

STATE OF OHIO



DEPARTMENT OF REHABILITATION
AND CORRECTION

SUBJECT: Recovery Services Programming	PAGE <u> 1 </u> OF <u> 5 </u> . NUMBER: 70-RCV-01
RULE/CODE REFERENCE: 42-CFR-Part 2	SUPERSEDES: 70-RCV-01 dated 10/20/14
RELATED ACA STANDARDS: 4-4363-1; 4-4377; 4-4433; 4-4437; 4-4438; 4-4439; 4-4440; 4-4444	EFFECTIVE DATE: February 15, 2016
	APPROVED: 

I. AUTHORITY

This policy is issued in compliance with Ohio Revised Code 5120.01 which delegates to the Director of the Department of Rehabilitation and Correction the authority to manage and direct the total operations of the Department and to establish such rules and regulations as the Director prescribes.

II. PURPOSE

The purpose of this policy is to identify recovery program services, establish minimum programmatic criteria of those services available to inmates, and to provide evidenced based practices to those inmates that meet programming criteria.

III. APPLICABILITY

This policy applies to all employees and contractors involved in the development, management, and provision of Recovery Services to inmates in those institutions where a Recovery Services Program exists.

IV. DEFINITIONS

AOD Treatment Readiness Program – The AOD Treatment Readiness Program is a 48-hour program delivered daily for a minimum of twelve (12) hours a week. A minimum of ten (10) of the hours must be cognitive behavioral treatment specific. The remaining hours shall consist of Recovery Oriented Supplemental Services. Those institutions designated as control prisons or those institutions with control units may provide restricted treatment hours after consultation with the Bureau of Behavioral Health Services Chief or designee. This program incorporates the stages of change model to focus on participant motivation and readiness that will enhance treatment engagement and retention. This program is offered to Recovery Services Level 2 and 3 inmates.

Continuing Care Services – On-going peer support such as Alcoholics Anonymous, Narcotics Anonymous, Big Book, etc.

Family Program – A family program is designed to provide Recovery Services education, program information, improvement of communication skills, and facilitates involvement of both program participants and family members in community reentry.

Outpatient Services – Treatment services that are provided less than eight (8) hours per week in regularly scheduled sessions for program participants who reside in general population.

Recovery Maintenance Program – Recovery services provided following the successful completion of the Recovery Services Intensive Outpatient Program that consist of two 1-hour, or one 2-hour professionally facilitated group meetings per week for a total of eight (8) weeks (16 sessions). The Recovery Maintenance Program will require an updated treatment plan upon completion of the treatment program and attendance verification. This program is offered to Recovery Level 2 and 3 inmates.

Recovery Oriented Supplemental Services – Those services that are complementary and supportive of formal Recovery Services treatment activities.

Recovery Services Housing Units – Pro-Social Recovery focused units with a supportive environment for recovery. Treatment groups could also be provided in these units.

Recovery Services Intensive Outpatient Programs – The Recovery Services Intensive Outpatient Program is a 144-hour program, consisting of the Treatment Readiness Program and Intensive Outpatient Program phases, that provides treatment services delivered daily for a minimum of twelve (12) hours a week. A minimum of ten (10) of the hours must be cognitive behavioral treatment specific. The remaining hours will consist of Recovery-Oriented Supplemental Services. Those institutions designated as control prisons or those institutions with control units may provide restricted treatment hours after consultation with the Bureau of Behavioral Health Services Chief or designee. This program is offered to Recovery Level 2 and 3 inmates.

Recovery Services Level of Care – The Recovery Services Level of Care designates the level of need for AOD Services: R0 = None; R1 = Minimal Need; R2 = Moderate Need; R3 = Considerable Need.

Self-Help/Fellowship/Alcoholic Anonymous (AA)/Narcotics Anonymous (NA) Meetings – An independent support/fellowship group organized by and for drug abusers and alcoholics to help members achieve and maintain abstinence and/or cope with the effects of drugs and alcohol.

Texas Christian University Drug Screen 5 (TCU) – The TCU is an instrument that serves to identify individuals with a history of drug use or dependency. This instrument is used to determine level of care, and who is eligible for treatment options.

Therapeutic Community (TC) – A treatment modality that uses an inmate hierarchy in which treatment stages are used to reflect personal and program growth.

V. POLICY

It is the policy of the Ohio Department of Rehabilitation and Correction to provide screening and assessment of offenders and deliver a comprehensive continuum of alcohol and other drug services for inmates who have been diagnosed with a substance use disorder.

VI. PROCEDURES

- A. Recovery Services Treatment programs shall have a written treatment philosophy within the context of the correctional system, goals, and measurable objectives. Goals and objectives shall be reviewed annually and updated as needed.
- B. Admission into a Recovery Services Treatment program shall be determined by the following criteria:
1. Recovery Services Level;
 2. Remaining time of sentence.
- C. Recovery Services Treatment Programs groups shall consist of the following:
1. AOD Treatment Readiness Program shall have a staff to client ratio of one (1) staff member to fifteen (15) clients per group. Inmates must successfully complete the AOD Treatment Readiness Program prior to entering the Intensive Outpatient Program or the Recovery Services Housing Unit.
 2. Recovery Services Intensive Outpatient Program shall have a staff to client ratio of one (1) staff member to fifteen (15) clients per group.
 3. Recovery Maintenance Program shall have a staff to client ratio of one (1) staff member to fifteen (15) clients per group. Inmates must successfully complete the Intensive Outpatient Program prior to entering the Recovery Maintenance Program.
 4. Recovery Services Housing Units shall have a staff to client ratio of one (1) staff member to fifteen (15) clients per group.
 5. Therapeutic Community shall have a staff to client ratio of one (1) staff member to twenty (20) clients per group.
- D. Recovery Services Treatment programs shall provide an appropriate range of services that include at a minimum:
1. AOD Screening using the Texas Christian University Screening Instrument;
 2. ODRC Recovery Services Program - Screening Application (DRC4254/DMHAS7181)
 3. Inmate Assessment using the Bio-Psycho-Social Assessment (DRC5217/DMHAS7192);
 4. Diagnosis
 5. Orientation;
 6. AOD Program/Treatment Plan (DRC5233/DMHAS7197);
 7. Individual and group counseling;
 8. Recovery Services education;
 9. Self Help and Fellowship meetings;
 10. Coordination efforts with community supervision and treatment staff.
- E. Upon admittance to a DRC Reception Center each inmate shall be administered the Texas Christian University Screening Instrument (TCU). The TCU will determine the inmates' recovery services level of need and designate a recovery services level of care code. The recovery services level of care code will determine which recovery services treatment program will best address the inmates' need(s). The TCU may be re-administered at parent institutions when applicable.

- F. The regional Chemical Dependency Specialist (CDS) will be informed of community referrals via email. This notification shall be made by the AOD Program Coordinator. The CDS has access to the Ohio Risk Assessment System and the following DOTS Portal screens:
1. Programs Participation List (RAP3)
 2. Programs Details (RAPP1)
 - a. Program Summary – including community referral information.
- G. Recovery-Oriented Supplemental Services
1. Continuing Care Services - On-going peer support such as Alcoholics Anonymous, Narcotics Anonymous, Big Book, etc.
 2. AA/NA Services – AA/NA shall be offered to all general population inmates. The service shall be an independent support/fellowship group organized by and for drug abusers and alcoholics to help members achieve and maintain abstinence and/or cope with the effects of drugs and alcohol. Attendance verification must be maintained.
 3. Other Recovery-Oriented Supplemental Services may exist only upon approval of the Bureau of Behavioral Health Services Chief or designee.
- H. Recovery Services Treatment programs shall use a coordinated staff approach to deliver services to include planning consultations with other disciplines. These consultations shall be held when applicable and at a minimum quarterly. Documentation of the consultation shall be maintained in the inmate file. A copy of the documentation shall also be maintained in a separate file for Regional Recovery Services Administrative review. Referral to Recovery Services (DRC5502/DMHAS7196) is available to all institutional staff who wishes to refer an inmate for services.
- I. Recovery Services Treatment programs shall comply with Federal Confidential Regulation 42-CFR-Part 2 and other applicable federal privacy laws.
- J. All Recovery Services staff providing clinical services shall be appropriately credentialed or licensed, as indicated below:

Recovery Services Program Supervisor

1. LPCC: Licensed Professional Clinical Counselor;
2. LISW: Licensed Independent Social Worker;
3. LICDC: Licensed Independent Chemical Dependency Counselor; or
4. Other, as indicated by Ohio Department of Mental Health and Addiction Services standards.

Recovery Services Counselor

1. LCDCII: Licensed Chemical Dependency Counselor II;
2. LCDCIII: Licensed Chemical Dependency Counselor III;
3. LICDC: Licensed Independent Chemical Dependency Counselor;
4. LPCC: Licensed Professional Clinical Counselor;

5. LPC: Licensed Professional Counselor;
 6. LISW: Licensed Independent Social Worker;
 7. LSW: Licensed Social Worker; or
 8. Other, as indicated by Ohio Department of Mental Health and Addiction Services standards, with the exclusion of a CDCA: Chemical Dependency Counselor Assistant.
- K. Each institutional Recovery Services department shall regularly update and maintain the Recovery Services Program Manual.
- L. Each institutional Recovery Services Department shall submit a monthly report detailing Recovery Services Treatment Program and Service activities. This report shall be submitted by the 10th of the month following the reporting period. This report shall be submitted using the Department's DOTS Portal program.
- M. Management of Detoxification of Chemical Dependency. Applicable only to: CRC, FMC, LORCI, and ORW.

Inmates who require admission to the infirmary or medical management of acute intoxication or withdrawal shall be referred at the earliest opportunity to Recovery Services for the following services:

1. Bio-Psycho-Social Assessment;
2. Multi-disciplinary treatment consultation; and
3. Referral for treatment.

Related Department Forms:

ODRC Recovery Services Program - Screening Application
Bio-Psycho-Social Assessment
AOD Program/Treatment Plan
Referral to Recovery Services

DRC4254 / DMHAS7181
DRC5217 / DMHAS7192
DRC5233 / DMHAS7197
DRC5502 / DMHAS7196