RECOVERY WHILE INCARCERATED & PURPOSEFUL INCARCERATION

THE TRANSFORMATION OF ADDICTION RECOVERY SERVICES AND PURPOSEFUL INCARCERATION AT THE INDIANA DEPARTMENT OF CORRECTION

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OBJECTIVES

- Discuss the changes to IDOC Addiction Recovery Services – Recovery While Incarcerated (RWI)
- Review the basics of Purposeful Incarceration Initiative
- Review how RWI impacts the Purposeful Incarceration Initiative
INTRODUCTION TO RECOVERY WHILE INCARCERATED (RWI)

THE TRANSFORMATION OF ADDICTION RECOVERY SERVICES AT THE IDOC
The existing addiction recovery services (ARS) model used within IDOC is being replaced by a new model called *Recovery While Incarcerated* (RWI)

- This eliminates Therapeutic Communities including GRIP, TC, CLIFF units*

IDOC’s goal is to have RWI implemented in every adult facility by June 30, 2018

*The Starke County Regional Therapeutic Community will remain a TC Model Program*
The RWI Project seeks to transform the way addiction recovery services (ARS) are delivered in IDOC facilities.

Responds to Governor Holcomb’s call for action by naming the Addiction Epidemic as one of the key pillars during his administration.

Addresses the shift in population criminogenic risk and clinical needs due to HEA 1006.

Shift the culture of corrections towards a Recovery Oriented System that views addiction as a disease.
**GOALS OF RWI**

- **Provide the right treatment, right place, right time** so that offenders can begin the journey into recovery from the beginning of their incarceration.

- **Develop a continuum of care** that spans the duration of incarceration for offenders, allowing offenders to engage in substance use disorder treatment at all stages of their incarceration.

- **Provide a recovery-based environment** that promotes structure, accountability, development of coping skills, and emotional support for offenders seeking change and recovery.

- **Individualize treatment curriculums** to address an offender’s unique needs, to prepare them for successful re-entry into the community.
KEY FEATURES OF RWI PROJECT

- Eliminate EPRD Restrictions
- Screening & Assessment
- Orientation and Mentoring
- Individualized Treatment Planning
- Process Group
- Spirituality Group
- Instructional Group
- AA, NA, Celebrate Recovery self-help support groups
- DBT Skills Training
- Anger Management
- Grief and Loss
- Life Skills
- Helping Women Recover
- Relapse Prevention
- Recovery Coaching
- MAT (as clinically appropriate)
SCREENING AND ASSESSMENT

- All offenders entering the IDOC system are screened for the potential presence of a substance use disorder at their intake facility.
- Offenders whose screening score indicates the likelihood of a substance use disorder are referred by case management for a comprehensive clinical assessment:
  - Confirm that offender has a substance use disorder that requires treatment.
  - Determine severity of offender’s problematic substance use.
  - Identify offender’s addiction recovery needs.
  - Assess offender’s readiness/willingness to engage in addiction recovery treatment.
Beginning in July 2017, every offender newly committed to IDOC is screened at their intake facility for the presence of substance use and mental health disorders.

**INITIAL RESULTS:**

- Approximately 90% of male offenders screened as having history of problematic substance use (susceptible to a SUD)

- **Approximately 60% of male offenders screened as likely to have a substance use disorder and need targeted treatment**

- Between 40-55% of PI offenders screened as likely to have a SUD
Drug Use Screening Inventory - Revised (DUSI-R)

- Provides an “Overall Problem Density Score” and 10 Domain Scores
- Overall scores will prescribe intensity of treatment (modality)
- Utilized at regular intervals to review and demonstrate movement in core competencies related to recovery
THE CORE OF RWI – SOBER LIVING ENVIRONMENT (SLE)

- SLE is a designated pod or housing unit exclusively for offenders enrolled in the RWI program.
- SLE will allow offenders in all levels of treatment and phases of recovery to congregate together, to provide support in a controlled recovery environment.
- Depending on facility design, SLE may also incorporate offenders from other character programs such as PLUS and ICAN, similar to an “honor dorm” concept.
RWI FRAMEWORK

**Continuum/Modality**
- Intensity/frequency of service
- 4 distinct modalities
- Placement determined by assessment scores

**Progression**
- Stage of Change
- Level of competency in recovery skills
- Six total progressions
- Every enrolled offender will demonstrate mastery of each progression
Offenders “enter” the treatment modality indicated by their addiction recovery needs assessment.

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<thead>
<tr>
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<th>Most Intensive 40+hrs/wk</th>
<th>15-20 hrs/wk</th>
<th>4-10 hrs/wk</th>
<th>Least Intensive 2 hrs/wk – 2 hrs/mth</th>
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<tbody>
<tr>
<td>Recovery</td>
<td>Recovery Oriented Community</td>
<td>Intensive Outpatient Program</td>
<td>Outpatient Services</td>
<td>Relapse Prevention Program</td>
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MAT AT THE IDOC

- Historically
  - Small re-entry pilot utilizing Naltrexone IM (Vivitrol)
    - Received one injection 5-7 days prior to release with referral for continued treatment post-release

- RWI Project
  - Naltrexone PO (Revia) whenever clinically indicated
  - 60 days of Naltrexone PO pre-release → Naltrexone IM (Vivitrol) 1 week prior to release → Referral for continued MAT upon release
THE PURPOSEFUL INCARCERATION INITIATIVE
PURPOSEFUL INCARCERATION BASICS

- Create/foster relationships between IDOC and Judicial System
- Utilizes Evidence-Based Practices (EBP) for re-entry strategies
  - Improve community safety, re-entry outcomes, access to treatment
- Sentence modification is a CRITICAL component of the EBP
- Historically – utilized the Therapeutic Community Model to meet expectations of completing treatment at the IDOC
  - Limited access to care to facilities where a TC was located
  - Myths about accessing treatment at IDOC led to back-up of waitlists
GENESIS OF CHANGES TO PI INITIATIVE

- Feedback from Judges, Prosecuting and Defense Attorneys, and Community Supervision Providers
- Review of recidivism and modification data
- Recommendations with facility administration, staff and addiction recovery clinicians
- Analysis of the impact of PI on access to care
MODIFICATION RATE – CY2016

Successful Completion of Treatment

- 3,322 PI Offenders successfully completed treatment in 2016
- 37.7% Modified
- 62.3% Not Modified
KEY CHANGES TO THE PI PROGRAM

- Admission to RWI for all IDOC Offenders
  - Addiction needs are considered a priority referral for offenders screening as needing treatment.
  - Clinical severity will be the number one priority for admission regardless of PI status
  - A PI designation will be one component for consideration of entrance into treatment
  - Those with PI designation, generally, will be waived from expectations to complete minimum educational requirements before RWI is offered.
KEY CHANGES TO THE PI INITIATIVE

- Instead of automatically being assigned to a Therapeutic Community (TC), offenders will be placed in the modality of treatment clinically indicated by assessments.

- New language for AOJ’s/Sentencing Orders:

  “Upon successful completion of the clinically appropriate substance abuse treatment program as determined by IDOC, the court will consider a modification to this sentence.”
Step 1: Recommendation

- The sentencing court makes a recommendation that an offender be purposefully incarcerated via the Abstract of Judgment (AOJ) or Sentencing Order.
- A recommendation for PI does NOT mean an offender will be automatically enrolled in addiction treatment services.

Step 2: Designation

- The final designation of an offender for PI is made by IDOC ARS upon completion of clinical screening and assessment.
- Offenders must…
  - meet clinical eligibility criteria, based on their severity of substance use and recovery needs, in order to qualify for enrollment in any addiction recovery treatment program.
  - meet administrative eligibility requirements to be eligible (conduct, TCR, disqualifying offenses, etc.)
- Addiction treatment is a voluntary treatment program - offenders must agree to participate in treatment.
KEY CHANGES TO THE PI INITIATIVE

- Communication Standardization
  - Letters for successful and unsuccessful completion of treatment
  - Attachments include Treatment Summary and Case Management Progress Report
  - Majority of PI-related communication with courts shifts from Unit Team to ARS staff

- The application of IDOC time credits are not related to the eligibility for modification of sentence by the court
KEY CHANGES TO THE PI INITIATIVE

- Treatment will start as early as possible in the sentence, regardless of orders that request an offender to serve a minimum amount of time before considering a modification.

- Ongoing education for judges and attorneys
What is the minimum length of time for a PI sentence?

A: There is no minimum length of time, although it is recommended that the offender have a sentence of at least 5 years in order to increase motivation for change and recovery.
How long does the RWI Program take to complete?

A: Unlike the TC, there is no minimum or maximum amount of time it takes to complete treatment. Completion is contingent on the individual offender’s ability to learn and demonstrate skills related to recovery.
FREQUENTLY ASKED QUESTIONS

- Does the IDOC recommend a modification for immediate release upon completion?
  - A: No. The IDOC requests that a sentence modification provides the Department with 30 days for release re-entry planning including making provisions for continued treatment/MAT, housing, ID paperwork (social security card, birth certificate, state ID), application for Medicaid/HIP 2.0, referral for Recovery Works.
Is there any evidence of what reduces recidivism in those who have completed and are modified?

A: YES! EBP’s suggest that modifying an offender to a community supervision strategy and/or titrated integration into the community (via work release, CTP, specialty courts, etc.) decreases the likelihood for recidivism as opposed to those released without continued supervision by the court.
Is a Purposeful Incarceration designation the only way an offender can get referred to RWI (addiction recovery services)?

NO! Addiction Recovery Services and RWI are now considered a priority program for all IDOC offenders. RWI referrals will occur for all IDOC offenders presenting with a clinical need after they successfully complete minimum educational requirements.
Can an offender do another IDOC program for Purposeful Incarceration, like PLUS or DOL?

A: Indiana law allows for a judge to modify a sentence for any reason; however, the IDOC Purposeful Incarceration Initiative is only focused on Addiction Recovery Services.
PURPOSEFUL INCARCERATION

It Is…

- A collaborative initiative between the IDOC and the courts
- A recommendation for an addiction recovery clinical assessment
- An initiative that is designed for someone whose criminal behavior is related to a chronic relapsing brain disease
- A way for the courts to receive increased communication about an offender's participation in addiction recovery services
- A tool for the IDOC and courts to reduce exposure to increased criminogenic risk

It Is Not…

- Indicated for someone with Anti-Social Personality Disorder/Traits or someone whose criminal behavior is predatory
- A direct admission to RWI
- An automatic sentence modification
- The first line of treatment for someone with a substance use disorder
- Guarantee of lifetime recovery
For all questions, issues, and communications related to Purposeful Incarceration, please send email to the following address:

**purposefulincarceration@idoc.in.gov**

This presentation and supplemental information will be posted on the IDOC ARS PI website: [http://www.in.gov/idoc/2799.htm](http://www.in.gov/idoc/2799.htm)
QUESTIONS?
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