# Texas

COUNTY JAIL PROGRAMS Caldwell County Jail Harris County Jail

JUVENILE AND YOUNG ADULT PROGRAM Dallas County Juvenile Department

CONTINUING CARE/REINTEGRATION PROGRAMS Harris County Residential Treatment Center (HCRTC) Hidalgo County Sheriff's Department (Community Supervision formerly known as Adult Probation) Judge John C. Creuzot Judicial Treatment Center

## **County Jail Programs**

Caldwell County Jail FY2019 RSAT Funded Program

#### **OVERVIEW OF PROGRAM**

The RSAT Program at the Caldwell County Jail is known as the Caldwell County Sheriff's Office Co-morbidity Initiative Phase 3. Program participants are provided evidence-based services and trauma-informed care. The Co-morbidity Initiative has been implemented in phases. Phase A, Assessment / Counseling, was implemented in February 2017. Phase B, Treatment/Therapy, was implemented in June 2017 after the RSAT grant was awarded. Individuals identified in Part A were then admitted to the newly established program structure.

Until being put on hold due to COVID-19, the program had been serving 12 men and women. Participants were integrated in the general population to allow others in the jail to see their successes and be inspired to apply to the program themselves.

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

The Caldwell County Jail is a small facility, which makes it easy for staff members to get to know each new arrival. Upon intake, individuals are screened by a medical professional who notes any physical and verbal indicators of substance use disorder (SUD). This information is passed to the jail's licensed professional counselor (LPC).

Medical and mental health evaluations include the Addiction Severity Index (ASI) and the Alcohol, Smoking and Substance Involvement Screening Test (ASSIST); a vocational evaluation is completed using the Seeking Safety protocol and Academia Process.

From these assessments, the LPC identifies potential candidates for the program. In order to be considered, individuals must submit a 500-word essay outlining why they want to participate in the

program, including their history and degree of substance use, and why they want to achieve sobriety. These essays are collected and evaluated in a joint conference among the counselor, treatment specialist, and sheriff's office staff.

### MODALITY OF RSAT PROGRAM

The RSAT Program capitalizes on the therapeutic milieu model, especially for group services. Co-occurring psychiatric and substance use disorder (COPSD) programming is woven into the evidence-based curriculum but is especially targeted in individual counseling and case management services. The level of services provided in this program ranges from American Society of Addiction Medicine (ASAM) .5 (Early Intervention) to 2.1 (Intensive Outpatient Services) within the structure of the residential setting.

## **PROGRAM HIGHLIGHT**

All clinicians are trained in trauma-informed practices and are expected to apply this lens in all therapeutic encounters and case conceptualizations.

Length of treatment will vary according to the needs of the individual, the length of stay, and continuing care participation; however, 60 to 90 days is the standard time needed to obtain a completion certification. Bluebonnet Trails Mental Health Services provides continuing care services, with graduates using this resource for years after completion of the program.

Individuals participate in Seeking Safety, an <u>evidence-based</u>, present-focused counseling model to help people attain safety from trauma and/or an SUD. When individuals require such therapy, the program provides a counselor for one-on-one sessions, thus making it relevant to a broad range of clients. This program has been modified to accommodate the facility and is a joint collaboration between Caldwell County Jail staff and the Bluebonnet Trails Mental Health Services treatment team.

Intensive and supportive groups are provided for men and women in services. Process groups compliment psychoeducation groups and cover a variety of wellness, relapse prevention, and disease model topics from various evidence-based curricula. Participants receive individual counseling and case management services to address individualized needs best suited for this intervention.

#### CONTINUING CARE/REINTEGRATION

Program graduates are provided continuing care by Bluebonnet Trails Mental Health Services, a community-based provider. In addition, individuals are referred to other community partners, including Alcoholics Anonymous (AA), Narcotics Anonymous (NA), and a church-sponsored mentorship program.

There is a high success rate for those who do not complete the program if they have been assigned to a court-ordered drug treatment program. Through communication received at this facility, former non-completers reported that this program prepared them for the mandated program. They said that whereas beforehand they might have been likely to just sit in class to meet their required obligations, participation in the RSAT Program taught them to how refocus their cognitive process and succeed.

#### **COMMUNITY PARTNER**

Bluebonnet Trails Mental Health Services 210-837-1456 Felicia.Jeffery@bbtrails.org

#### **PROGRAM CONTACT INFORMATION**

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Information updated 8/14/2020

Harris County Jail Current FY2022 RSAT funded program

## OVERVIEW OF PROGRAM

The RSAT Program at the Harris County Jail is named the Freedom Project. It currently serves 84 men and women who are housed in their own units. The residents are provided evidence-based services and offered medication-assisted therapy (MAT).

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

Men and women who enter the program have a history of a substance use disorder (SUD); a medium level of risk classification; and no current record or history of murder, sexual offenses, or abuse to children or the elderly. They are able to present a need that reentry can provide; are mentally and medically stable, with the ability to participate in an eight-hour-a-day program; and express a desire to change and a willingness to commit to the process of the program. Individuals are screened using the Texas Christian University's Criminal Thinking Scales (TCU CTS), the TCU Drug Screen (TCUDS), and the Homeless Management Information System (HMIS) Assessment.

The Freedom Project is planned as a 90-day program, with the average length of stay (pre-COVID-19) 30 to 45 days. The treatment process begins by conducting assessments and completing service plans that identify goals, objectives, and action plans; provide life skills and recovery skills; and identify appropriate treatment programs. Individualized service plans (ISPs) are developed by the client and case manager from the assessment findings.

#### MODALITY OF RSAT PROGRAM

The Freedom Project is a therapeutic community (TC). Through the use of Critical Time Intervention (Evidenced Based Modality), it focuses on the first three stages of behavior modification (change), which are:

- *Pre-contemplation*: the individual is unaware of problems or in denial that a problem exists;
- *Contemplation*: the individual will start to implement healthy behaviors in the foreseeable future; and
- *Preparation*: the individual is taking action soon and often taking steps in moving toward healthy behaviors.

The Freedom Project also uses a holistic strength-based approach to treatment, as well as cognitive behavioral treatment (CBT).

To successfully complete the 90-day program, participants must participate in group and individual program activities, help keep common areas clean, demonstrate good behavior, and follow rules. If an individual leaves the program early, he or she is given credit for days in a community program.

The Freedom Project offers participants access to motivational, accountability, problem-solving, and CBT groups.

#### MAT PROGRAMMING

The MAT program is provided through the medical department. Participants are referred based on need.

#### CONTINUING CARE/REINTEGRATION

The Freedom Project is essentially a re-entry program offering assessment and the development of service plans to identify facilities to which to transition each participant, whether inpatient or outpatient, when they are discharged. Follow-up usually takes place after discharge from the treatment facility. If outpatient, resources for a continuum of care may include housing referrals and resources in the community.

#### **COMMUNITY PARTNERS**

Council on Recovery 303 Jackson Hill Houston, TX 77007

Cenikor 4525 Glenwood Ave Deer Park, TX 77536

Cheyenne Center 10525 Eastex Fwy. Houston, TX 77093 Women's Resource 730 N. Post Oak Rd. Houston, TX 77024

Santa Maria Hostel 2605 Parker Rd. Houston, TX 77093 Angela House 6725 Reed Rd. Houston, TX 77087

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#### **PROGRAM CONTACT INFORMATION**

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Information updated 5/18/2022

## Juvenile and Young Adult Program

Dallas County Juvenile Department Current FY2022 RSAT funded program

#### **OVERVIEW OF PROGRAM**

The Residential Substance Use Treatment program (RDT) at the Dallas County Juvenile Department (DCJD) addresses the substance use treatment needs of youth ages 13 to 17 referred to the Department. Program participants have been identified as requiring residential substance use treatment and ordered by the Dallas County Family court to receive such services at the male or female facility.

The DCJD intensive residential substance use treatment program encompasses a comprehensive, evidence-based youth assessment based on an addiction severity index for teens (AccuCare). The typical length of stay for a youth is between 6 to 10 months. Services are provided by counselors who are licensed and trained in evidence-based practices. The program combines academic instruction, drug education, individualized treatment planning, and individual, group, and family counseling. The program provides comprehensive and compassionate services to assist the youth and their families in establishing a lifestyle free from drug and alcohol use. In addition to their drug treatment needs, youth will also receive services to address events/experiences that may have contributed to the ongoing substance use, such as: family conflict, complex trauma, chronic stress, sexual assault, adverse childhood experiences (ACE's), involvement in commercial sexual exploitation and criminogenic needs. The individualized treatment plan is developed with the youth and family and supervised by qualified professionals.

As part of the treatment program, an extensive discharge plan consisting of a comprehensive relapse prevention plan and step-down substance use treatment services is developed. The discharge plan includes probation/aftercare services, community-based referrals specific to the youth's individualized needs, and incommunity support for the youth after completion of formal treatment. The discharge plan component facilitates a positive re-entry into the youth's home community and targets potential problems as they arise to reduce the risk of relapse. The goal of RDT is to assist the youth in establishing a lifestyle free from alcohol and drug use. This goal is accomplished by

- 1) identifying the internal and external triggers of use, the body cues to the triggers, the criminal thinking, and faulty thinking patterns that contribute to continued use;
- by educating the youth and family about the progression of addiction, abstinence, recovery, the effects drug use has on the developing brain and body, and the relationship between trauma reminders and drug use;
- 3) by identifying how the youth's drug use affected the family dynamics; and
- 4) by providing the youth and family with skills to assist the client when re-integrated into the community and home.

The program design strives to promote success and reduce relapse.

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

Admission in the RDT program requires youth to have a substance use disorder diagnosis requiring a residential level of care according to the most recent Diagnostic and Statistical Manual (DSM), to have been court-ordered by a judge, to be under the supervision of the DCJD or to be discharged from another treatment facility with a residential drug treatment recommendation.

They are assessed for a substance use disorder (SUD) with assessments including the Teen Addiction Severity Index (webbased assessment through Accucare), the Texas Christian University Adolescent HIV and Criminal Thinking Assessment Form (TCU ADOL HVCTFORM), and the TCU Drug Screen II (ADOL); a mental health screening comprised of a trauma screen, mood and feelings questionnaire, strength and difficulties questionnaire, and Adverse Childhood Experiences (ACE) questionnaire; as well as a review of Pre-Admission Content Test (PACT) psychological assessment, and additional collateral information contained in the case management system TechShare. The youth and counselor develop an individualized treatment plan during an individual session and are due no later than five days after admission and are reviewed every 30 days

#### MODALITY OF RSAT PROGRAM

The RDT Program has three phases that include five levels of treatment, which coincide with the evidence-based practice curriculum *A New Direction* by Hazleden.

The first is considered orientation, in which the youth are acclimated to the program and advised of the expectations. During this phase, the youth's family history, individual and family strengths and challenges, and risk and protective factors are identified. The youth's life story is completed during this phase as well. At this time, goals and a treatment plan are also established.

The second phase is considered the treatment phase and encompasses levels one through four. During this phase of treatment, the youth are introduced to the disease concept of addiction, the effects of drug use on the body and brain, family dynamics, and how their use interfered with other aspects of their life. Additionally, the youth examine their criminal and addictive thinking patterns, internal and external triggers, high-risk situations and people, maladaptive responses and cycles, and address trauma narratives. Furthermore, the youth examine uncomfortable emotions that are difficult to identify and experience and helpful and skilled ways to get their needs met without unwanted outcomes. The third and final phase in treatment is the transition phase and encompasses level five. During this level, the youth explore risk factors and risk management. This level focuses on increasing protective factors, identifying a support system, and reestablishing the expectations and boundaries in the home. The youth inform their family members of their high-risk situations, internal and external triggers, how they would present, and ways the family can provide support in those moments of distress. The youth and family identify prosocial activities in which the youth can participate individually and with family.

Services are provided through daily peer groups (psychoeducational, process and experiential), multi-family group therapy, individual family therapy, and crisis intervention/de-escalation.

#### CONTINUING CARE/REINTEGRATION

Prior to discharge, the youth and primary client develop a comprehensive relapse prevention plan during an individual session. The relapse prevention plan identifies the youth's high-risk situations, internal and external triggers to use, effective coping skills, and support system.

Additionally, community-based services are identified, and referrals are made to

## **PROGRAM HIGHLIGHT**

Participants in the RDT program can take part in a talent show where they highlight skills and talents that might otherwise go unrecognized. Doing so increases their self-esteem, selfawareness, and self-confidence.

facilitate a continuum of care. If the youth is to participate in Dallas County Intensive Outpatient Program (IOP), the youth, parent/guardian, primary RDT counselor and receiving IOP counselor participate in a transitional meeting to discuss the relapse prevention plan, continued treatment needs, additional referrals made, and specific ways the youth and family can support one another.

#### **COMMUNITY PARTNER**

Dallas County SAU – IOP Dallas County FFT 414 South R L Thornton Freeway Dallas, TX 75203 214-860-4301

#### **PROGRAM CONTACT INFORMATION**

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Information updated 5/16/2022

## **Continuing Care/Reintegration Programs**

Harris County Residential Treatment Center (HCRTC) FY2019 RSAT Funded Program

#### **OVERVIEW OF PROGRAM**

The RSAT Program at the Harris County Residential Treatment Center (HCRTC) is a 345-bed residential program designed to serve clients who are identified by the HCRTC as having significant problems associated with substance use and dependency. The program is split into different tracks depending on gender, risk, and level of substance

use. The programs are named the Substance Abuse Treatment Facility (SATF; for men) and Women Helping Ourselves (WHO-A). SATF supports up to 225 clients; WHO-A can support up to 120. The genders are housed in separate pods. Both programs provide evidence-based services to individuals experiencing a substance use disorder (SUD) and mental health issues.

## **PROGRAM HIGHLIGHT**

The program is in the process of expanding its campus to increase capacity in serving the community. The new construction will offer high-tech classrooms and access to tablet technology.

#### Naltrexone (Vivitrol) is prescribed to individuals

in the facility after a physician or psychiatrist review. If an individual was enrolled in the MAT program while in the Harris County Jail, when he or she arrives at the facility, HCRTC provides ongoing support by transporting the client for Vivitrol shots or by continuing the naltrexone prescription, should the physician or psychiatrist find it medically appropriate to do so.

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

Individuals who enter the HCRTC RSAT Program must score between low-moderate and high risk on the Texas Risk Assessment System (TRAS), be at least 17 years old, and have limited mental health issues that have been stabilized without the need for significant psychiatric services.

Upon arrival at the Centralized Assessment Center, individuals are administered the TRAS along with a criminal attitudes pen-and-paper evaluation and a motivation assessment. If the client is scored low risk, no further evaluation will be conducted unless there is a significant change of

circumstances. If the client is moderate to high risk, he or she will be scheduled for a full TRAS assessment that day. The TRAS captures a broad range of potential criminogenic factors, including criminal history, employment and education, family, peers, neighborhood problems, substance use, and criminal attitudes/personality factors.

During the assessment, if there are any indicators that an individual may have an alcohol, drug, or mental health issue, the appropriate trailers will be conducted to assist in determining if further evaluation is necessary. If there is a potential substance use or mental health disorder, an appointment will be scheduled for the individual to see a clinician to determine the pervasiveness of the issues. The clinician will conduct a battery of assessments that may include a structured clinical interview for DSM-5 (SCID) (includes SUDs), a psychological evaluation, the Wechsler Abbreviated Scale of Intelligence-II (WASI-II), the Minnesota Multiphasic Personality Inventory – 2 - Restructured Form (MMPI-2-RF), the Personality Assessment Inventory (PAI), the Test of Memory Malingering (TOMM), a Structured Interview of Reported Symptoms – 2 (SIRS-2), the Beck Depression Inventory (BDI), the Beck Anxiety Inventory (BAI), and the Beck Hopelessness Scale (BHS).

#### MODALITY OF RSAT PROGRAM

The RSAT Program is a cognitive-behaviorally based therapeutic community. The core modality of the program is based on the cognitive behavioral therapy (CBT) program designed by the University of Cincinnati Corrections Institute, specifically the Cognitive-Behavioral Interventions for Substance Use (CBI-SU). The curriculum consists of 50 sessions across 6 modules that cover motivational enhancement, cognitive restructuring, emotional regulation, social skills, problem solving, and success planning.

Classes and groups offered include Thinking for a Change (T4C) from the National Institute for Corrections (NIC), Seeking Safety (Treatment Innovations, Lisa Najavits), Anger Management from the Substance Abuse Mental Health Services Administration (SAMHSA), and parenting classes.

#### CONTINUING CARE/REINTEGRATION

The HCRTC program employs a dedicated team of in-house counselors and case managers who work directly with RSAT participants throughout the re-entry and continuing care process. The Harris County Community Supervision & Corrections Department provides residential continuing care treatment and supervision to clients transitioning out of the residential program.

#### **PROGRAM CONTACT INFORMATION**

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Information updated 8/10/2020

**Hidalgo County Sheriff's Department** (Community Supervision formerly known as Adult Probation)

FY2020 RSAT Funded Program

## OVERVIEW OF PROGRAM

The RSAT Program at the Hidalgo County Sheriff's Department is known as the Substance Abuse Treatment Facility (SATF). It currently serves 52 individuals. The residents in this community supervision program are provided evidence-based services and trauma-informed care. The program accepts individuals from around the state who need inpatient treatment services and whose primary language is Spanish. The education program is staffed with a certified special education teacher, which makes a GED more attainable.

Hidalgo County is one of the most underserved areas in Texas. Poverty is common and the average level of education is low, rendering most of the population indigent. Easy access to Mexico makes illicit drugs easy to obtain. Drugs that are usually prescribed by physicians in the United States can be easily acquired across the border.

The Hidalgo County Sheriff's Office SATF was first funded in October 2011 and began accepting participants in January 2012.

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

Individuals who enter the SATF must be medically stable, able to function with limited supervision and support, and not in need of detoxification services. They must also demonstrate a maladaptive pattern of substance use leading to clinically significant impairment or distress as manifested by one or more of the following within a 12-month period: recurrent substance use resulting in a failure to fulfill major obligations at work, school or home; recurrent substance use in situations in which it is physically hazardous; recurrent substance-related legal problems; or continued substance use despite having persistent or recurrent social or interpersonal problems caused or exacerbated by the effects of the substance.

Counselors meet with participants for an extensive intake process at which treatment goals are developed based on individual needs. Treatment goals are continuously updated and discussed during weekly individual sessions and then updated in the clinical form on a monthly basis. The program generally lasts six months.

#### MODALITY OF RSAT PROGRAM

The Hidalgo County SATF program provides substance use disorder/chemical dependency treatment based on evidence-based practices through a collaboration of different methods, mainly cognitive behavioral therapy (CBT). It also addresses co-occurring disorders (based on the level of care needed), as well as trauma-informed care for participants in need of more individualized treatment.

The treatment program consists of five phases, with set measures for advancement.

#### Phase 1

All program participants enter the facility at Phase 1 and must remain at this level a minimum of two weeks.

#### Phase 2

After two weeks at the facility, the resident is eligible for advancement to Phase 2 when the following requirements have been satisfied:

- 1. Completed the orientation process;
- 2. Completed the evaluation process;
- 3. Consistently met all personal household duties, assignments, and obligations to the facility;
- 4. Consistently attended all group and individual sessions with staff;
- 5. Created a supervision plan with the CSO;
- 6. Completed an education plan negotiated with the education specialist;
- 7. Signed and agreed to a chemical dependency treatment plan negotiated by the counselor;
- 8. Completed 15 hours of community service restitution (CSR); and
- 9. Is not on loss of privilege (LOP) status and does not have pending disciplinary action(s)

#### Phase 3

To advance to Phase 3, the resident must have remained on Phase 2 for a minimum of six weeks. In addition to requirements for the prior levels, the resident must do the following:

- 1. Must have completed 30 hours of CSR;
- 2. Must implement component plans that include:
  - a. Consistently attend and participate in Pro-Social Skills, TCU, Life Skills, Stages of Change, and Design for Living curricula
  - b. Consistently attend and participate in the Criminal Conduct and Substance Abuse Treatment curriculum, cognitive awareness process groups, and individual counseling
  - c. Must be attending and participating in education and employment classes as required; and
- 3. Consistently display a positive attitude toward self, other residents, and staff

#### Phase 4

To advance to Phase 4, the resident must have remained on Phase 3 for a minimum of six weeks. In addition to requirements for the prior levels, the resident must do the following:

- 1. Must have completed 30 hours of CSR; and
- 2. Must implement component plans that include consistently attending and participating in Anger Management, Parenting Education, Design for Living, and Time Out curricula

#### Phase 5

To advance to Phase 5, the resident must have remained on Phase 4 for a minimum of five weeks. In addition to requirements for the prior levels, the resident must do the following:

- 1. Must have completed 30 hours of CSR; and
- 2. Must implement component plans that include consistently attending and participating in Healthy Relationships, Introduction to 12 Steps, Straight Ahead, and Time Out curricula

#### Phase 6

To advance to Phase 6, the resident must have remained on Phase 5 for a minimum of five weeks. In addition to requirements for the prior levels, the resident must do the following:

- 1. Must have completed 25 hours of CSR; and
- 2. Must implement component plans that include consistently attending and participating in Family Violence, Meetings, Mapping Reentry: Heading Home, and Straight-Ahead curricula

Groups and services are offered to all participants to the extent they are indicated in accordance with treatment plans and the schedule of daily programming. They include Cognitive Restructuring, Individual Counseling, Commitment to Change (Relapse Prevention), continuing care services, literacy/GED classes, Design for Living Skills, Conflict Resolution, Behavioral Redirection, Anger Management, Community Service Restitution, Behavior Awareness/Assertiveness Skill Training, Family Education, Twelve Step Support, and Parenting Education classes.

#### **CONTINUING CARE/REINTEGRATION**

All participants who complete the Hidalgo County SATF program are required to attend re-entry court and/or use continuing care services. They are assigned a community supervision officer who only works with the continuing care/reintegration program in order to provide intense community supervision services. Additionally, two counselors are available to provide individual, group, and family counseling for all participants in the program. The re-entry court program judge provides judicial support and oversight to all program participants.

## **PROGRAM HIGHLIGHT**

The Hidalgo County SATF is the only community correction facility within the adult probation department in Texas that provides services in both Spanish and English.

#### **COMMUNITY PARTNERS**

Palmer Drug Abuse Center 115 N. 9<sup>th</sup> Street, McAllen Texas 78501

Abundant Grace 2110 S. McColl Rd Edinburg, Texas 78539

Mujeres Unidas 511 N. Cynthia St McAllen, Texas 78501

Workforce Solutions 2719 W. University Dr Edinburg, Texas 78539 Nuestra Clinica del Valle 801 W. 1<sup>st</sup> Street San Juan, Texas 78589

UTRGV Counseling and Training Clinic 1201 W. University Edinburg, Texas 7853

Salvation Army 1600 N. 23<sup>rd</sup> Street, McAllen Texas 78501 Loaves and Fishes 514 SE Street Harlingen, Texas 78550

Food Pantry of the RGV 724 N. Cage Pharr, Texas 78539

United Way of South Texas 113 Pecan Blvd McAllen, Texas 78593

## **PROGRAM CONTACT INFORMATION**

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Information updated 8/17/2020

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Judge John C. Creuzot Judicial Treatment Center FY2018 RSAT Funded Program

## OVERVIEW OF PROGRAM

The Judge John C. Creuzot Judicial Treatment Center (JJCCJTC) is an inpatient treatment facility for substance use disorder (SUD) treatment and supportive services for community reintegration run by the Dallas County Community Supervision and Corrections

## **PROGRAM HIGHLIGHT**

RSAT residents are provided evidencebased services and trauma informed care, and utilize tablet technology.

Department (CSCD). RSAT clients at JJCCJTC are housed in separate structures from the dual-diagnosis clients at the facility; programming occurs within their housing unit. There are currently 55 individuals enrolled in the program.

The JJCCJTC is notable for being in a rural location and surrounded by a white picket fence. While at the facility, individuals live in dorm-room settings with three to four roommates. Each person has his own personal facility tablet on which he is able to access self-help material, books, religious material, and so forth. There are also commissary items and additional tablet content including music, films, and games available for a small fee (any revenue from these is returned by the vendor in the form of informational packets, facility-wide cookouts, and the like).

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

Individuals who enter the RSAT program at JJCCJTC are on community supervision and have moderate to severe SUDs. They present with a moderate to high risk of committing subsequent crimes and/or technical violations of community supervision and are more likely to be committed to the Institutional Services Division or state jail if their SUDs are not addressed. Individuals who have current 3G or Title 5 offenses are not eligible. Dallas County CSCD utilizes the state-mandated Texas Risk Assessment System (TRAS) for identifying general criminogenic risks and needs and to ensure the individual is of moderate to high risk. The majority of individuals also undergo a full psychosocial assessment by a clinician, who makes the referral for admission based on each person's substance use treatment needs and criminogenic risk.

Clinical staff review the assessment battery and available referring evaluations with the individual, and together they discuss the most important treatment goals, based on the assessments, and develop a treatment plan.

The program currently lasts six months, with the first four months at an intensive level and the last two at a supportive level to provide the opportunity to practice and prepare for a return to the community. The levels can be adjusted based on individual need.

#### MODALITY OF RSAT PROGRAM

The RSAT Program is a therapeutic community (TC). Treatment goals focus on teaching skills needed to achieve and maintain abstinence, helping individuals accept their SUDs, and supporting behavioral change toward pro-social, crime-free lives. The treatment environment provides additional opportunities, including daily structure, communal participation, an environment of accountability, as well as the opportunity to internalize and practice behavior change. The treatment program integrates group treatment and individual counseling with educational modules and use of outside support services, including self-help programs.

Staff use proven motivational techniques to encourage awareness of problems and needs, to facilitate participation in treatment activities and program interventions. Clients are expected to learn and correctly use the rules and tools of the facility while fully participating in treatment, attend 12-step or other self-help groups, and complete a continuum of care plan.

Treatment plans consist of three phases, and program participants receive a treatment plan review at the completion of each one. The primary counselor manages the individual's goal attainment on the master treatment plan and an integrated treatment team staffing is held weekly to review progress. A complete treatment plan review is conducted monthly, or more often if needed, to ensure participants are progressing on their current goals and add new goals if needed.

The three phases of treatment are as follows:

#### Phase I: Orientation

Individuals meet with their assigned counselor within the first 24 hours and continue to do so, as well as to participate in the cognitive behavior intervention groups to ensure engagement and continued motivation for treatment and behavioral change. The individual also participates in the orientation group, becomes familiar with the handbook, and develops relationships with peers. He is introduced to the Cognitive-Behavioral Interventions-Criminal Conduct (CBI-CC), Charting a New Course, and Family Relationship curricula. A peer is assigned to new arrivals to assist in the adjustment to life at the treatment facility.

#### Phase II: Core Treatment-Personal Application (approximately 8-12 weeks)

In Phase II, anyone who continues to express or display resistance to change will continue to work with a counselor, utilizing the TCU brief interventions Understanding and Reducing Angry Feelings and Getting Motivated to Change, which were designed to reduce hostility toward the treatment program and focus on engagement technique. This phase promotes individual change in thinking and behaviors and challenges the individual to internalize what was presented during Phase I regarding the need, and therefore the opportunity, for personal change.

Individuals continue to participate in all aspects of the program as described above, and also receive educational or vocational assignments.

#### Phase III: Re-entry Phase—Social Application (approximately 60 days)

Participants in supportive residential treatment (SRT) have demonstrated their understanding and application of the treatment program ideals, completed treatment goals required for Phases I and II, and been assessed ready to enter a lower level of care by the multidisciplinary treatment team. The focus is primarily on re-entry needs and finalizing continuing care plans. They continue to participate in individual and group sessions and community meetings, and maintain a job function. The expectations for community membership and a continuation of curricula begun in the first two phases continue. SRT participants entering Phase III are expected to exhibit increasingly mature behaviors and attitudes as they complete treatment.

Relapse prevention and re-integration issues are the primary focus of this phase, during which the comprehensive discharge plan is developed and completed. Although planning the continuation of substance use treatment is a clear expectation of this phase, equally important is the exploration of individual and social support elements relative to social, educational, vocational training, employment, and housing plans after discharge.

In Phase III, individuals may assist with orientation for new arrivals and co-facilitate certain education groups alongside staff members. They must demonstrate an understanding for the need for some form of ongoing recovery support program. Typically, they participate actively in treatment counseling groups and demonstrate an understanding of specific aspects of their own SUDs.

## CONTINUING CARE/REINTEGRATION

A discharge plan must be forwarded to CSCD within 24 hours of discharge for all program participants. Discharge summaries include a clinically substantiated appraisal of the person's strengths and weaknesses, and must address essential factors for successful re-integration into the community, including dependency continuing care and support, housing, assistance with obtaining a valid form of identification, job seeking, and/or enrolling in educational programs.

The Gateway Foundation, a treatment provider, works closely with the complete multidisciplinary treatment team to support a smooth transition to the CSCD continuing care program, Successful Treatment of Addiction through Collaboration (STAC). The STAC court uses the specialty drug court model and has a multidisciplinary team coordinating efforts by the judiciary, CSCD, representatives of the public defender's and district attorney's offices, treatment providers, and other community agencies. The STAC court program is approximately 12-18 months long, and uses a sanctions/incentive matrix, including behavioral contracts designed to improve the participant's involvement in treatment and the STAC court program. Sanctions are swift and progressive. Rewards include a participant's advancement in phases, certificates, praise, bus passes, and opportunities to leave court early. Judicial commendation also serves as an effective incentive.

Participants attend intensive outpatient (IOP) and supportive outpatient (SOP) substance use treatment with Assessment, Treatment, and Research Services (ATRS) or in the community. STAC participants' treatment typically consists of individual and family counseling, dual-diagnosis education and referral, relapse and recidivism prevention, criminal thinking and

behavior, peer support groups and education, and referral related to medically assisted treatment (MAT).

## **PROGRAM CONTACT INFORMATION**

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