Wyoming in the form of naltrexone (Vivitrol). After a medical and mental health screening, participants are given oral naltrexone a few days prior to release to ensure there is no allergic reaction. If there are no medical complication, they receive a Vivitrol injection prior to their release.

CONTINUING CARE/REINTEGRATION

A reentry transition team that includes Certified Peer Specialists meet with all ITU participants, including those on MAT, to ensure a successful transfer of care to community-based providers. Prior to their release, all participants answer 12 questions about their SUD and treatment in order to build a database of responses and compare them to recidivism, relapse, and overdose data to help provide information for more specified targeted treatment prior to release.

PROGRAM CONTACT INFORMATION

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Information updated 9/12/2023



Wyoming Women's Center Intensive Treatment Unit, Wyoming Department of Corrections

Current FY2023 RSAT funded program

OVERVIEW OF PROGRAM

The RSAT Program at the Wyoming Women's Center, known as the Women's Intensive Treatment Unit (WWC-ITU), began in 2003 as a 15-bed Unit. The first year it received RSAT funding was in 2009 and it eventually became a 32-bed program. It is designed to provide gender-specific substance use disorder (SUD) treatment services in a modified therapeutic community setting. The program is in a unit separate from the general population.

ELIGIBILITY CRITERIA, SCREENING/ASSESSMENT, AND TREATMENT PLANNING

Wyoming Women's Center screens and assesses all women who enter the facility for substance use severity and criminogenic risk/needs using the Texas Christian University Drug Screen 5 (TCUDS 5) and the Women's Risk Needs Assessment (WRNA). Women who score high on both instruments are assessed more thoroughly using the Addiction Severity Index (ASI) and the University of Rhode Island Change Assessment (URICA) to identify readiness to change and to determine level of care based upon American Society of Addiction Medicine (ASAM) criteria. Women who need the long-term intensity of a therapeutic community are classified to the Intensive Treatment Unit (ITU). Neither mental health needs nor past sexual related offenses are reasons for exclusion from the RSAT funded ITU.

Once women are admitted into the ITU, more information is obtained about substance use history, criminal justice involvement, mental health, PTSD and trauma-related issues, social supports, criminal thinking and health using a variety of TCU Core Forms. Although intake screenings / assessments upon entry into the facility helped decide the ITU is the most appropriate classification, the results of the TCU Core Forms help establish a better understanding of needs and goals for a resident to work towards while participating in the ITU.

ITU staff also use a Strengths, Needs, Abilities and Preferences (SNAP) worksheet to help a woman realize her goals for the future. This worksheet acts as a "rough draft" of a truly collaborative

PROGRAM HIGHLIGHT

The WWC-ITU does not discharge a woman out of the program if she tests positive for substance use during treatment, although she must restart the program. This decision ensures that they do not "abandon" an RSAT resident when she is in most need of treatment (i.e., during a period of relapse).

Treatment Plan. The SNAP approach is an individualized comprehensive approach to treatment planning and care utilized endorsed by SAMHSA as a trauma and evidence informed family and community-centered process. Although the schedule remains largely the same for most of the women in the ITU, treatment plans are individualized due to mental health / medical needs. It also is the beginning of each ITU resident's re-entry plan which includes highly individualized goals.

Treatment plans are based upon the results of screening and assessment instruments and are reviewed every 90 days. Completion of the program is based on achievement of all treatment goals and objectives.

MODALITY OF RSAT PROGRAM

The established mission of the WWC-ITU is "to create an environment that provides a 24-hour learning experience in which a resident's transformation in conduct, attitude, values, and emotions are introduced, monitored, and mutually reinforced as part of the daily regime." It is the aim of the program to provide residents with an opportunity to learn skills that will lead to recovery from SUD, in addition to the tools necessary to live a crime-free life. The gender-specific treatment focuses on the whole person, fostering personal responsibility, accountability, and emphasizing pro-social values and attitudes.

The ITU utilizes evidence-based curriculums that address criminal thinking such as:

- Courage to Change - participants address their individual problem areas based on a criminogenic risk and needs assessment.
- Thinking For a Change - interpersonal communication skills development and recognition of thought patterns that can lead to problematic, risky and criminal behaviors.

There are a variety of groups and classes that target criminogenic needs in the ITU. These include substance use disorder treatment, education, employment readiness, setting boundaries, anger management, communication skills, and healthy relationships and parenting groups. Cognitive-behavioral techniques and theory are the foundation throughout all classes which emphasize listening, taking others' perspectives and providing honest feedback.

The ITU's minimum length is six months but women can stay longer if therapeutically beneficial based on clinical and behavioral evidence. If a woman is having a more difficult time with re-entry planning, she is also allowed to stay in the ITU longer. Other women have successfully completed the program but have been allowed to stay as peer mentors. Each woman's course through the treatment is individual.

Successful completion of the ITU affects parole eligibility in a positive manner. Even if a resident has been granted parole, she will not be released until successful completion of the ITU. If a woman decides to quit ITU, she is always welcome back. However, after a woman leaves the ITU twice on her own, she will have to finish out her sentence even if she was granted parole previously. ITU staff consider these to be powerful incentives.

There are three phases within the ITU with hierarchical structures and responsibilities in place for residents. Phase 1 is the Orientation Phase which lasts approximately 4 weeks. Women become familiar with the ITU TC rules and regulations, are assessed by ITU staff / community elders and are introduced to basic concepts of cognitive self-change. Phase 2 is the Treatment Phase that can last approximately 16 weeks. Women become fully integrated into the community / treatment process;

develop a working knowledge of recovery and the connection between substance use and criminal behavior; practice communication skills through development of interpersonal relationships with other residents and take on more responsible roles within the ITU community. Phase 3 is the Re-Entry phase that lasts approximately 4 weeks. In this final phase, a woman now becomes the role model for new family members, leads groups and holds higher positions of responsibility in the community, completes her re-entry plan and demonstrates progress in all areas.

Days begin with a 50-minute Morning Motivation meeting, then Health and Wellness activities are scheduled for an hour between 9:05am – 9:55am. Depending on where an ITU resident is in their treatment process, they may next go to work study, and encounter group or meet with other ITU staff to address non-compliant behaviors. Throughout the weekdays, women will go to different groups / classes depending where they are in the program. However, all residents come together three times a week for Big Sister / Little Sister groups where the Orientation Group will provide time for new Big/Little Sisters to ask questions in a group setting.

MAT PROGRAMMING

Medicated-assisted treatment (MAT) is offered in all RSAT funded ITUs in Wyoming in the form of naltrexone (Vivitrol). After a medical and mental health screening, participants are given oral naltrexone a few days prior to release to ensure there is no allergic reaction. If there are no medical complication, they receive a Vivitrol injection prior to their release.

CONTINUING CARE/REINTEGRATION

A reentry transition team that includes Certified Peer Specialists meet with all ITU participants, including those on MAT, to ensure a successful transfer of care to community-based providers. Prior to their release, all participants answer 12 questions about their SUD and treatment in order to build a database of responses and compare them to recidivism, relapse, and overdose data to help provide information for more specified targeted treatment prior to release.

PROGRAM CONTACT INFORMATION

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Continuing Care/Reintegration Program



Caspar Reentry Center – Therapeutic Community Treatment (CRC-TC) Program, Wyoming Department of Corrections
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Current FY2023 RSAT funded program

OVERVIEW OF PROGRAM

The Caspar Re-Entry Center – Therapeutic Community Treatment (CRC-TC) Program began in February 2005 and is designed and operated as a secure long-term residential substance use disorder (SUD) treatment program based on therapeutic community principles and methods. The CRC-TC can accommodate 100 male participants. The mission of the CRC-TC is to provide a healthy, alcohol and substance-free environment in which treatment services focus on changing addictive and criminal behaviors. The program provides participants with the knowledge and skills necessary for a productive recovery-oriented lifestyle prior to reintegration to society.

ELIGIBILITY CRITERIA, SCREENING/ASSESSMENT, AND TREATMENT PLANNING

Men who enter the facility undergo screening and assessment for substance use severity and criminogenic risk/needs via the Texas Christian University Drug Screen 5 (TCUDS 5) and the Correctional Offender Management Profiling for Alternative Sanctions (COMPAS). Men who score high on both instruments are assessed more thoroughly using the Addiction Severity Index (ASI) and the University of Rhode Island Change Assessment (URICA) to identify readiness to change and to determine level of care based upon American Society of Addiction Medicine (ASAM) criteria. Men who need the long-term intensity of a therapeutic community are classified to the CRC-TC. Individuals are not excluded from the program if they have mental health needs or sexual related offenses.

Treatment plans are based upon the results of screening and assessment instruments and are reviewed every 90 days. Program completion is based on achievement of all treatment goals and objectives.

CRC-TC has maintained certification under the Wyoming Department of Health's Substance Abuse Certification Standards since April 14, 2005, and the American Correctional Association (ACA)'s Performance-Based Standards for Therapeutic Communities since August 11, 2008. The CRC-TC Program also provides medical and mental health services to individuals in the program and maintains National Commission on Correctional Health Care (NCCCHC) accreditation.

MODALITY OF RSAT PROGRAM

The established mission of the CRC-TC is “to create an environment that provides a 24-hour learning experience in which a resident’s transformation in conduct, attitude, values, and emotions are introduced, monitored, and mutually reinforced as part of the daily regime.” The program aims to provide residents with an opportunity to learn skills that will lead to recovery from SUD in addition to the tools necessary to live a crime free life.

The CRC-TC offers the following services to its residents:

- Individual counseling,
- Group counseling,
- SUD treatment,
- Educational groups,
- Peer led seminars,
- Daily small group sessions,
- Daily house meetings,
- Weekly family counseling sessions,
- Weekly family visitation,
- Matrix Model for methamphetamine [Hazelden],
- Substance misuse evaluations,
- Life skills and community reentry classes,
- Parenting and fatherhood classes,
- Anger management groups,
- Relapse prevention groups,
- Grief counseling groups,
- Narcotics Anonymous/Alcoholics Anonymous (NA/AA) groups,
- High school equivalency (GED) classes,
- Vocational rehabilitation services, and
- Volunteer religious groups.

MAT PROGRAMMING

Medicated-assisted treatment (MAT) in the form of naltrexone (Vivitrol) is offered in all RSAT-funded intensive treatment units (ITUs) within Wyoming. After a medical and mental health screening, participants are given oral naltrexone a few days prior to release to ensure there is no allergic reaction. The Vivitrol injection occurs days prior to their release.

CONTINUING CARE/REINTEGRATION

Prior to their release, all participants answer 12 questions about their SUD and treatment in order to build a database of responses and compare them to recidivism, relapse, and overdose data to help provide information for more specified targeted treatment prior to release.

PROGRAM HIGHLIGHT

A Reentry Transition Team that includes certified peer specialists meet with all ITU participants, including those on MAT, to ensure a successful transition of care to community-based providers.

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