

**COLORADO DEPARTMENT OF CORRECTIONS**

Tony Carochi, Interim Executive Director



# **Overview of Substance Abuse Treatment Services Fiscal Year 2011-2012**



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**Introduction**

Substance abuse is known to have a high occurrence rate among incarcerated populations; Colorado is no exception. This report evaluates the substance abuse needs of offenders and the availability of treatment services within the Colorado Department of Corrections (CDOC).

Substance abuse programs operate under the CDOC Behavioral Health Services as the division of Alcohol and Drug Services. The mission of this division is “to assess substance-abusing offenders and provide them a continuum of interventions for ongoing self-change.” Assessment information is used as a guide for making treatment placements into available treatment services, which vary in duration and intensity.

The delivery of substance abuse services within Colorado’s criminal justice system dramatically changed with the passage of Colorado Revised Statute (C.R.S.) 16-11.5 and 18-1.3-209. This legislation mandated three important components for felons and misdemeanants: (1) a standardized procedure for assessment of substance abuse, including chemical testing, (2) a system of education and treatment programs for substance abusers, and (3) a system of punitive sanctions for offenders who test positive after the initial test. The CDOC, the State Judicial Department, the Division of Criminal Justice of the Department of Public Safety, and the Department of Human Services launched a cooperative effort to fulfill these legislative mandates.

**STANDARDIZED ASSESSMENT**

The Standardized Offender Assessment-Revised (SOA-R) comprises four instruments: the Simple Screening Instrument-Revised (SSI-R), a substance abuse screening measure; the Level of Supervision Inventory-Revised (LSI-R), a recidivism risk measure; the Adult Substance Use Survey-Revised (ASUS-R), a substance abuse severity measure; and the Treatment Recommendation Worksheet (TxRW) that assists the assessor in making a treatment recommendation. During intake to the CDOC, the SSI-R and the LSI-R are administered to all offenders. The combined score of the SSI-R and number of alcohol/drug-related arrests over the previous 5 years generate the offender’s diagnostic substance abuse needs level. This needs level ranges from 1 through 5. Anyone with a needs level of 3 or higher is identified for further assessment with the ASUS-R and the TxRW. Offenders are recommended for alcohol and drug treatment based on the combined information from this battery of assessment instruments.

## *Introduction*

### **STANDARDIZED TREATMENT SYSTEM**

In conjunction with the SOA-R, a treatment system was formulated. The treatment system, consisting of eight categorical levels, is tied to the assessment battery. Scores on the standardized assessment drive placement into one of the treatment levels. The treatment system provides education and therapy services of varying intensity and duration.

#### *Level 1: No Treatment*

Offenders assigned to the first level include those who require no substance abuse treatment. Individuals assessed as level 1 have no current clinical diagnosis of substance abuse or dependence.

#### *Level 2: Drug and Alcohol Education and Increased Urinalyses*

The second treatment level is prescribed for individuals with no clinical diagnosis of substance abuse or dependence and no withdrawal symptoms. Level 2 drug and alcohol education is structured and curriculum based; however, content may vary. These programs incorporate urinalyses and substance abuse education designed to increase awareness of the effects of drug and alcohol usage. The required hours for this level are generally open to the facilities' own guidelines.

#### *Level 3: Weekly Outpatient (WOP)*

Weekly outpatient treatment, level 3, is intended for individuals who may have a clinical diagnosis of substance abuse or dependence. Level 3 programs are designed for individuals who experience up to two of the following consequences of substance abuse: employment difficulties, legal difficulties, or damaged personal relationships. Individuals may be appropriate for weekly outpatient treatment if they completed a more intensive program and need continuing support. It is recommended that participants at this level are voluntary, motivated, and have positive support systems outside of treatment. The general parameters of weekly outpatient treatment are 1 to 3 hours per week within a 3- to 12-month duration.

#### *Level 4a: Enhanced Outpatient (EOP)*

Enhanced outpatient treatment, level 4a, is also intended for individuals who may have a clinical diagnosis of substance abuse or dependence. Individuals may have an emotional, behavioral, or cognitive disorder requiring intensive monitoring to minimize distractions from treatment. Individuals also may have performed poorly in weekly outpatient therapy while under supervision and may have a poor support system, which necessitates more intensive treatment services. Enhanced outpatient treatment may be appropriate for individuals who have a more intensive program and need continuing support. It is recommended, although not required, that participants at this level are voluntary and motivated. Level 4a programs are typically less than 12 weeks in

length, 2 to 4 sessions per week, and between 3 and 9 hours per week. Level 4a treatment should be followed by level 3 treatment.

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#### *Level 4b: Intensive Outpatient (IOP)*

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Level 4b, intensive outpatient treatment, is designed for individuals who require more structured therapy than is provided through weekly or enhanced outpatient treatment. Individuals may be assigned to level 4b treatment if their histories indicate unsuccessful treatment attempts, prolonged intoxication or lengthy withdrawal, and serious behavioral changes (e.g., legal or family problems) due to substance abuse. Intensive outpatient programs are best suited for individuals who realize the seriousness of their substance abuse problems but have negative or nonexistent support systems and are at a high risk for continued drug use. This level may be appropriate for individuals who have a dual diagnosis, present a risk to themselves or others, or have successfully completed an intensive residential program. There is some difficulty in distinguishing levels 4b, 4a, and 3. Treatment programs at these levels differ primarily in intensity, since no clear guidelines exist regarding content. Levels 4a, 4b, and 3 vary across length of stay, number of sessions per week, number of hours per week, or total program hours. Level 4b programs are typically 4 to 6 weeks in length, 3 to 7 sessions per week, 9 to 21 hours per week, or 36 to 126 total hours. Level 4b treatment should be followed by continuing care of level 4a or level 3 treatment.

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#### *Level 4c: Intensive Residential Treatment (IRT)*

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Level 4c is an intensive residential program for individuals with serious substance abuse problems. Intensive residential programs typically last 90 days; however, some programs may be as short as 14 days. The purpose of level 4c treatment is to provide a brief, intensive treatment intervention. Level 4c treatment programs accommodate individuals experiencing recent acute intoxication or withdrawal symptoms (e.g., hallucinations, disorientation, and delirium tremens). They are also structured to accommodate persons requiring medical attention—particularly for disorders related to prolonged substance abuse. Level 4c programs are most appropriate for individuals diagnosed with a chronic psychiatric disorder or who are a danger to themselves or others. Additionally, level 4c programs treat individuals who lack a positive support system, experience substantial denial, or exhibit inability to sustain independent functioning outside of a controlled environment. Level 4c treatment is designed to be followed by a progressively decreased level of treatment from level 4b to 4a to 3.

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#### *Level 4d: Therapeutic Community (TC)*

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Level 4d programs are similar to level 4c in that they are residential in nature, but 4d programs have longer treatment stays and are more structured than the lower levels. Typically, TCs have a 6- to 12-month length of stay. TCs are designed for individuals with extensive criminal histories, antisocial behavior, limited social support, and multiple unsuccessful treatment attempts. Level 4d programs use the “community as method” model, which views substance abuse as a disorder of



## ***Introduction***

the whole person and focuses on completely changing an offender's thinking, lifestyle, and identity. These programs place a high level of responsibility on the individual participants for their treatment.

### ***Level 5: Medical/Mental Health Referral***

The final level of treatment, level 5, is intended for individuals with the most serious cognitive, emotional, and/or behavioral problems. Typically, individuals have a psychiatric disorder or a severe medical need that warrants suspension of substance abuse treatment until the issue can be addressed. Due to the extreme severity of their psychological or physical problems, treatment may be considered inappropriate for individuals in this category so they may be referred for a medical and/or mental health evaluation by a licensed professional.

### ***SANCTIONS***

A system of punitive sanctions for continued substance use is another mandate under C.R.S. 16-11.5. The system of sanctions is related to the SOA-R and takes the following factors into consideration: (1) level of criminal risk, (2) severity of substance abuse, (3) compliance in supervision, and (4) treatment participation and compliance. Recognizing that each agency must develop its own policies and procedures to respond to offender substance use, specific sanctions (e.g., SOA-R reassessment, increased supervision, loss of privileges) based on the four factors are suggested.

### ***PROGRAM LICENSING***

The Colorado Division of Behavioral Health (DBH; within the Colorado Department of Human Services, Office of Behavioral Health) is responsible for the administration, licensing, and regulation of substance use disorder treatment in the state. By statute, DBH is authorized to license and routinely monitor treatment programs. Licenses remain in effect for 3 consecutive years, at which time a renewal application must be filed. Among several requirements, licensed programs must meet DBH regulations for staff qualifications and competencies, evidence-based treatment, client record content, and client/counselor ratios. In accordance with C.R.S. 16-11.5, offenders must be assessed and placed within treatment levels according to the SOA-R. Regular audits of licensed programs occur once every 3 years; however discretionary audits may be requested at any time. Currently, each individual CDOC and private facility is responsible for applying for and maintaining a DBH license to provide substance abuse treatment. Depending on the facility, it may hold licenses to provide SOA-R level 2, 3, 4a, 4b, and 4d treatment programs as well as DUI level II education.

### ***THERAPEUTIC COMMUNITY PROGRAM ACCREDITATION***

The American Correctional Association (ACA) administers national accreditation for adult and juvenile corrections. The goal of this voluntary program is to improve the management of correctional agencies by issuing standards that provide an opportunity to evaluate and remedy the

quality of programs and services offered. Under this accreditation process there are certain performance-based standards for TCs. Accreditation of the TC itself is achieved by complying with these standards, such as protecting offenders from injury and illness, offering a secure environment, providing opportunity to return to the community, fair treatment and protection of rights, documenting performance duties of staff, employing professional and ethical staff, and administering the program in an efficient and responsible manner. For each standard, a file must be prepared documenting compliance. To meet compliance, the TC must achieve 100% of the standards/expected practices designated as mandatory and 90% of the non-mandatory standards/expected practices. Self-audits are conducted as well as national audits conducted by visiting committees. There is a 3-year accreditation period, but TC programs are required to submit annual certification statements confirming continued compliance.

### **CERTIFIED ADDICTION COUNSELOR LICENSURE**

The Colorado Department of Human Services, DBH, sets the education, training, and supervision standards for the addiction counseling workforce. These standards are enforced by the Colorado Department of Regulatory Agencies (DORA). Licensing for Certified Addiction Counselors (CAC) is specific to the field of addiction treatment and requires education, training, and clinically supervised work experience. Individuals working to gain their CAC level I or II certification must have a high school degree or its equivalent. Counselors seeking CAC level III certification must have a bachelor's degree. In addition, CAC II and CAC III counselors must pass a national examination to receive these certifications. CAC classes and examinations focus on four sets of competencies: (1) understanding addiction, (2) treatment knowledge, (3) application to practice, and (4) professional readiness. Through these classes individuals learn the required skills in clinical evaluation, intake and discharge, treatment planning, service coordination, counseling, case management, documentation, professional and ethical responsibilities, and clinical supervision. Once level I, II, or III certification is achieved, active certification requires payment of fees and 40 hours of professional development every 2 years. Counselor licensure consists of three levels of certification: CAC I, CAC II, and CAC III.

#### *CAC I*

This is the entry-level certification; individuals at this level are not permitted to conduct counseling services alone but may co-facilitate individual or group sessions with oversight from a CAC II or CAC III. They may also complete required paperwork when co-signed by a CAC II or CAC III. To achieve this level of certification, counselors in training must accumulate 1,000 clinically supervised work hours.

#### *CAC II*

Counselors with this level of certification may conduct addiction treatment services independently for individuals and groups. CAC II counselors are certified to complete the full range of duties and

## ***Introduction***

requirements with the exception of providing clinical supervision. Achievement of this certification level requires accumulation of 2,000 clinically supervised work hours.

### *CAC III*

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Counselors achieving this level of certification are able to perform all duties related to individual and group counseling services. These individuals have also completed the required clinical supervision training to fully assume supervision duties as well.

## ***Evaluation of Treatment Needs***

The CDOC provides a wide array of substance abuse treatment services. It is important for programs to identify the treatment needs of the clientele and to determine whether the services are meeting those needs.

The first evaluation section of this report profiles substance abusers by comparing them to non-abusers across demographics, criminal histories, and other treatment need areas. Next, the need for specific treatment levels, as identified by the SOA-R, is explored. Finally, staffing patterns and actual services rendered are analyzed.

The CDOC offender and parole population excluding youthful offenders, jail backlog, and parolees supervised out of state was used to profile substance abusers. On June 30, 2011, this population totaled 30,688 and on June 30, 2012, it was 30,046. Substance abusers are identified during the diagnostic assessment and classification process at the Denver Diagnostic and Reception Center (DRDC) and Denver Women's Correctional Facility (DWCF). All prison admissions are evaluated and screened for various programmatic needs, such as substance abuse, mental health, and vocational needs. A 5-point severity index is used, with higher scores denoting a greater priority for services. Offenders scoring 3 or higher are considered to have a need in that area.

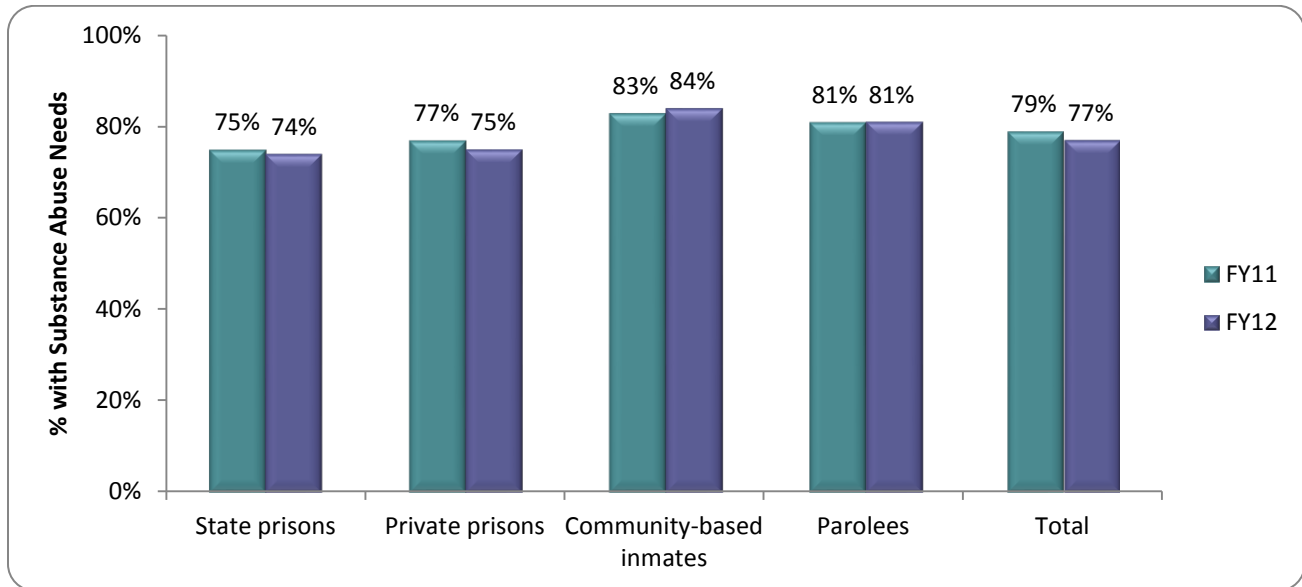
### ***PREVALENCE RATES***

The prevalence of substance abuse across the offender and parole population as of June 30, 2011, and June 30, 2012, was analyzed. Substance abusers were defined as having a diagnostic substance abuse needs level of 3 through 5, while non-abusers included offenders with a diagnostic level of 1 or 2. The substance abuse needs level was calculated from offenders' SSI-R scores and number of alcohol/drug-related arrests within the last 5 years, using an algorithm that accounted for both self-report (SSI-R score) and a behavioral indicator (number of arrests). Thus, offenders who under-report substance use on the SSI-R but have substance-related arrests were still identified as substance abusers.

In fiscal year 2011 (FY11), there were 595 offenders with missing substance abuse needs levels, reducing the population size to 30,093. Overall, 79% of the population was identified as having substance abuse needs. Prevalence rates were examined by offenders' location (see Figure 1). In fiscal year 2012 (FY12) there were 915 offenders with missing substance abuse needs levels, reducing the population size to 29,131. Overall, 77% of the population was identified as having substance abuse needs. Prevalence rates were examined by offenders' location (see Figure 2). Rates were fairly similar across state and private facilities but were slightly higher among parolees and community-based offenders (i.e., community corrections and Intensive Supervision Program [ISP] inmates).

## Evaluation

Figure 1. Substance Abuse Needs across the CDOC Jurisdictional Population\*



\*Excludes youthful offenders, jail backlog, fugitives, and parolees supervised out of state

### SUBSTANCE ABUSE PROFILE

The demographic and criminal history of substance abusers was compared to non-abusers for FY11 and FY12 (see Table 1). The groups were similar on gender and ethnicity, with some exceptions. More Latino/Latina offenders were substance abusers and slightly more African Americans were non-abusers compared to substance abusers. Substance abusers also tended to be a few years younger than the non-abuser group. Overall, non-abusers were more likely to obtain their high school diploma than substance abusers, while substance abusers tended to receive their GED more often.

Criminal history data showed that substance abusers were at a higher recidivism risk as measured by the LSI-R, likely due to an accumulation of more crimes in their past than the non-abusers. However, non-abusers had more serious felony offenses.

Needs levels were examined for both substance abusers and non-abusers (see Figures 2 and 3). Missing data in FY11 ranged from 2 cases in vocational and academic needs levels to 301 cases in self-destructive needs levels. In FY12, missing data ranged from 1 case in sex offender needs levels to 290 cases in self-destructive needs levels.

Table 1. Comparison across Demographic and Criminal History Data

	FY11		FY12	
	Substance Abusers (n = 23,452)	Non-Abusers (n = 6,641)	Substance Abusers (n = 22,508)	Non-Abusers (n = 6,623)
Gender				
<b>Male</b>	88.94%	89.23%	89.04%	89.92%
<b>Female</b>	11.06%	10.77%	10.95%	10.07%
Ethnicity				
<b>Caucasian</b>	44.95%	47.99%	45.10%	48.39%
<b>Latino/Latina</b>	33.23%	28.14%	32.91%	27.27%
<b>African American</b>	18.37%	19.97%	18.35%	20.59%
<b>Other*</b>	3.45%	3.90%	3.64%	3.74%
Mean age (SD)				
	36.59 (10.14)	39.19 (12.49)	37.44 (10.32)	40.21 (12.73)
High school certificate***				
<b>Diploma</b>	17.43%	29.47%	16.97%	30.51%
<b>GED</b>	51.79%	42.31%	51.50%	41.94%
<b>Neither</b>	22.85%	22.66%	19.31%	18.57%
<b>Missing</b>	7.75%	6.08%	12.22%	8.97%
Felony class****				
<b>1</b>	1.67%	3.95%	1.84%	4.03%
<b>2</b>	6.02%	8.34%	6.54%	8.50%
<b>3</b>	27.67%	30.52%	28.58%	32.37%
<b>4</b>	41.49%	37.09%	40.38%	36.12%
<b>5</b>	17.24%	16.08%	16.95%	15.31%
<b>6</b>	5.67%	3.33%	5.47%	2.97%
<b>Missing</b>	.24%	.69%	.22%	.69%
Mean LSI-R (SD)*****				
	30.00 (8.74)	23.53 (8.63)	30.01 (8.75)	23.60 (8.69)

\*Other includes Native American and Asian ethnic groups

\*\* SD=standard deviation

\*\*\*2,319 offenders in FY11 and 3,344 offenders in FY12 were missing high school certificate information

\*\*\*\*102 offenders in FY11 and 95 offenders in FY12 were missing felony class information

\*\*\*\*\*969 offenders in FY11 and 538 offenders in FY12 were missing LSI-R assessment information

Although substance abusers and non-abusers had similar needs in most areas, there was a notable difference between the two groups on the sex offender needs level, where the percentage of non-abusers was double that of substance abusers. This may explain why the group of non-abusers, whose crimes are in a higher felony class (as noted above), nevertheless have lower LSI-R scores. The LSI-R does not assess sex offending risk. Substance abusers had only slightly lower medical, self-destructive, and assaultiveness needs than non-abusers. More substance abusers had both non-qualifying mental illness and serious mental illness, although the gap between the groups was smaller for the latter. Groups were most similar on developmental disabilities, academic, and vocational needs.

## Evaluation

Figure 2. FY11 Needs among Substance Abusers and Non-Abusers (N = 30,093)

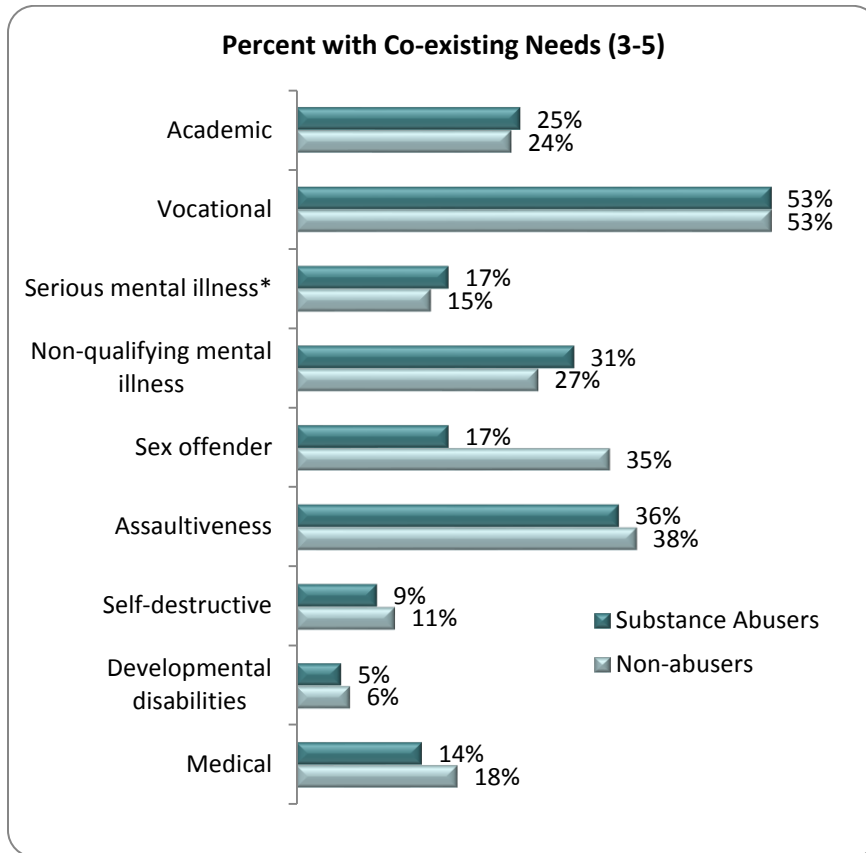
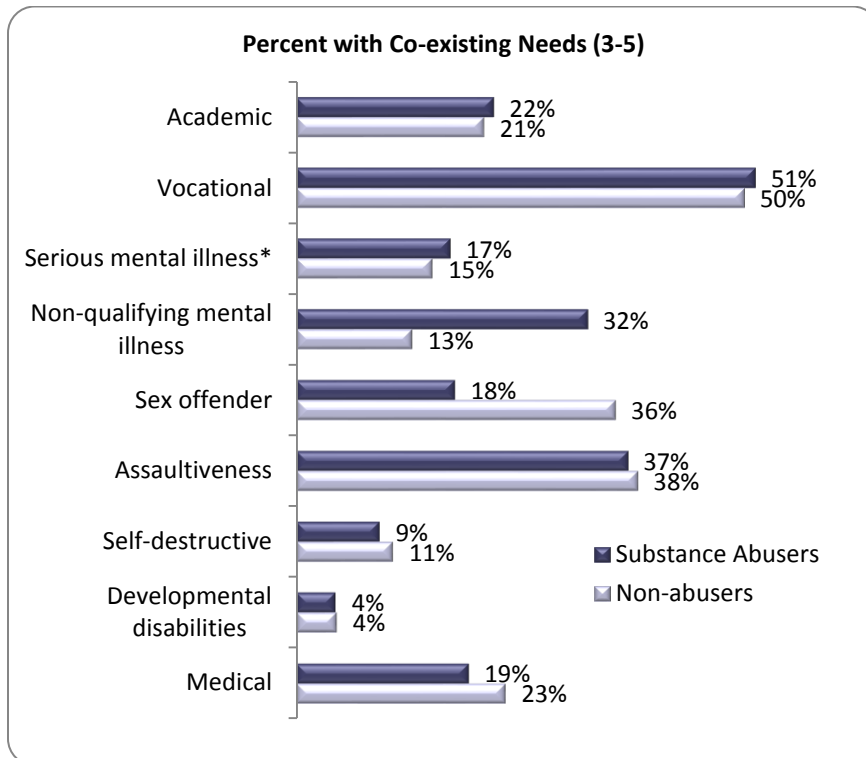


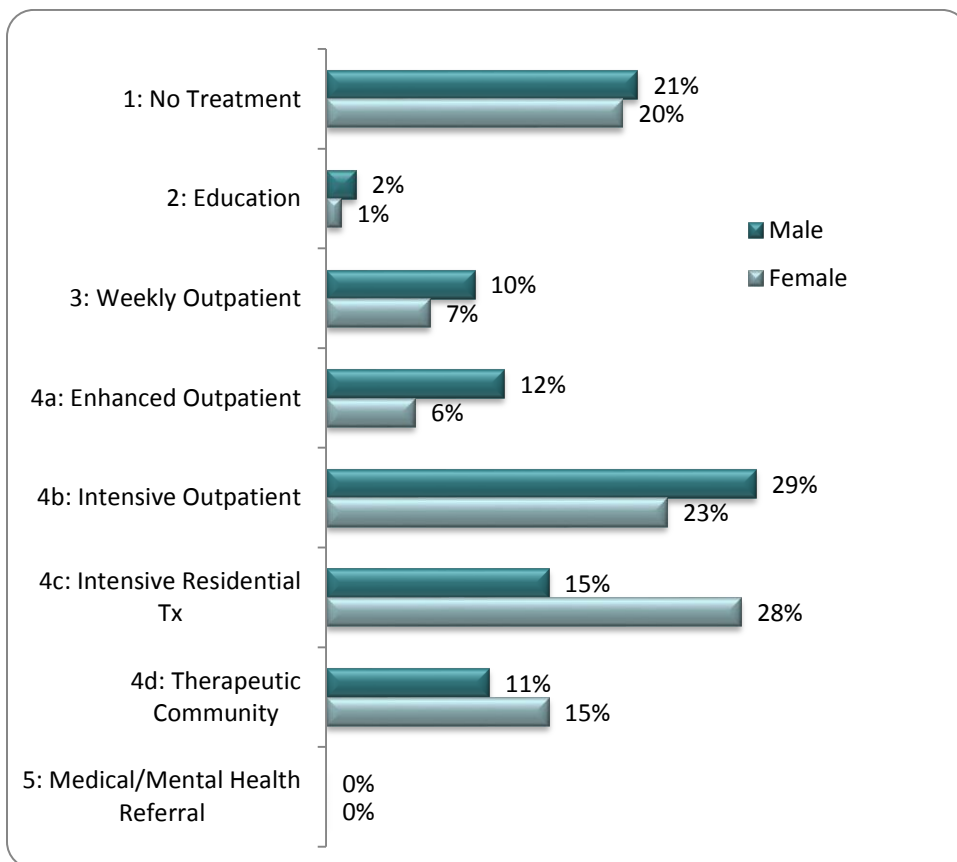
Figure 3. FY12 Needs among Substance Abusers and Non-Abusers (N = 29,131)



\*Serious mental illness had a (C)hronic or (O)rganic qualifier on the psychological level; non-qualifying mental illness included all mental health needs level 3-5 ratings

There were 4,329 SOA-R assessments administered by DRDC assessors, counselors in the facilities, and Treatment Accountability for Safer Communities (TASC) case managers in FY11. In FY12, 4,024 SOA-R assessments were administered. Offenders were identified for further SOA-R assessment based on the elevated diagnostic substance abuse needs level. As of June 30, 2011, there were 20,051 offenders in the CDOC population who had current SOA-R assessments—17,797 male offenders and 2,254 female offenders. See Figure 4 for estimates of the substance abuse treatment recommendation data across SOA-R level and gender. As of June 30, 2012, there were 19,725 offenders in the CDOC population who had current SOA-R assessments—17,383 male offenders and 2,342 female offenders. See Figure 5 for estimates of the substance abuse treatment recommendation data across SOA-R level and gender.

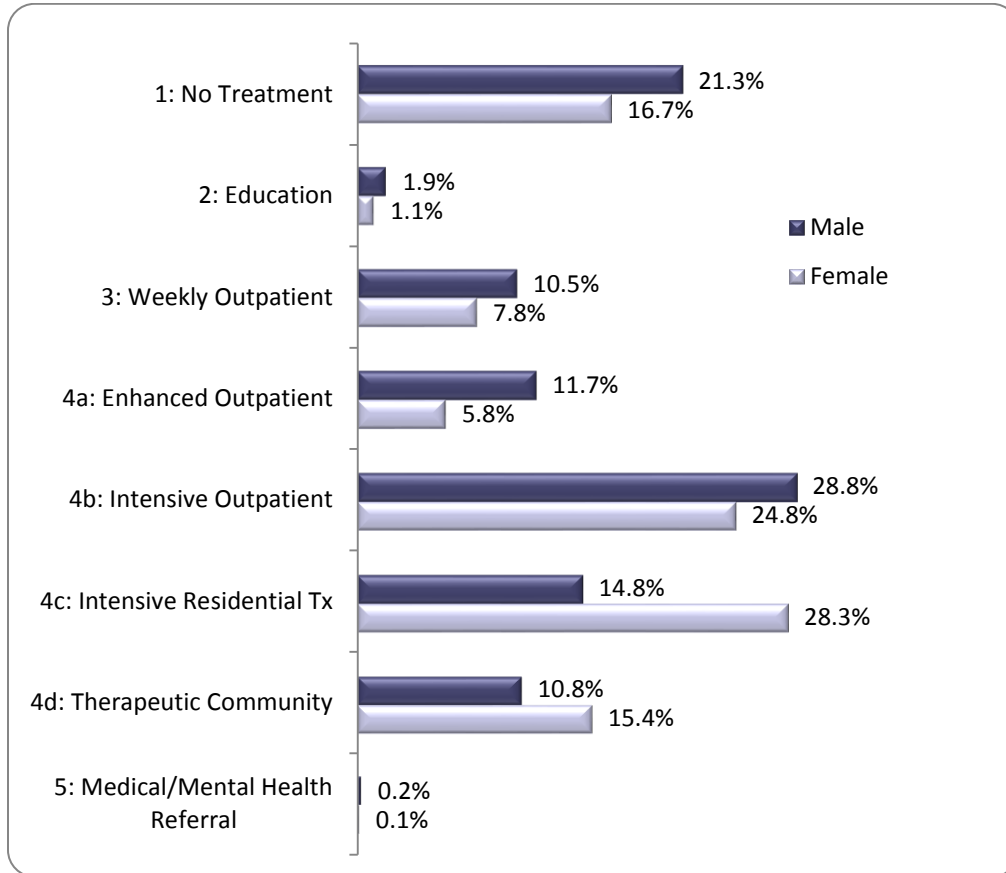
**Figure 4. FY11 Estimated Offender Substance Abuse Treatment Recommendations**





## Evaluation

Figure 5. FY12 Estimated Offender Substance Abuse Treatment Recommendations



The greatest treatment needs of offenders were levels 4b (intensive outpatient treatment) and 4c (IRT). The generally high treatment needs demonstrated in this sample would be expected among incarcerated offenders because they represent the extreme end of the criminal justice population. It would not be expected that a large percentage of offenders would require level 2 treatment, which consists of only substance abuse education. The higher treatment levels incorporate the psychoeducational components as well as therapy. An interesting finding revealed that female offenders had higher treatment needs overall than males—approximately 43% of the assessed female population was identified as needing a residential treatment program compared to approximately 26% of males.

### SERVICE DELIVERY

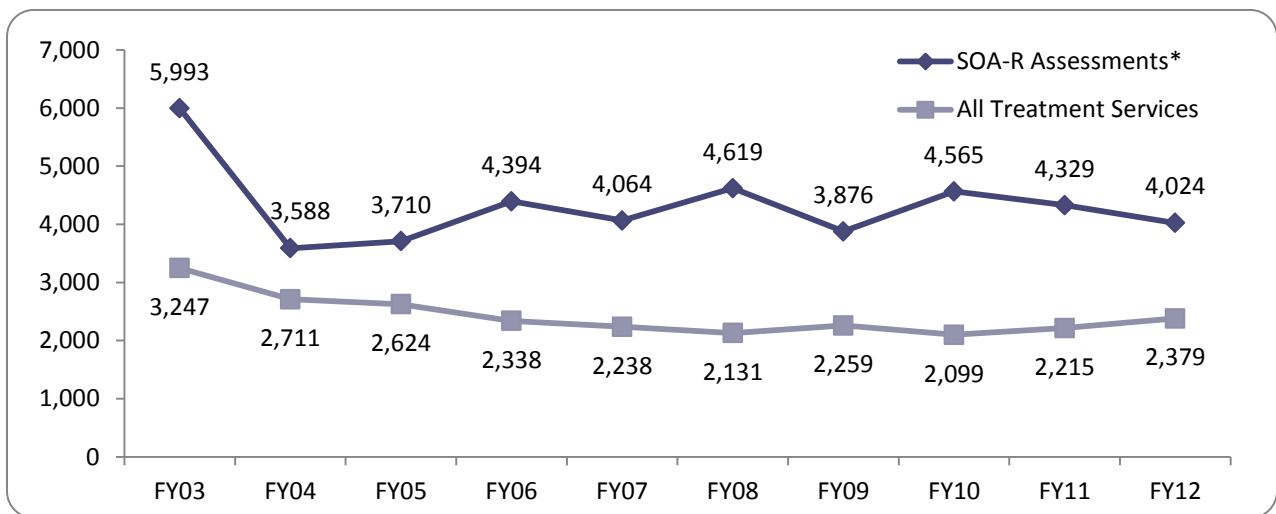
Beginning in March 2003 and continuing through June 2003, state agencies were informed that the state was suffering from a shortfall of anticipated income and budgets would be reduced. The CDOC budgets for FY03 and FY04 were revised and CDOC was forced to cut positions, which resulted in significant cuts in offender programs.

The Alcohol and Drug Services subprogram was among those that received the largest cuts. The FY04 budget was 40% smaller than previous years. The result was a dramatic decrease in the

substance abuse treatment services provided to offenders. Because TCs have been federally funded and have empirically demonstrated their effectiveness at both the local and national level, Alcohol and Drug Services prioritized funds to keep those programs at full capacity. Outpatient treatment services were reduced at some facilities and totally eliminated at others.

Figure 6 displays the assessment and treatment services across a 10-year span. SOA-R assessments in particular declined from FY03 to FY04, as did treatment delivery, although the decline was not as dramatic. With the addition of one TC in FY09 and two more in FY10, Alcohol and Drug Services has been working to increase staffing and program availability across all facilities in order to approach pre-budget-cut service delivery rates. Beginning in FY11, participation in DUI programs was included.

**Figure 6. Ten-Year Alcohol and Drug Service Delivery Rates**



\*Total number of SOA-R assessments completed by DRDC assessment specialists, facility counselors, and TASC case managers

The availability of services was examined using termination summary data because enrollment data was not uniformly available and discharge data provided a more complete picture of offenders' involvement in treatment. Figures 7 and 8 break down the program terminations for each treatment modality by gender in FY11 and FY12 respectively. Level 4b Intensive Outpatient treatment was the predominant modality available within CDOC during FY11 and FY12 followed by Level 4d Therapeutic Community treatment.

## Evaluation

Figure 7. FY11 Discharges by Treatment Program (N = 2,215)

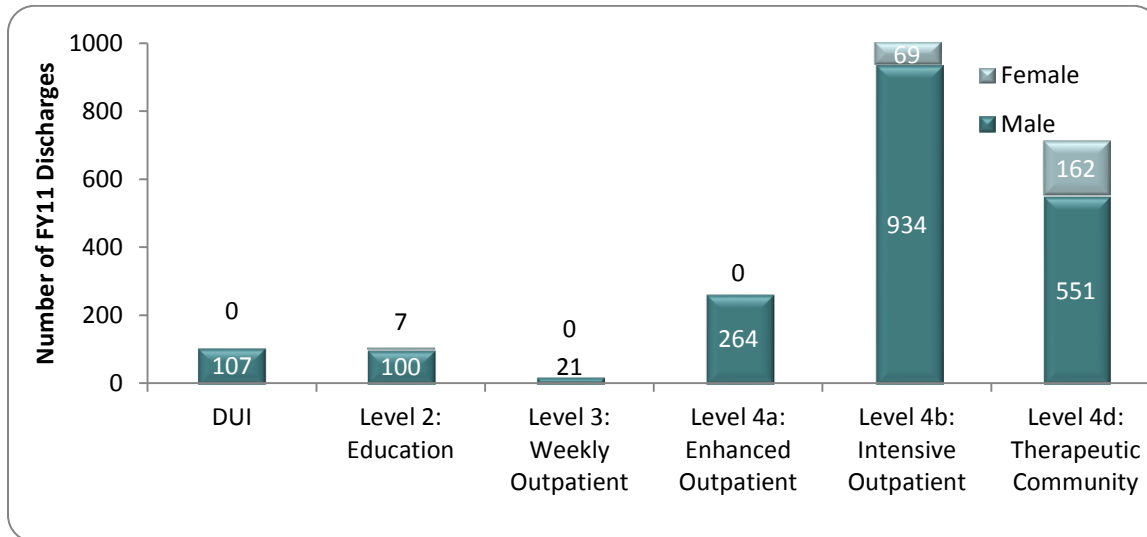
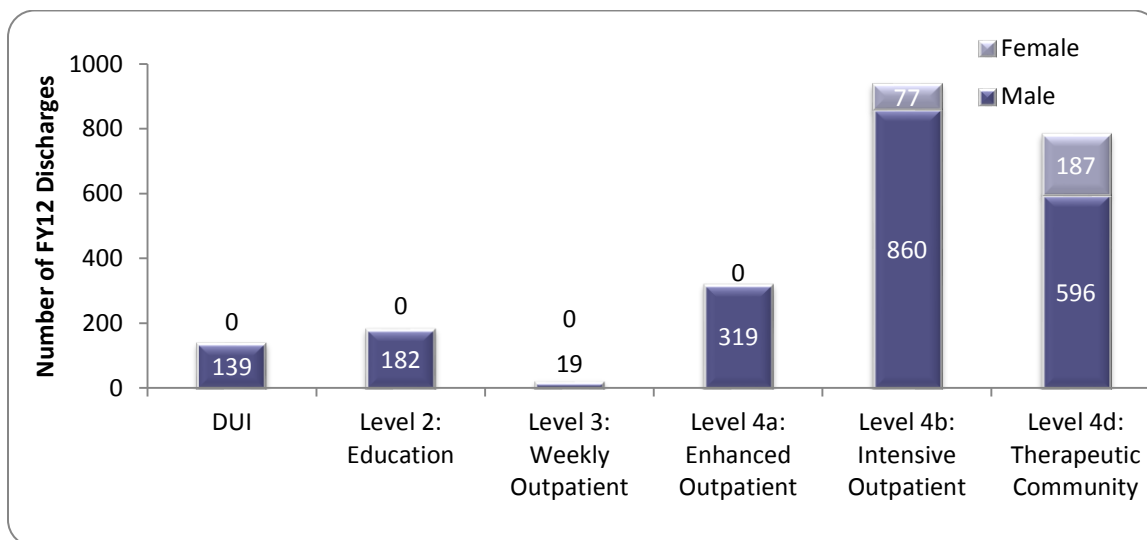


Figure 8. FY12 Discharges by Treatment Program (N = 2,379)



Note: Level 4c (IRT) is not offered in any CDOC facility

Termination reasons for FY11 and FY12 program terminations were examined by treatment level (see Tables 2 and 3). Transfers noted in the table are usually due to offender movements between facilities or release to a community center or parole. Most treatment participants successfully completed treatment; however, level 4d participants quit or were expelled at a higher rate than those in other treatment levels. This finding was consistent with the intensity of the TC modality. Because participation in TC was voluntary, offenders who struggled with the challenges and structure of the program tended to drop out, regardless of the sanctions imposed. Participants who did not comply with the program rules were subject to termination by staff in order to maintain the required positive peer culture.

**Table 2. FY11 Termination Reasons for FY11 Treatment Discharges (N = 2,108)**

	2: Educ n = 107	3: WOP n = 21	4a: EOP n = 264	4b: IOP n = 1,003	4d:TC n = 713	Total
<b>Finished</b>	87%	67%	83%	86%	50%	73%
<b>Transferred</b>	8%	5%	9%	7%	15%	10%
<b>Quit</b>	0%	0%	0%	0%	6%	2%
<b>Expelled</b>	0%	0%	3%	1%	23%	9%
<b>Other*</b>	5%	28%	5%	6%	65	6%

**Table 3. FY12 Termination Reasons for FY12 Treatment Discharges (N = 2,240)**

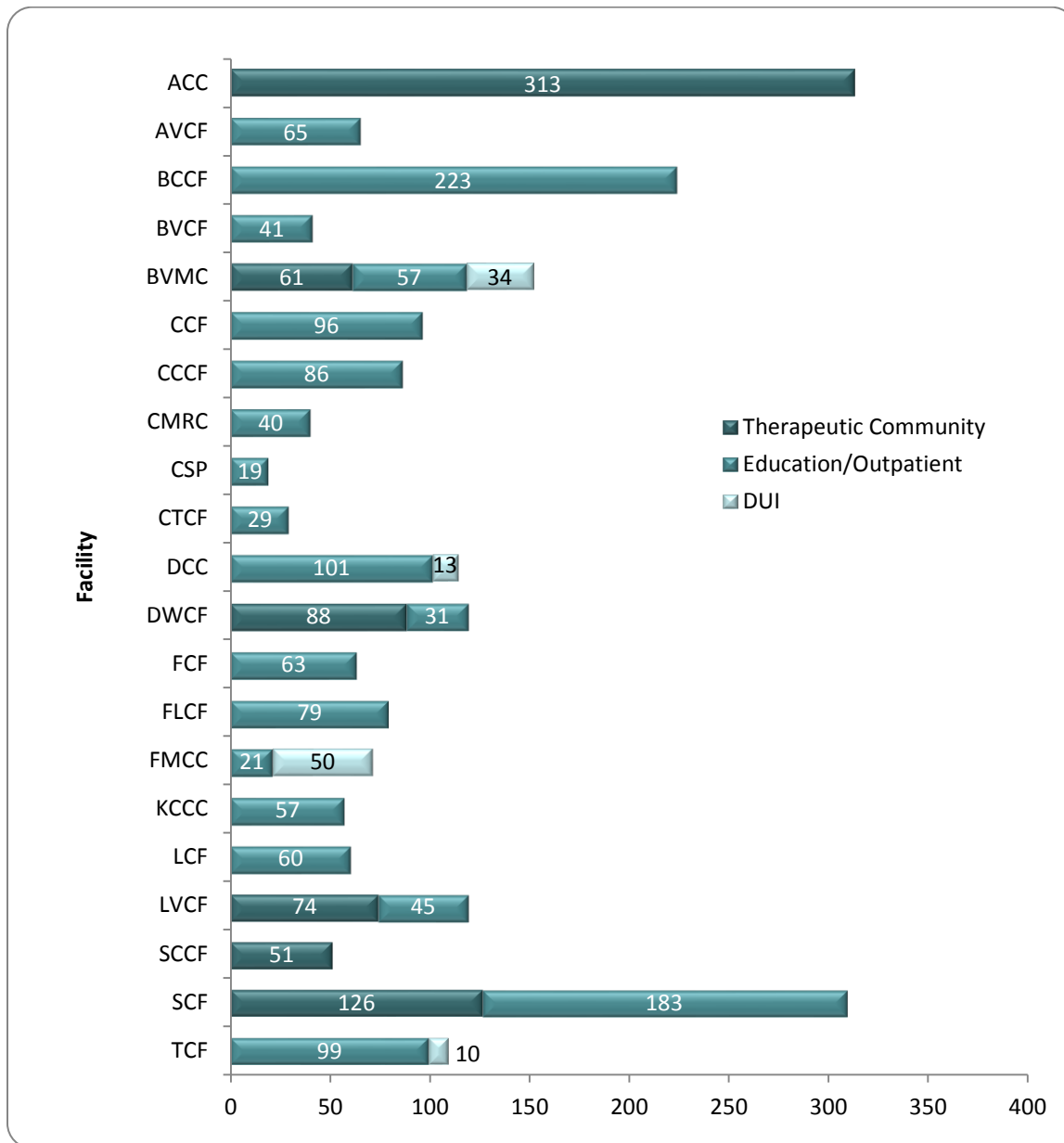
	2: Educ n = 182	3: WOP n = 19	4a: EOP n = 319	4b: IOP n = 937	4d:TC n = 783	Total
<b>Finished</b>	66%	53%	76%	78%	45%	65%
<b>Transferred</b>	5%	26%	11%	10%	21%	14%
<b>Quit</b>	4%	0%	1%	1%	5%	2%
<b>Expelled</b>	0%	5%	3%	2%	24%	10%
<b>Other*</b>	25%	16%	9%	9%	5%	9%

\*Includes administrative termination; does not include Level 4c (which is not offered in CDOC facilities) or DUI discharges

Treatment program discharges (all types) were separated into two groups—therapeutic community and education/outpatient—and further divided by CDOC facility (see Figures 9 and 10). Although offender assessment services were provided at DRDC, treatment services were not because facility resources were dedicated to processing prison admissions.

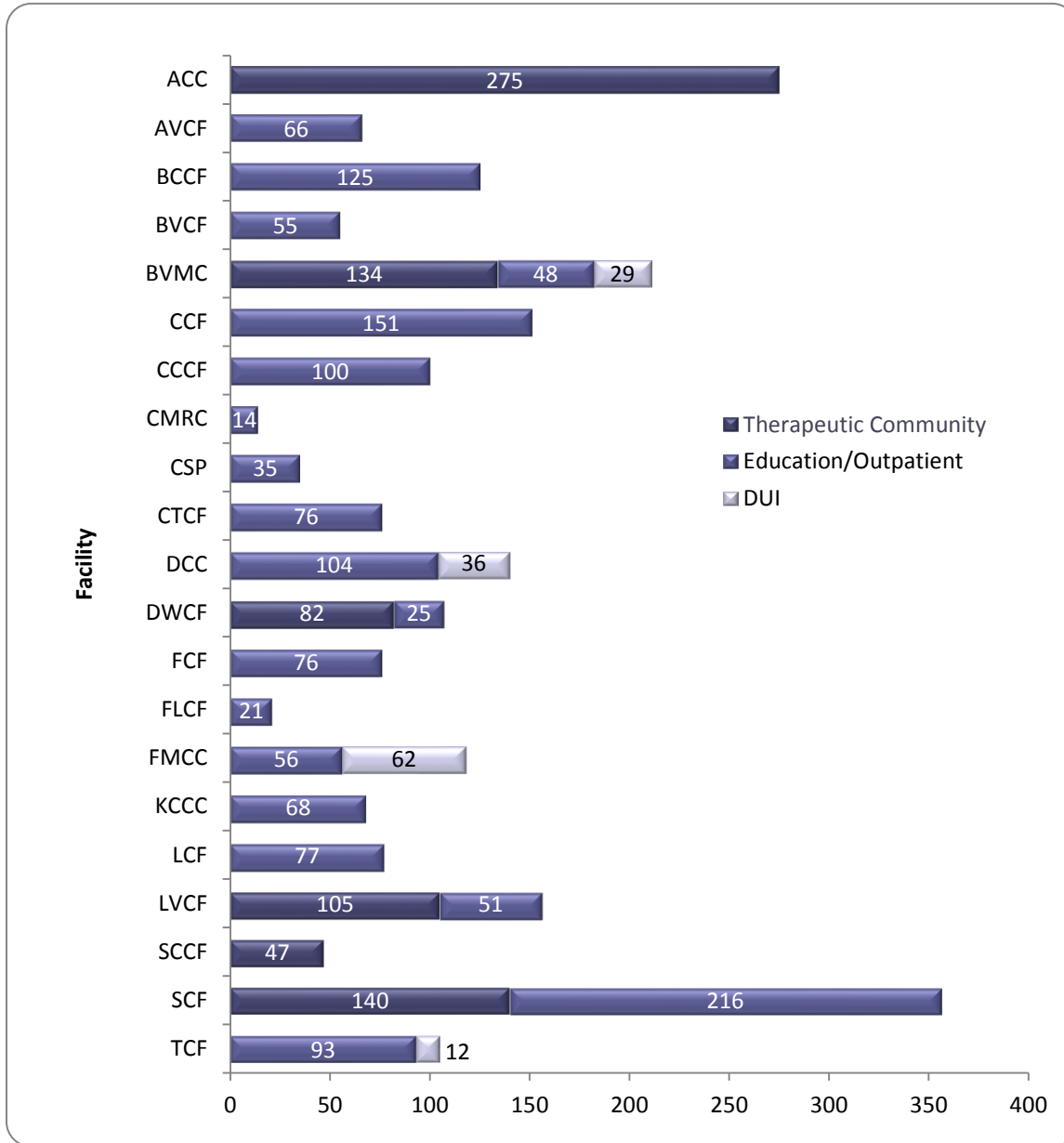
**Evaluation**

**Figure 9. FY11 Program Discharges by Facility (N = 2,215)**



\*No discharge data for CCC, DRDC, RCC, and SCC

Figure 10. FY12 Program Discharges by Facility (N = 2,379)



\*No discharge data for CCC, DRDC, RCC, and SCC

Following are the mean number of treatment hours for each level of treatment: level 2, 20 hours; level 3, 30 hours; level 4a, 66 hours; and level 4b, 65 hours. There were no level 4c programs offered within CDOD facilities. Level 4d programs were much longer in duration, with a mean length of stay between 220 and 221 days.

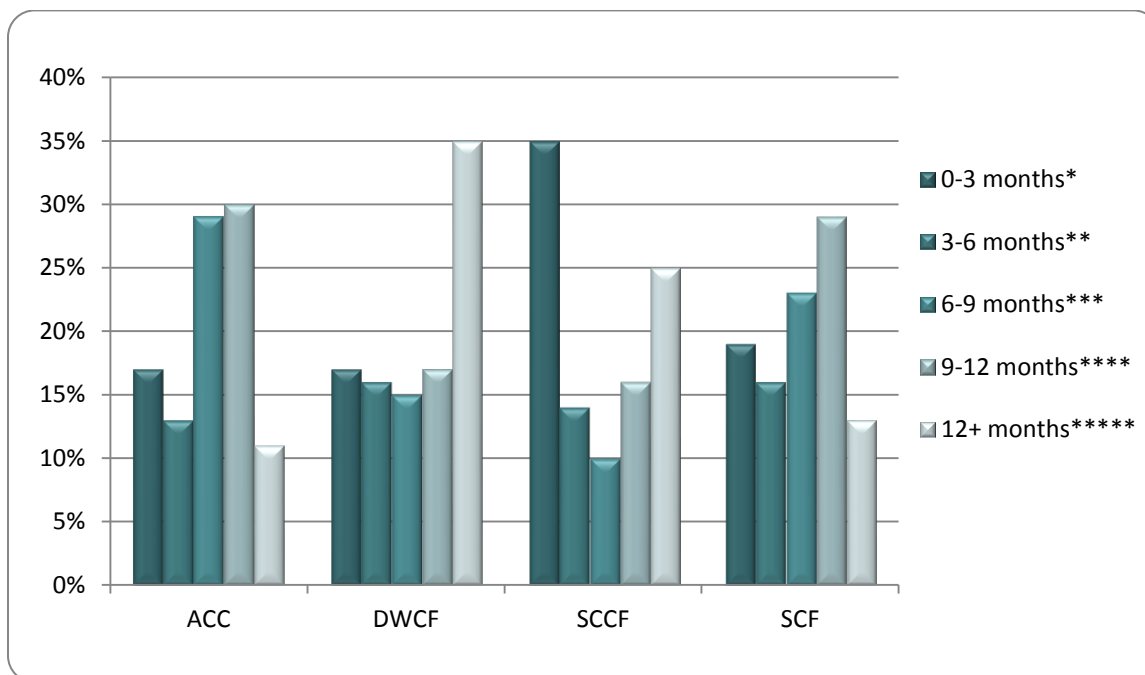
National research on TC treatment has shown that the greatest predictor of TC outcomes is the length of time in treatment (Burdon, Messina, & Prendergast, 2004), with the optimal treatment length between 9 and 12 months (Wexler, 1995). Research identified motivation and readiness to change as contributing factors to treatment engagement, retention, and length of stay (Burdon et al., 2004). The counselor-client relationship has also been shown to impact treatment duration

## Evaluation

(Knight, Hiller, Broome, & Simpson, 2000). Client factors including better physical health, no previous incarcerations, and previous completion of a TC were significantly associated with treatment retention (Darke, Campbell, & Popple, 2012). Programmatic factors influence retention as well, including counselor and peer support, program structure (Welsh & McGrain, 2008), accessibility of services (Simpson, 2001) and clients' comfort level with large groups (Condelli & De Leon, 1993). Participation in a continuum of care significantly reduces relapse and recidivism compared to no-treatment and in-prison-treatment-only groups (Knight, Simpson, & Hiller, 1999).

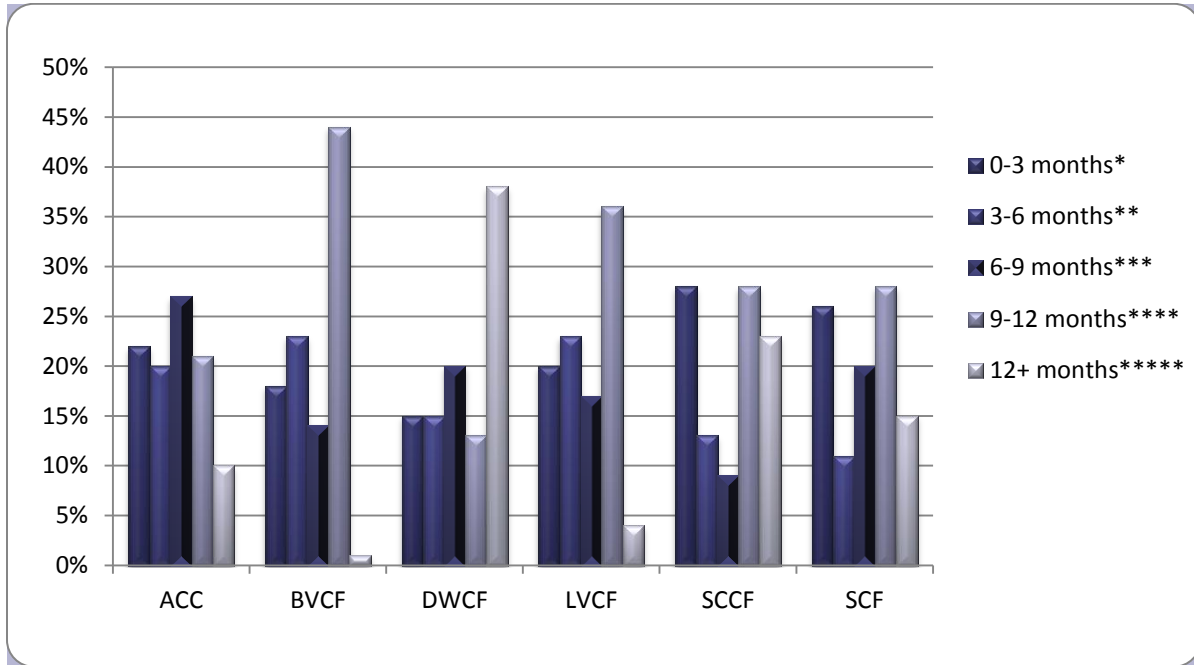
Retention in a TC program has always been a challenge due to the intensity and demands of the program, coupled with its overall length. The time requirement to complete the program in the CDOC prison setting ranges from 6 to 12 months. As shown in Figures 11 and 12, a higher number of TC clients at Buena Vista Correctional Facility (BVCF) and La Vista Correctional Facility (LVCF) stayed in treatment at least 9 to 12 months. These programs are also the newest TC programs within the CDOC. At DWCF, more TC clients participated for longer than 12 months compared to shorter lengths of stay, and more clients in the Arrowhead Correctional Center (ACC) TC program participated for 6-9 months. The majority of Sterling Correctional Facility (SCF) and San Carlos Correctional Facility (SCCF) TC clients either terminated the program within the first 90 days of treatment or participated for 9 to 12 months.

**Figure 11. FY11 Therapeutic Community Length of Stay by Facility**



\*0-3 months: 0-90 days  
 \*\*3-6 months: 91-180 days  
 \*\*\* 6-9 months: 181-270 days  
 \*\*\*\*9-12 months: 271-365 days  
 \*\*\*\*\*12+months: 366+ days

Figure 12. FY12 Therapeutic Community Length of Stay by Facility



\*0-3 months: 0-90 days  
 \*\*3-6 months: 91-180 days  
 \*\*\* 6-9 months: 181-270 days  
 \*\*\*\*9-12 months: 271-365 days  
 \*\*\*\*\*12+months: 366+ days

The concept of treatment matching suggests that positive outcomes can be maximized by tailoring programs to an individual’s characteristics and needs (De Leon, Melnick, & Cleland, 2008). Offender characteristics (e.g., criminal history, age, previous treatment) as well as program characteristics (e.g., duration and intensity) have all been identified as potential factors affecting program success. Yet research on this topic is divided. Appropriately matched clients may have an increased likelihood of completing or staying in treatment longer (Melnick, De Leon, Thomas, & Kressel, 2001); however, matching itself can be extremely difficult due to the overwhelming number of potential factors and therefore becomes less realistic in an applied setting (Ball, 1994). Other research has suggested that undertreating offenders results in less successful outcomes compared to overtreatment (De Leon et al., 2008).

CDOC offender needs-to-modality matching patterns were examined to determine how often offenders accessed programs that met their recommended treatment needs. Of the 2,108 treatment discharges in FY11, 186 offenders had multiple treatment episodes and were only counted once in the analyses, and 173 cases were excluded due to missing assessment data. Of the 2,240 treatment discharges in FY12, 204 offenders had multiple treatment episodes and were only counted once in the analyses, and 99 cases were excluded due to missing assessment data.

Table 4 shows matching patterns for FY11 treatment participants. Percentages on the diagonal represent accurate matching of need to modality (70%); those below the diagonal represent



## Evaluation

offenders who received more intense services than required (24%), as level 4c programs are not designed for in-prison treatment so offenders are automatically referred to 4d programs; and those above the diagonal received less intense services than needed (3%).

**Table 4. FY11 Comparison of Offender-to-Modality Matching Patterns (N = 1,819)**

Rendered Services	Assessed Need					
	2	3	4a	4b	4c	4d
2: Education/increased UAs	0%	0%	0%	1%	1%	1%
3: Weekly outpatient	0%	0%	0%	0%	0%	0%
4a: Enhanced outpatient	0%	0%	10%	0%	0%	0%
4b: Intensive outpatient	0%	0%	3%	43%	0%	0%
4c: Intensive residential	0%	0%	0%	0%	0%	0%
4d: Therapeutic community	0%	0%	0%	0%	21%	17%

Note: Numbers do not add up to 100% due to rounding error

Table 5 shows matching patterns for FY12 treatment participants. Percentages on the diagonal represent accurate matching of need to modality (67%); those below the diagonal represent offenders who received more intense services than required (25%), as level 4c programs are not designed for in-prison treatment so offenders are automatically referred to 4d programs; and those above the diagonal received less intense services than needed (7%).

**Table 5. FY12 Comparison of Offender-to-Modality Matching Patterns (N = 1,926)**

Rendered Services	Assessed Need					
	2	3	4a	4b	4c	4d
2: Education/increased UAs	0%	0%	0%	2%	2%	1%
3: Weekly outpatient	0%	1%	0%	0%	0%	0%
4a: Enhanced outpatient	0%	0%	13%	1%	0%	0%
4b: Intensive outpatient	0%	0%	1%	38%	1%	0%
4c: Intensive residential	0%	0%	0%	0%	0%	0%
4d: Therapeutic community	0%	0%	0%	0%	24%	15%

Note: Numbers do not add up to 100% due to rounding error

## ALCOHOL AND DRUG SERVICES COUNSELOR PROFILE

As of October 31, 2011, there were 57 Alcohol and Drug counselors (including contract positions) employed by the CDOC and an additional 17 counselor vacancies. As of June 30, 2012, there were 76 Alcohol and Drug counselors (including contract positions) employed by the CDOC and an additional 11 counselor vacancies. Table 6 summarizes CDOC counselor demographic information as well as employee information related to addiction counselor certification and staff titles. Counselor data were not available for the private prisons or for contract staff.

Table 6. Alcohol and Drug Counselor Demographics and Employee Information\*

	FY11	FY12
<b>Ethnicity</b>		
Caucasian	71%	72%
Latino/Latina	23%	16%
African American	4%	10%
Other**	2%	2%
<b>Gender</b>		
Male	36%	43%
Female	64%	57%
<b>Age</b>		
21-29	2%	3%
30-39	15%	20%
40-49	23%	23%
50-59	45%	41%
60+	15%	13%
<b>Title***</b>		
Health Care Services Trainee I	2%	3%
Health Care Services Trainee II	27%	8%
Health Care Services Trainee III	63%	18%
Health Professional II	2%	59%
Health Professional IV	6%	2%
Health Professional V	0%	2%
Social Work/Counselor III	0%	2%
Social Work/Counselor IV	0%	5%
Clinical Therapist I	0%	2%
<b>Years of Service</b>		
0-5	90%	74%
6-10	2%	10%
11+	8%	16%
<b>CAC Levels</b>		
None	19%	30%
I	0%	3%
II	10%	13%
III	71%	54%

\*Does not include private prisons or contract staff

\*\*Other includes Native American and Asian ethnic groups

\*\*\*Numbers do not add up to 100% due to rounding error

## ***Overview of Prison-Based Services***

Substance abuse treatment programs are offered at most CDOC facilities. Since July 1, 2008, all alcohol and drug services have been provided by CDOC state employees, with the exception of the DWCF TC staff. The offender population, administrators, mental health coordinators, and treatment providers influence the drug and alcohol programs available at each facility. However, one commonality across facilities is that treatment is generally offered on a group basis.

This program guide describes substance abuse services provided by Alcohol and Drug Services staff in CDOC and private prison facilities as of June 30, 2012. Each treatment program is briefly described below. These curricula may be offered at different levels of intensity and licensed program levels.

### ***PROGRAM DESCRIPTIONS***

#### ***Alcohol and Drug Education***

A basic substance abuse education program is offered to assist offenders in their return to society by providing basic relapse prevention skills. This educational program is offered in two formats. It can be presented in the classroom or presented individually (e.g., at the cell door), with the counselor monitoring the offender's weekly progress.

#### ***Relapse Prevention***

The relapse prevention program is designed for offenders who have suffered substance abuse relapse, usually indicated by a positive urinalysis, while incarcerated or on parole. Within the program, offenders develop their own plan to remain abstinent while incarcerated as well as following their release to the community. This group focuses on connecting offenders to some other form of treatment such as Alcoholics Anonymous (AA) or individual counseling.

#### ***Strategies for Self-Improvement and Change (SSC)***

The SSC curriculum comprises three phases. Which phases are offered depends on the counselor and the facility. Groups also may include substance abuse education and relapse prevention. SSC is a cognitive-behavioral-based approach designed specifically for substance-abusing offenders. Most facilities offer Phase I and some offer Phase II, but typically Phase III is available in the community.

##### ***Phase I***

Offenders are challenged to alter their thinking patterns by developing self-awareness. They are taught that altering their thoughts and behaviors are necessary to make positive changes.

##### ***Phase II***

Offenders are encouraged to focus on developing and implementing action plans.

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*Phase III*

Offenders are assisted with developing the critical thinking skills necessary to resolve conflict and begin to deal with their issues.

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*Therapeutic Community (TC)*

There are six TC programs offered in CDOC state facilities. Four are TC programs for male offenders, one of which is a modified TC for offenders with dual diagnoses of substance abuse and mental illness, and two are TCs for female offenders. In order for an offender to be eligible for TC treatment, he or she must be recommended for treatment at either a 4c (IRT) or 4d (TC) treatment level. Offenders must also be past or within 5 years of their parole eligibility date and must be within 9 months, but not more than 8 years, from their mandatory release date. Mental health needs and custody levels are also considered as part of the eligibility criteria. The CDOC TC programs are described in further detail below.

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*Breaking the Chains of Our Past TC*

The Breaking the Chains of Our Past TC is located at LVCF and opened in July 2010. This program earned its ACA accreditation on July 23, 2012. The community has a total of 80 assigned beds and is a long-term residential behavior modification program for substance dependent/abusing adult female offenders. The program offers affective and cognitive components and is divided into three phases, including an Orientation phase, Family Phase, and Live-in Reentry phase. Each phase should take from 3 to 6 months to complete, depending on the ability and motivation of the offenders.

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*Challenge to Change TC*

The Challenge to Change TC is housed at DWCF and earned its ACA accreditation in June 2009. The program is a long-term residential behavior modification program for substance dependent/abusing female adults. It offers affective and cognitive components and is divided into five phases: Orientation lasts 21 days; Phases I, II, and III each last approximately 2 months; and the Phase III transitional period lasts an additional 2 months. Completion of the program is primarily determined by the motivation of the individual client. The program contains an earned privilege system in which the residents progress through the phases as a reward for taking ownership of past and present behaviors. The Phase III transitional segment includes an aftercare period in which offenders who have completed the program may stay in the unit for an additional 30 days to continue to attend groups and gain support before transitioning out of the TC unit.

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*Crossroad to Freedom House TC*

Crossroad to Freedom House TC is located at ACC and has been ACA accredited since August 2003. This TC operates from a cognitive-behavioral perspective, providing a highly structured, intensive treatment opportunity for incarcerated offenders entrenched in an addictive, criminal lifestyle. The program places high demands and expectations on community members, yet also provides them a prospect for recovery. The rules of the TC model those within society, and responsibility within the community is stressed to residents. This program has 25 beds reserved for dually diagnosed

## ***Prison-Based Services***

offenders and incorporates a reach-in transition component with the community-based Peer I and Independence House TC programs.

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### ***O.U.R. House TC***

The O.U.R. House TC is located at SCF and has been ACA accredited since January 2007. This TC is based on a cognitive-behavioral model and uses intensive group therapy that is highly structured and confrontational. Therapeutic tools such as recognizing and correcting thinking errors, journaling, rational emotive behavioral therapy, group therapy, encounter groups, and intensive relapse prevention programs are featured. Offenders with mental illness have a part-time staff person who addresses co-occurring needs. Treatment staff collaborate with case managers, other key facility providers, and community service providers to assist offenders in reintegration to the community.

---

### ***Personal Reflections TC***

The Personal Reflections TC is located at SCCF and has been ACA accredited since May 2009. This modified TC is designed for offenders who have a dual diagnosis, indicating both a serious mental illness and a substance abuse problem. The TC model is based on the idea that drug abuse manifests itself globally within individuals, thereby affecting social and psychological management. This particular program operates from a cognitive-behavioral orientation in which offenders address problem behavior in the forum of the community. Both SSC and Dialectical Behavior Therapy groups are offered within the TC. The program stresses individual accountability and responsibility to the community. The substance abuse staff interfaces with other CDOC staff for anger management and sex offender treatment. Counselors from SCCF also participate in staffing and provide aftercare groups for offenders who have transitioned from SCCF to the Independence House community corrections centers.

---

### ***The Freedom Project/The New Beginning TC***

The Freedom Project/The New Beginning TC is located at BVMC and began July 15, 2010. This TC operates from a cognitive-behavioral perspective, providing a highly structured, intensive treatment opportunity for offenders. Included are relapse prevention, journaling, and educational and encounter groups. The Beckley Responsibility and Values Enhancement (BRAVE) program also introduces participants to TC in a prison setting, addressing topics such as orientation to treatment, adjustment to incarceration, criminal lifestyles, lifestyle balance, living with others, and success strategies. The goal is to help participants replace old thinking and strategies with new ones that are more realistic and sustainable.

---

### ***Elective Programs***

Elective programs are voluntary and do not meet the requirements to be an SOA-R level program, nor do they fulfill offenders' SOA-R treatment requirements. Elective programs are different from voluntary programs (e.g., 12-step AA) in that they are led exclusively by alcohol and drug counselors and follow an approved substance abuse curriculum. Discharge from these groups is

recorded and successful completion can be applied to qualifying for Hepatitis C Interferon treatment.

---

*Aftercare*

This support group is a volunteer meeting for offenders who have completed a substance abuse program or who have treatment needs for services not available at the facility. In this group, offenders discuss personal issues they have not coped with well in the past and identify ways to develop new skills for dealing with future relapse and recidivism challenges. This is an open and ongoing group for all offenders who attend.

---

*Driving with Care: DUI Level II Education*

This program was implemented in facilities in 2009. This is a 24-hour education program for persons who have been convicted of driving while their blood alcohol level was beyond legal limits or while they were under the influence of a drug other than alcohol. While this group does not fall under the SOA-R level treatment system, it does require that the offender meet eligibility criteria established by the Department of Motor Vehicles. Offenders must attend every group session, led by trained counselors, to receive participant credit. The main purpose of this program is to help the individual make informed choices to prevent impaired driving in the future. This program is licensed by DBH, and all treatment information is placed in the Treatment Management System (statewide). Offenders can receive credit for this program while incarcerated and apply it toward regaining their driver's license.

---

*Victim Impact*

This is a 13-week program designed to assist offenders in identifying the impact of their crimes on their victims as well as the widespread effect on others. This group is available to all offenders, whose crimes range from property crimes to homicide. The class utilizes both a booklet and videos and is offered weekly for 2.5 hours.

---

*Voluntary Programs*

These are programs that offenders can choose to attend but do not fulfill their SOA-R treatment requirements. These programs do not fit within the standardized treatment level system but provide valuable services to offenders. Groups are facilitated by community volunteers or facility staff.

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*Challenge to Change I & II*

These programs were developed primarily for offenders with TC treatment needs and are geared toward introducing these offenders to cognitive behavioral programming until they can be moved to a facility that offers a TC program. Even though this introductory program is voluntary, it is run as a closed group due to a high volume of offenders with TC treatment needs. Throughout this program offenders are able to share, in safety, their fears and concerns about the changes they need to make and what they will experience in the TC program.

## ***Prison-Based Services***

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### ***Relapse Prevention***

This program follows the Relapse Prevention curriculum designed to help offenders develop their own plan to remain abstinent while incarcerated as well as in the community. It seeks to connect offenders with treatment and other support groups. This curriculum follows the pace of the group and is open to anyone interested in participating.

---

### ***Alcoholics Anonymous (AA)***

The AA program is a 12-step self-help group. These groups are available to all offenders at all facilities except DRDC on a voluntary basis. Volunteers from the community usually oversee the groups. Some facilities offer the Al-Anon program, an adapted 12-step self-help group for offenders who have family members or friends who are alcoholics.

---

### ***Alcohol and Drug Education: Special Needs & Special Needs Administrative Segregation***

This program follows the curriculum for Alcohol and Drug Education, seeking to provide female offenders in administrative segregation an opportunity to gain basic substance abuse education around relapse prevention. It is offered in a classroom format and is an open, ongoing group that offenders attend voluntarily.

---

### ***Anger Management***

This program teaches offenders relaxation techniques, cognitive restructuring, problem solving, and other strategies to control or reduce triggers that lead to uncontrollable anger and aggression.

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### ***Christian 12-Step Ministry***

The program is a teaching ministry presenting the message of recovery and freedom from addiction through a Christian perspective.

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### ***HIV 101 Workshop***

The program is co-facilitated by counselors, teachers, and medical staff at Colorado Territorial Correctional Facility (CTCF) under a grant from the Department of Health and emphasizes educating the offenders with prevention methods for Hepatitis-C, HIV, and other sexually transmitted diseases. This 3-hour workshop is offered approximately six times per year at CTCF and each class has approximately 80 attendees.

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### ***Narcotics Anonymous (NA)***

The NA program is a 12-step, self-help group for offenders experiencing problems with drugs other than alcohol. The group offers recovering addicts peer support.

---

### ***White Bison***

This program uses the Medicine Wheel and 12-step program to provide a culturally appropriate recovery support program for Native American offenders. Participants learn about Medicine Wheel teachings and how to apply them to the steps. In addition, participants share their insights and experiences in talking circle. They also learn how to mind map their own innate knowledge around

these teachings and then apply that knowledge to their daily lives and decision-making processes. The goal of the program is to create strong social and emotional bonds between the individuals who participate to develop trust, autonomy, and other healthy feelings and thought patterns that will help them grow emotionally, mentally, physically, and spiritually.



## *Facilities and Programs*

The following pages provide detailed facility information pertaining to the alcohol and drug services available throughout the state. (See the Appendix for a list of facility acronyms.) Below is a description of some of the information available on the individual facility pages.

### *Program Information*

Treatment capacity was determined using a basic formula factoring in annual leave, sick leave, and holiday time, estimating that counselors offer groups approximately 45 weeks per year. The formula also accounts for 2 weeks between groups to allow counselors time to finalize files and discharge paperwork, conduct SOA-R assessments, and identify offenders for their upcoming group. Combining the maximum group capacity of 12 participants and the number of groups available at one time yielded the annual treatment capacity for each facility. Several factors can impact this estimate, however. It is not uncommon for fewer than 12 offenders to be in a group at one time. This is largely due to scheduling conflicts with inmates' jobs and other programming needs (e.g., education). Security reasons (e.g., facility lockdowns) or availability of group space might also influence the number of groups offered. Conversely, treatment capacity might also be higher than reported due to counselors allowing less time between groups and fluctuating group and personnel schedules.

### *Offenders Awaiting A & D Services*

The first figure on each page provides a summary of the types of services offenders were waiting to receive at the end of FY11 and FY12. Offenders who had an elevated substance abuse needs level (i.e., 3 – 5) require further assessment on the SOA-R and are identified under "Need Assessment." Other offenders awaiting services include those who *have* received an SOA-R assessment and are recommended to receive outpatient (level 3, 4a, 4b) or TC (level 4c or 4d) services.

### *FY11 and FY12 Treatment Discharges*

The second figure provides information regarding the reasons offenders were discharged from the facility-based alcohol and drug programs during FY11 and FY12. (This figure was omitted if programs were not offered at the facility during FY11 or FY12.) This treatment discharge information includes offenders who participated in outpatient and TC programs as well as those who finished DUI level II education. The discharge reasons are defined below:

#### *Finished*

Offender has achieved all treatment planning goals and the counselor/treatment team agrees with the decision to discharge the offender.

#### *Transferred*

The offender has not met the requirements to finish, although satisfactory process has been made. Further participation is prohibited as a result of a move to another facility or release to community.

***Quit/Dropped***

Offender has chosen to withdraw from participation prior to completion of treatment goals. The decision to drop out of the program is against professional advice and is not due to an extenuating circumstance (medical issue or transfer).

***Expelled***

Client has been terminated from the program as determined by the counselor/treatment team as a result of the client's behavior that was in direct conflict with the treatment program or facility policy.

***Other- Administrative Termination***

Discharge from treatment is due to an overriding medical or mental health issue preventing treatment participation. This is supported by medical or mental health services.

***Program Schedule***

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Included in these pages is information regarding the groups that are offered at each facility for each level of treatment. Treatment group descriptions include the duration of each group, hours per week, and counselor names. However, it is important to note that not all these groups are available at one time; counselors often alternate between offering certain curricula and levels of care based on offender need.

***Alcohol and Drug Services Management Team***

Dana Bustos, Alcohol and Drug Services Administrator

Dennis O'Neill, Outpatient Clinical Supervisor

David Booth, Therapeutic Community Clinical Supervisor

Ro Block, Program Assistant

Tammie Craddock, Data Specialist

Kim Muhlhauser, Researcher

# Arkansas Valley Correctional Facility

## Facility and Program Summary

### Facility Facts

Warden: Steve Hartley      Opened: 1987      Beds: 1,007      Level: Medium

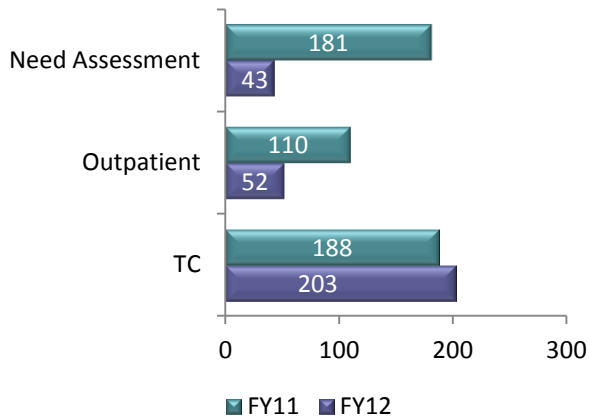
### Program Information

Treatment Capacity: 240      Licensed Treatment Levels: 2, 3, 4a, 4b, DUI

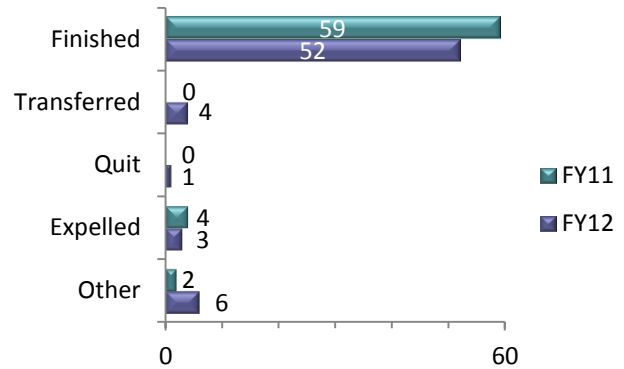
### Number of Certified Addiction Counselors (CAC)

None: 0      CAC I: 0      CAC II: 0      CAC III: 3

### Offenders Awaiting A & D Services



### Outpatient Treatment Discharges



## Program Schedule

### Alcohol and Drug Education

Level: 2  
 Duration: 15 weeks  
 Schedule: 8:30 – 11:00 AM Thursdays  
 Counselors: Sandra Ybarra

### Relapse Prevention

Level: 3  
 Duration: 13 weeks  
 Schedule: 8:30 – 11:00 AM Monday through Wednesday  
 Counselors: Sandra Ybarra

**SSC Phase I**

<b>Level:</b>	4b
<b>Duration:</b>	8 weeks
<b>Schedule:</b>	12 hours per week
<b>Counselor:</b>	Michelle Howard
<b>Level:</b>	4b
<b>Duration:</b>	8 weeks
<b>Schedule:</b>	10 hours per week
<b>Counselor:</b>	Michelle Howard
<b>Level:</b>	4b (alternates with 16 week 4a)
<b>Duration:</b>	16 weeks
<b>Schedule:</b>	10-12 hours per week
<b>Counselor:</b>	James Gribble

**SSC Phase II**

<b>Level:</b>	4a
<b>Duration:</b>	6-8 weeks
<b>Schedule:</b>	9 hours per week
<b>Counselor:</b>	James Gribble

**Elective and Voluntary Programs**

AA, NA, Victim Impact, and Aftercare

# Arrowhead Correctional Center

## Facility and Program Summary

### Facility Facts

Warden: Pam Ploughe

Opened: 1990

Beds: 524

Level: Minimum-R

### Program Information

Treatment Capacity: 195

Licensed Treatment Levels: 2, 3, 4a, 4b, 4d, DUI

### Number of Certified Addiction Counselors (CAC)

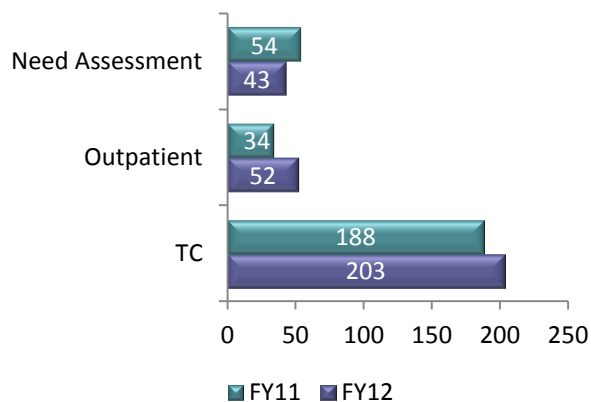
None: 6

CAC I: 1

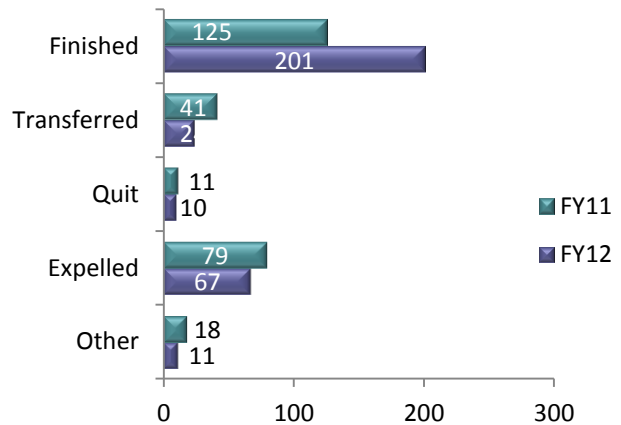
CAC II: 0

CAC III: 8

### Offenders Awaiting A & D Services



### TC Treatment Discharges



## Program Schedule

### Crossroad to Freedom House Therapeutic Community

**Level:** 4d: Therapeutic Community

**Duration:** 9 - 12 months

**Capacity:** 195

**Schedule:** Participants are required to work and attend groups. Work schedules vary by work assignment. Participants spend on average 3 hours per day, approximately 4 days per week, in groups.

**Supervisor:** Vincent Romero

**Manager:** Shane Martin

**Counselors:** Andres Abalos, Benetta Cruz, Marianne Fahey, Andrea Hutchens, Malgorzata Nussbaum, Rachel Hollyfield, Deborah Gonzales, William Bailey, Connie Palm, Daniel Brown, Kathleen Gilbert, Marcia Jackson, and Mary Jackson.

**Assessment Specialist:** Marvel Wolken

Crossroad to Freedom House Therapeutic Community (continued)

There is one counselor vacancy at this facility.

<b>Peer Transition:</b>	2 days per month at ACC
<b>Staff:</b>	Michael Dent
<b>Independence House Transition:</b>	As needed (phone or face-to-face interviews)
<b>Staff:</b>	Erin Marie Coloroso and Ann Elizabeth Faragher
<b>Southern Colorado TC (Crossroads Turning Points, Inc.):</b>	2 days per month at ACC
<b>Staff:</b>	Mark Fleming and Rose Aguilar

**Elective and Voluntary Programs**

AA, Anger Management, and Parenting

# Bent County Correctional Center (Private)

## Facility and Program Summary

### Facility Facts

Warden: Brigham Sloan      Opened: 1993      Beds: 1,466      Level: Medium

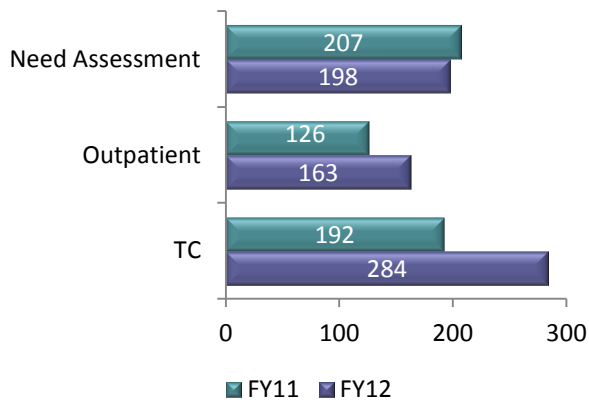
### Program Information

Treatment Capacity: 156      Licensed Treatment Levels: 2, 3, 4a, 4b

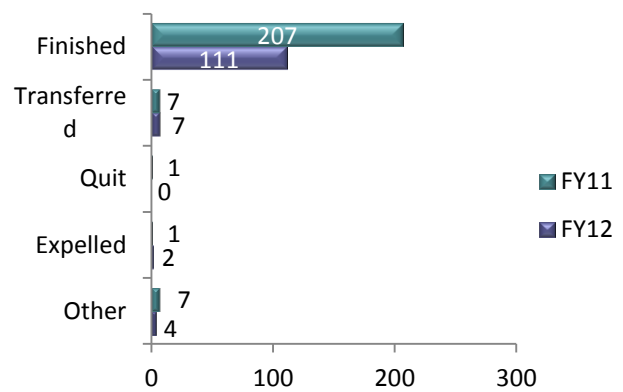
### Number of Certified Addiction Counselors (CAC)

None: 0      CAC I: 1      CAC II: 1      CAC III: 1

### Offenders Awaiting A & D Services



### Outpatient Treatment Discharges



## Program Schedule

### SSC Phase I

**Level:** 4a: Enhanced Outpatient

**Duration:** 12 weeks

**Schedule:** 9 hours per week

**Counselor:** Raquel Lucero

**Level:** 4b: Intensive Outpatient

**Duration:** 7 weeks

**Schedule:** 12 hours per week

**Counselor:** Steven Valdez

**SSC Phase II**

**Level:** 4a: Enhanced Outpatient

**Duration:** 6 weeks

**Schedule:** 6 hours per week

**Counselor:** Raquel Lucero

**Elective and Voluntary Programs<sup>1</sup>**

AA, NA, and Relapse Prevention

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<sup>1</sup> Several programs are offered in Spanish.



# Buena Vista Correctional Facility

## Facility and Program Summary

### Facility Facts

Warden: John Davis

Opened: 1892

Beds: 920

Level: Medium

### Program Information

Treatment Capacity: 60

Licensed Treatment Levels: 2, 3, 4a, 4b, DUI

### Number of Certified Addiction Counselors (CAC)

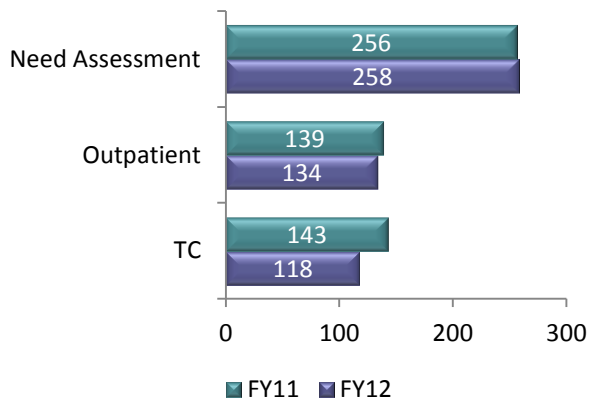
None: 0

CAC I: 0

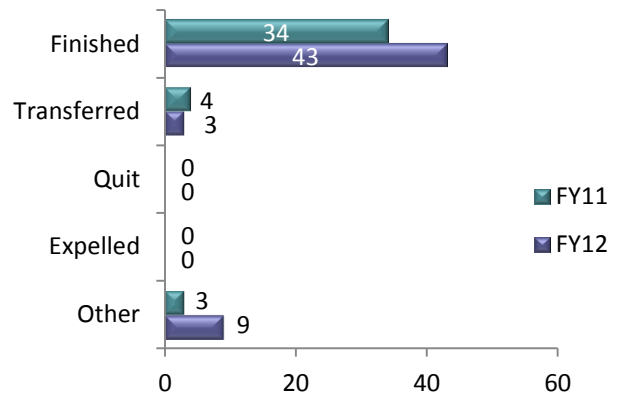
CAC II: 0

CAC III: 1

### Offenders Awaiting A & D Services



### Outpatient Treatment Discharges



## Program Schedule

### SSC Phase I

**Level:** 4b/paid: Intensive Outpatient

**Duration:** 7 weeks

**Schedule:** 20 hours per week

**Counselor:** Edward Snead

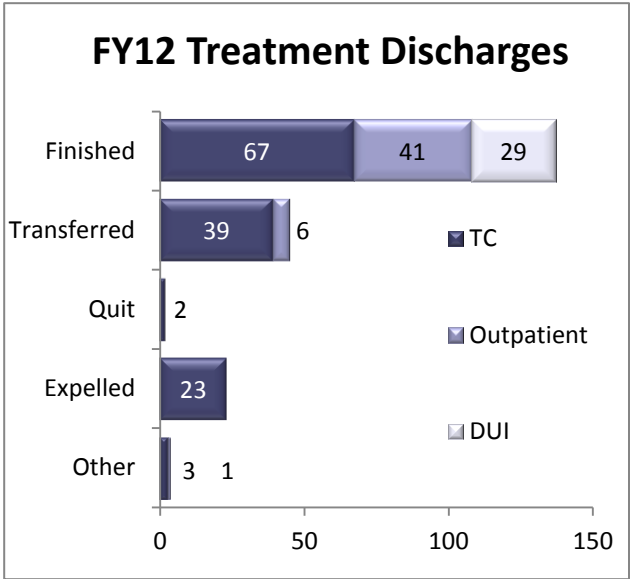
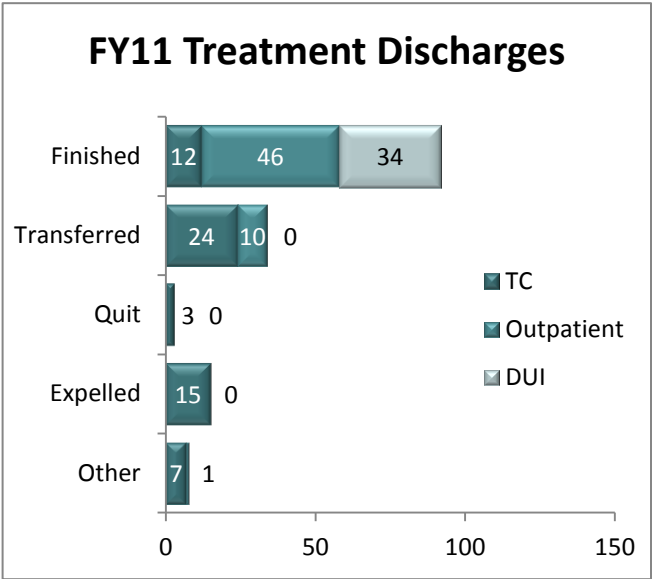
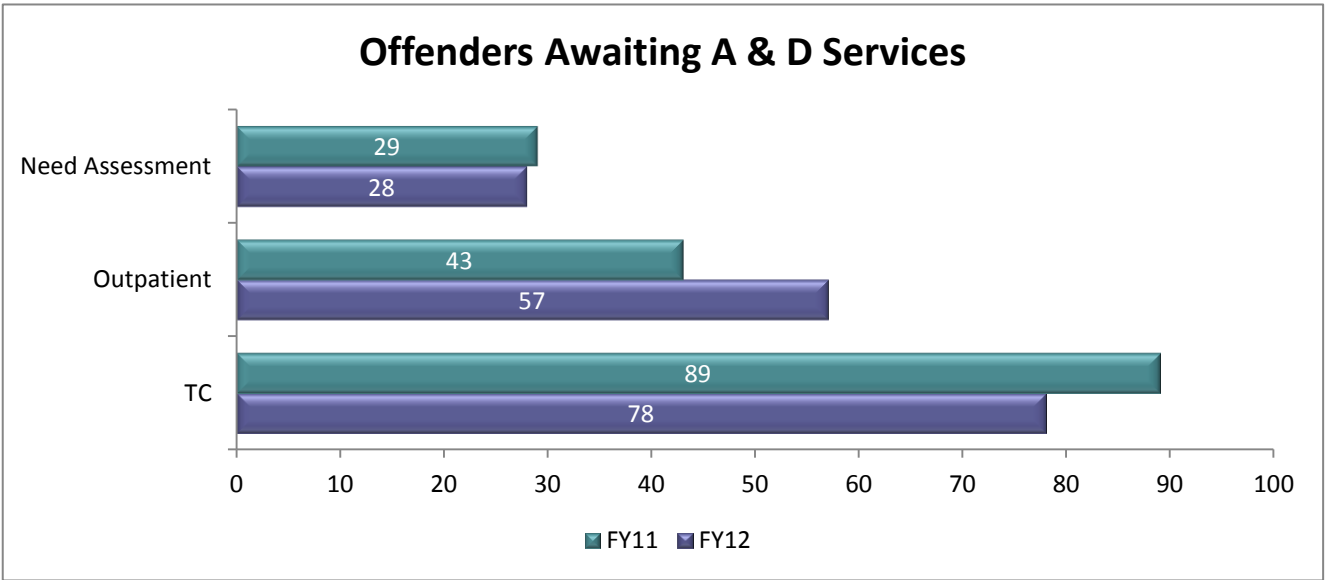
### Elective and Voluntary Programs

AA

# Buena Vista Minimum Center

## Facility and Program Summary

Facility Facts			
Warden: John Davis	Opened: 1984	Beds: 304	Level: Min R
Program Information			
Treatment Capacity: 232		Licensed Treatment Levels: 2, 3, 4a, 4b, 4d, DUI	
Number of Certified Addiction Counselors (CAC)			
None: 3	CAC I: 1	CAC II: 2	CAC III: 3



**Program Schedule**

**The Freedom Project/ The New Beginning Therapeutic Community**

**Level:** 4d: Therapeutic Community  
**Duration:** 9 - 12 months  
**Capacity:** 100  
**Schedule:** Participants attend groups about 3 days per week for a total of 10 hours per week.  
**Supervisor:** Garrett Gebhart  
**Counselors:** Marcelle England, Joy Sorrell, Scott Simpson, Penny Grant, David Palermo, Christopher Teipel, and Deborah Papp

**SSC Phase I**

**Level:** 4b/paid: Intensive Outpatient (alternates with 8-10-week 4a/paid)  
**Duration:** 8 - 10 weeks  
**Schedule:** 12 hours per week  
**Counselor:** Himant Ellis

**Elective and Voluntary Programs**

AA

**Driving with Care**

**Level:** DUI Level II Education  
**Duration:** 12 weeks  
**Schedule:** 2 hours per week  
**Counselor:** Himant Ellis

# Centennial Correctional Facility

## Facility and Program Summary

### Facility Facts

Warden: Travis Trani

Opened: 1980

Beds: 604

Level: Multi/AdSeg

### Program Information

Treatment Capacity: 48

Licensed Treatment Levels: 2, 3, 4a, 4b, DUI

### Number of Certified Addiction Counselors (CAC)

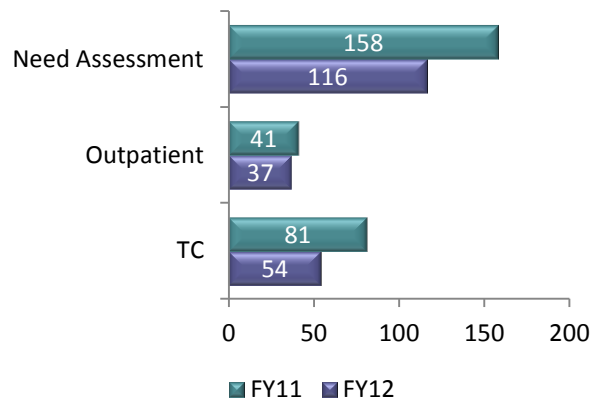
None: 1

CAC I: 0

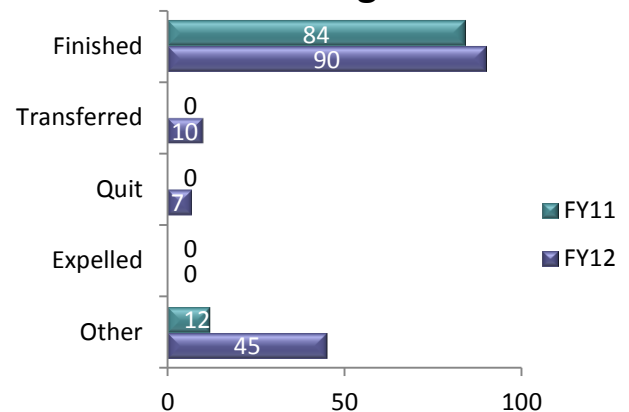
CAC II: .5

CAC III: 0

### Offenders Awaiting A & D Services



### Outpatient Treatment Discharges



## Program Schedule

### Alcohol and Drug Education

**Level:** 2: Drug and Alcohol Education and Increased Urinalyses

**Duration:** 60 weeks; also ongoing individual counseling (Cynthia Schauer)

**Schedule:** 8 hours per week; varies

**Counselors:** Cynthia Schauer and Robert Mack

### Elective and Voluntary Programs

AA

# Cheyenne Mountain Re-Entry Center (Private)

## Facility and Program Summary

### Facility Facts

Warden: Ron Murray      Opened: 2005      Beds: 776      Level: Medium

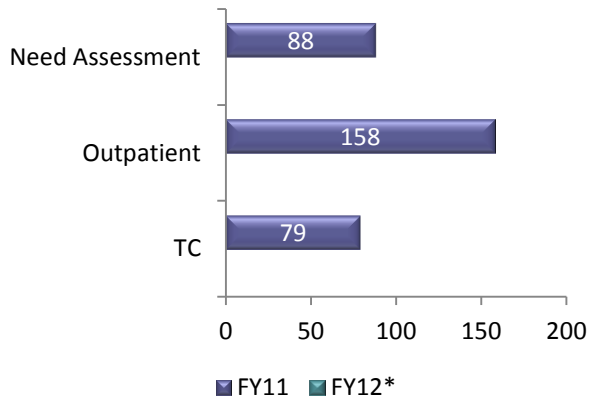
### Program Information

Treatment Capacity: N/A      Licensed Treatment Levels: 2, 3, 4a, 4b

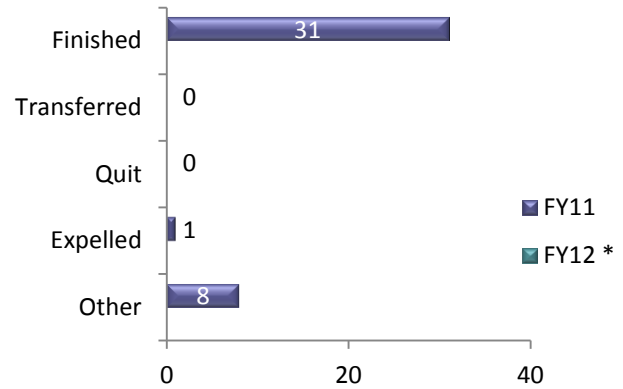
### Number of Certified Addiction Counselors (CAC)

None: 0      CAC I: 0      CAC II: 0      CAC III: 0

### Offenders Awaiting A & D Services



### Outpatient Treatment Discharges



### Program Schedule

\*During FY12 there were no drug and alcohol programs offered at this facility.

### Elective and Voluntary Programs

AA and NA

# Colorado Correctional Center<sup>2</sup>

## Facility and Program Summary

### Facility Facts

Warden: Dona Zavislan      Opened: 1969      Beds: 150      Level: Minimum

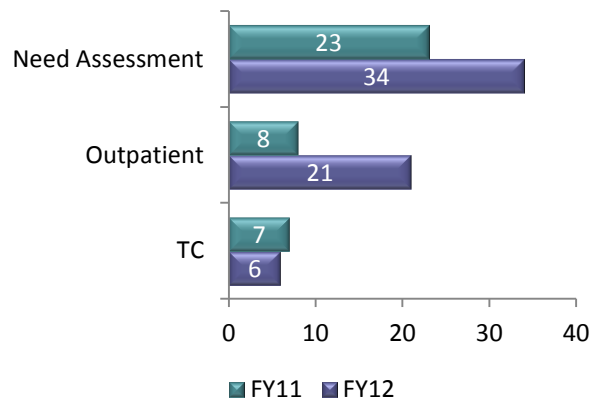
### Program Information

Treatment Capacity: N/A      Licensed Treatment Levels: N/A

### Number of Certified Addiction Counselors (CAC)

None: 0      CAC I: 0      CAC II: 0      CAC III: 0

### Offenders Awaiting A & D Services



### Treatment Discharges

*There are no counselors assigned to this facility.*

### Program Schedule

There are no alcohol and drug programs offered at this facility in FY11 or FY12.

### Elective and Voluntary Programs

AA

<sup>2</sup> Also known as "Camp George West."

# Colorado State Penitentiary

## Facility and Program Summary

### Facility Facts

Warden: Travis Trani

Opened: 1993

Beds: 756

Level: Multi/AdSeg

### Program Information

Treatment Capacity: 48

Licensed Treatment Levels: 2, 3, 4a, 4b, DUI

### Number of Certified Addiction Counselors (CAC)

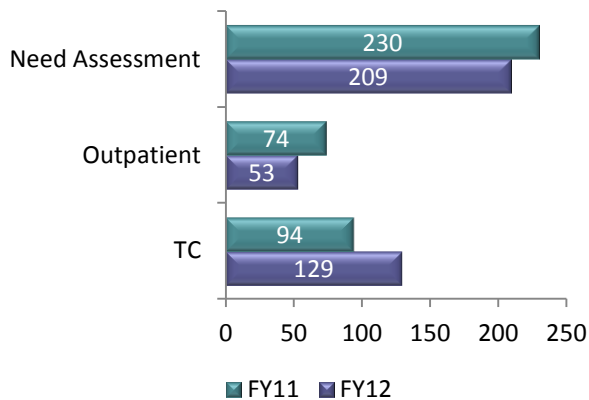
None: 1

CAC I: 0

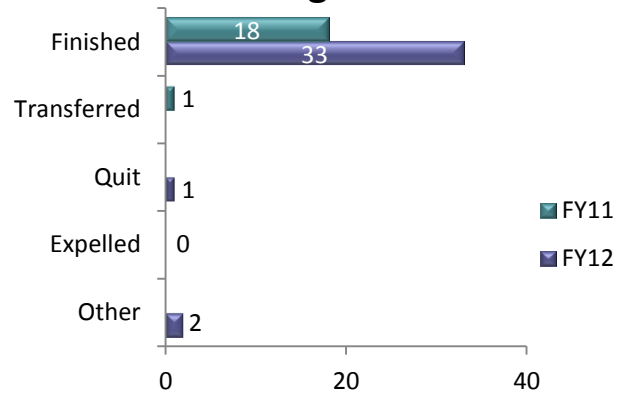
CAC II: .5

CAC III: 0

### Offenders Awaiting A & D Services



### Outpatient Treatment Discharges



## Program Schedule

### Alcohol and Drug Education

**Level:** 2: Drug and Alcohol Education and Increased Urinalyses

**Duration:** Ongoing individual counseling

**Schedule:** Varies

**Counselor:** Cynthia Schauer and Robert Mack

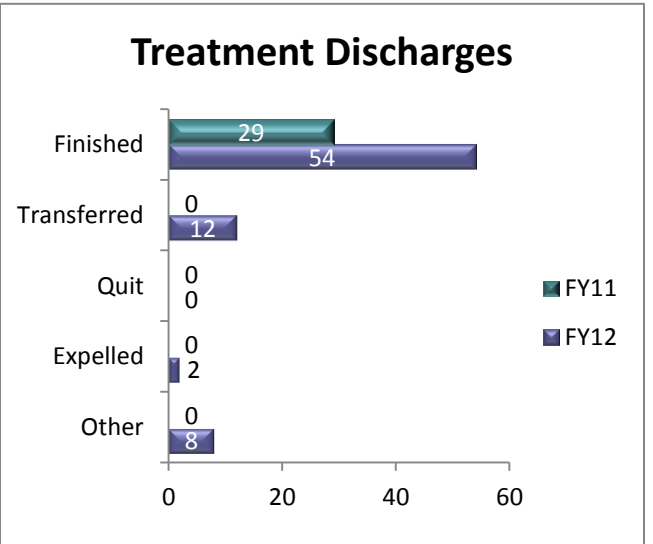
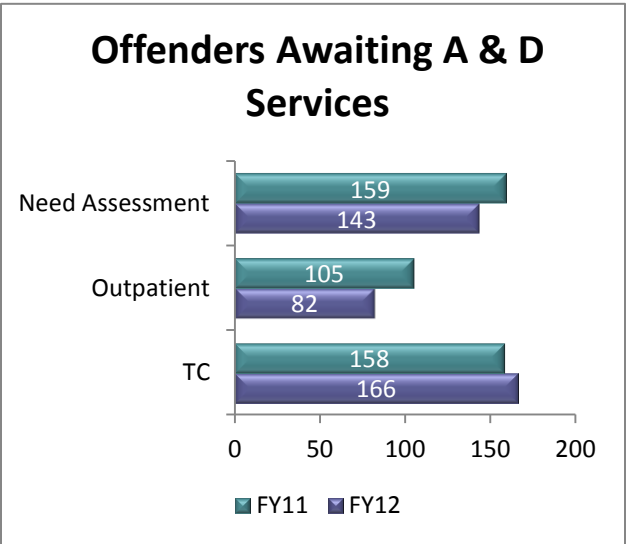
### Elective and Voluntary Programs

AA

# Colorado Territorial Correctional Facility

## Facility and Program Summary

Facility Facts			
Warden: Rae Timme	Opened: 1871	Beds: 925	Level: Medium
Program Information			
Treatment Capacity: 84		Licensed Treatment Levels: 2, 3, 4a, 4b, DUI	
Number of Certified Addiction Counselors (CAC)			
None: 0	CAC I: 0	CAC II: 1	CAC III: 0



## Program Schedule

### SSC Phase I

<b>Level:</b>	4b: Intensive Outpatient
<b>Duration:</b>	12 weeks
<b>Schedule:</b>	9 hours per week
<b>Counselor:</b>	James DeWolfe

### SSC Phase II

<b>Level:</b>	4b: Intensive Outpatient
<b>Duration:</b>	9 weeks
<b>Schedule:</b>	9 hours per week per group
<b>Counselor:</b>	James DeWolfe

### Elective and Voluntary Programs

AA and HIV 101 Workshop



# Crowley County Correctional Facility (Private)

## Facility and Program Summary

### Facility Facts

Warden: Michael Miller      Opened: 1998      Beds: 1,720      Level: Medium

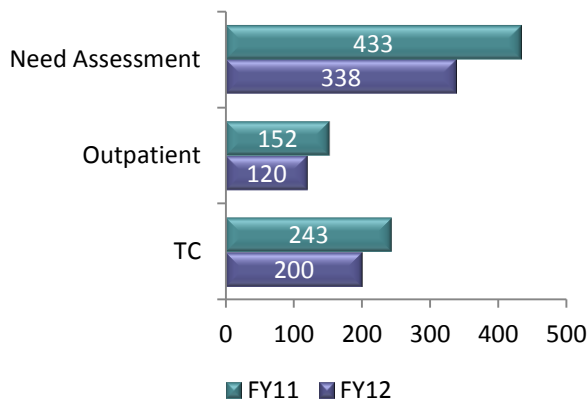
### Program Information

Treatment Capacity: 168      Licensed Treatment Levels: 2, 3, 4a, 4b

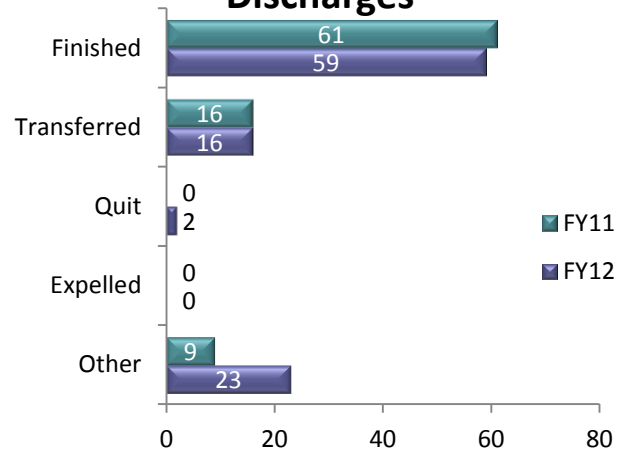
### Number of Certified Addiction Counselors (CAC)

None: 0      CAC I: 0      CAC II: 1      CAC III: 2

### Offenders Awaiting A & D Services



### Outpatient Treatment Discharges



## Program Schedule

### SSC Phase I

**Level:** 4a: Intensive Outpatient  
**Duration:** 13 weeks  
**Schedule:** 9 hours per week  
**Counselor:** Alice Montoya, Matthew Valdez, and Wanona Wiker

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**Level:** 4b: Enhanced Outpatient  
**Duration:** 13 weeks  
**Schedule:** 8 hours per week  
**Counselor:** Alice Montoya, Matthew Valdez, and Wanona Wiker

**SSC Phase II**

**Level:** 4b: Intensive Outpatient

**Duration:** 20 weeks

**Schedule:** 2 hours per week

**Counselors:** Alice Montoya, Matthew Valdez, and Wanona Wiker

**Relapse Prevention**

**Level:** 3: Weekly Outpatient

**Duration:** 12 weeks

**Schedule:** 1.5 hours per week per group (AM and PM)

**Counselors:** Alice Montoya, Matthew Valdez, and Wanona Wiker

**Level:** 4a: Enhanced Outpatient

**Duration:** 12 weeks

**Schedule:** 6 hours per week

**Counselors:** Alice Montoya, Matthew Valdez, and Wanona Wiker

**Elective and Voluntary Programs<sup>3</sup>**

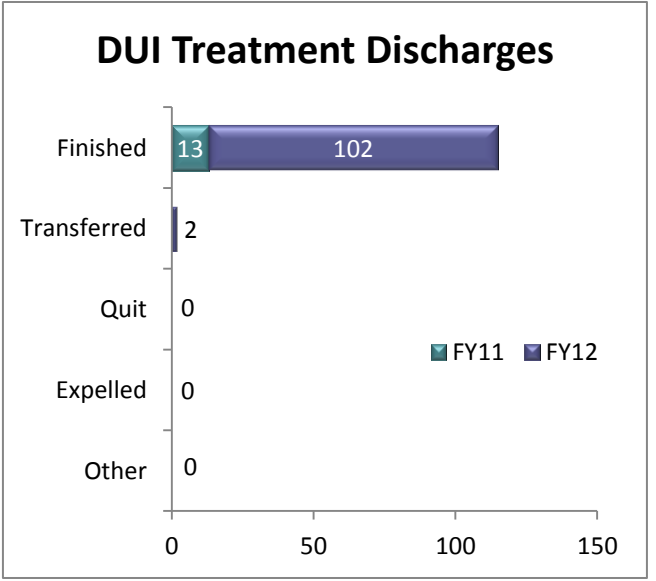
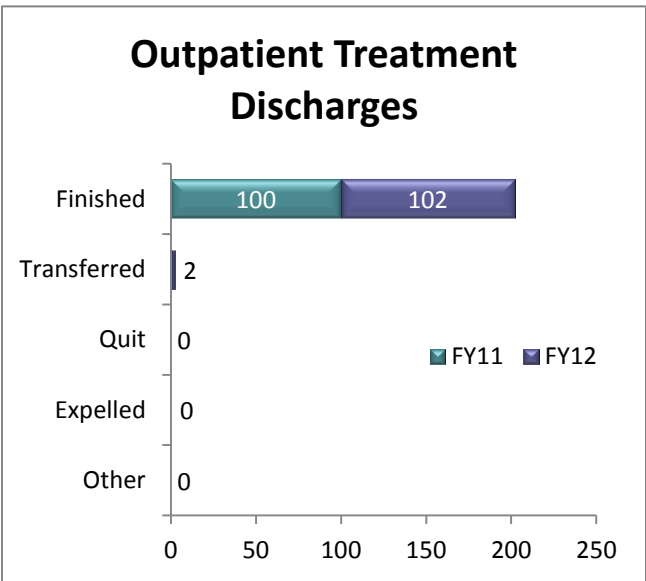
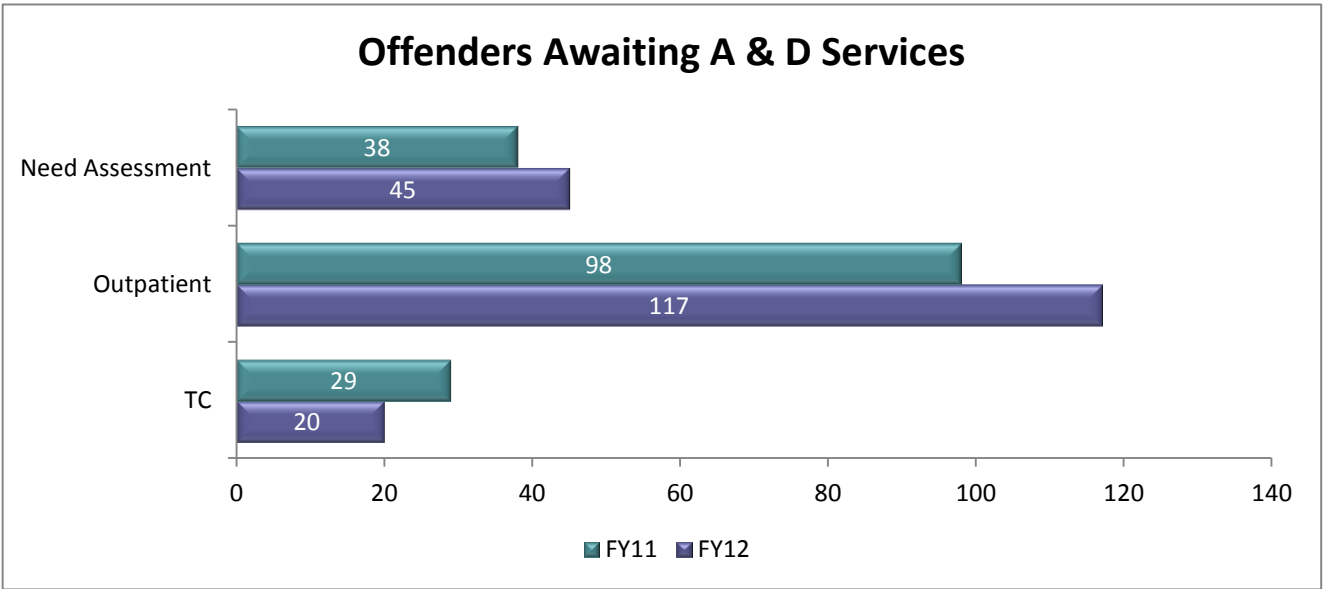
AA, NA, Challenge to Change I and II, and White Bison

<sup>3</sup> Several programs are offered in Spanish.

# Delta Correctional Center

## Facility and Program Summary

Facility Facts			
Warden: Steven Green	Opened: 1964	Beds: 484	Level: Minimum
Program Information			
Treatment Capacity: 288		Licensed Treatment Levels: 2, 3, 4a, 4b, DUI	
Number of Certified Addiction Counselors (CAC)			
None: 0	CAC I: 0	CAC II: 0	CAC III: 1



**Program Schedule**

**SSC Phase I**

**Level:** 4b/paid: Intensive Outpatient

**Duration:** 4 weeks

**Schedule:** 21 hours per week

**Counselor:** Glenda Major

**SSC Phase II**

**Level:** 4b/paid: Intensive Outpatient

**Duration:** 4 weeks

**Schedule:** 21 hours per week

**Counselor:** Glenda Major

**Relapse Prevention**

**Level:** 4a/paid: Enhanced Outpatient

**Duration:** 4 weeks

**Schedule:** 21 hours per week

**Counselor:** Glenda Major

**Elective and Voluntary Programs**

AA and NA

**Driving with Care**

**Level:** DUI Level II Education

**Duration:** 12 weeks

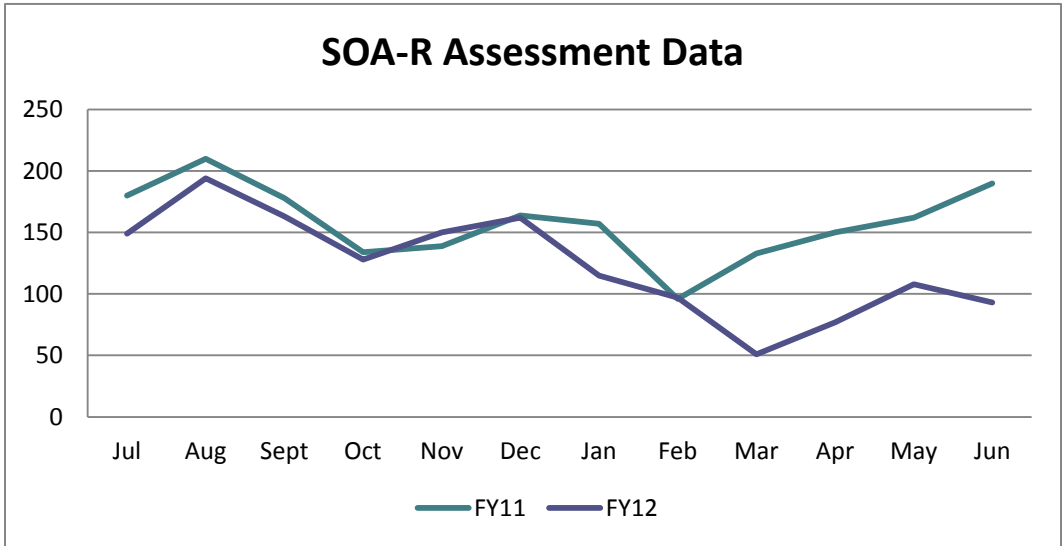
**Schedule:** 2 hours per week

**Counselor:** Glenda Major

# Denver Reception and Diagnostic Center

## Facility and Program Summary

Facility Facts			
Warden: Dona Zavislan	Opened: 1991	Beds: 542	Level: Multi/AdSeg
Program Information			
Treatment Capacity: N/A		Licensed Treatment Levels: N/A	
Number of Certified Addiction Counselors (CAC)			
None: 1	CAC I: 0	CAC II: 1	CAC III: 1



### Program Schedule

The purpose of this Substance Abuse Assessment Program is to conduct standardized offender assessments with incoming CDOC offenders at the DRDC diagnostic intake. The assessment team augments diagnostic programmers' assessments by completing the ASUS-R and the TxRW.

#### Assessment Specialists

Danita St. Vrain and Marguerite Taylor

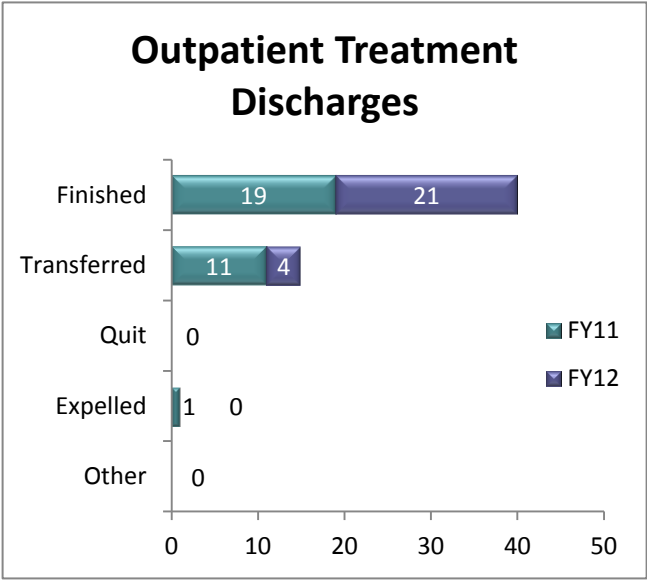
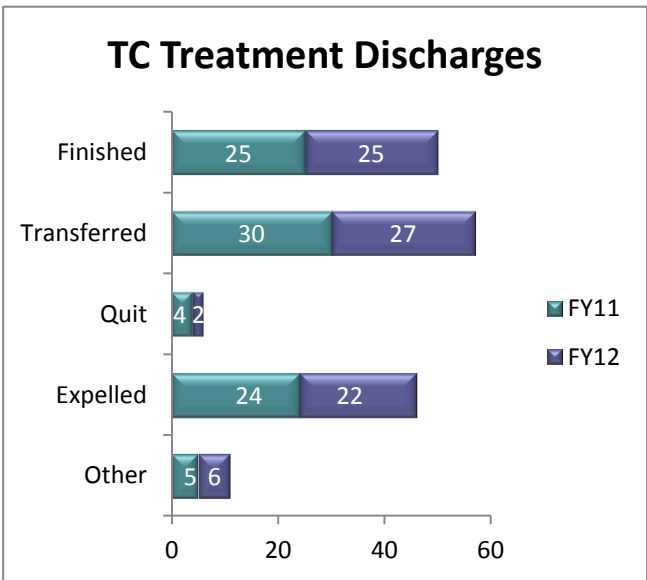
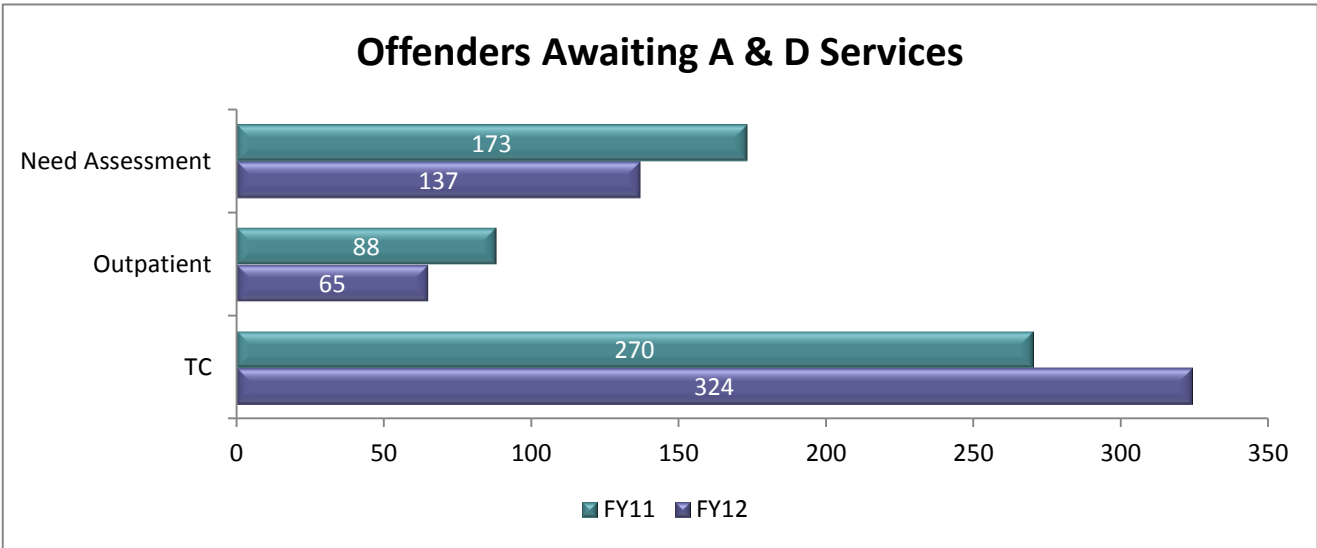
#### Elective and Voluntary Programs

In FY11, AA was offered at this facility. In FY12, there were no elective and voluntary programs offered at this facility.

# Denver Women's Correctional Facility

## Facility and Program Summary

Facility Facts			
Warden: Dona Zavislan	Opened: 1998	Beds: 976	Level: Multi/AdSeg
Program Information			
Treatment Capacity: 113		Licensed Treatment Levels: 2, 3, 4a, 4b, 4d, DUI	
Number of Certified Addiction Counselors (CAC)			
None: 1	CAC I: 0	CAC II: 1	CAC III: 2



## Prison-Based Services

### Program Schedule

#### Challenge to Change Therapeutic Community

<b>Level:</b>	4d: Therapeutic Community, ACA accredited since 2009
<b>Duration:</b>	9 - 12 months
<b>Capacity:</b>	65
<b>Schedule:</b>	Orientation: Participants attend 8 hours of group per day. Phases I, II, & III: Participants work 20 hours per week and attend at least 4 hours of group per day.
<b>Supervisor:</b>	Patricia Koren
<b>Counselors:</b>	Regina Davis and Diane Donaldson
<b>Mental Health Clinician:</b>	Candice Bernard

#### Alcohol and Drug Education (Special Needs Unit)

<b>Level:</b>	2: Drug and Alcohol Education and Increased Urinalyses
<b>Duration:</b>	54 - 60 weeks
<b>Schedule:</b>	1 hour per week
<b>Counselor:</b>	Sandra Ewing (volunteer)

#### SSC Phase I

<b>Level:</b>	4b: Intensive Outpatient
<b>Duration:</b>	12 weeks
<b>Schedule:</b>	6 hours per week
<b>Counselor:</b>	Brenda Noble

#### Elective and Voluntary Programs

Alcohol and Drug Education: Special Needs Unit & Special Needs Unit Administrative Segregation, AA, Al-Anon, NA, and Christian 12-Step Ministry

# Fort Lyon Correctional Facility<sup>4</sup>

## Facility and Program Summary

### Facility Facts

Warden: None

Opened: 2002

Beds: 500

Level: Medium

### Program Information

Treatment Capacity: N/A

Licensed Treatment Levels: 2, 3, 4a, 4b, DUI

### Number of Certified Addiction Counselors (CAC)

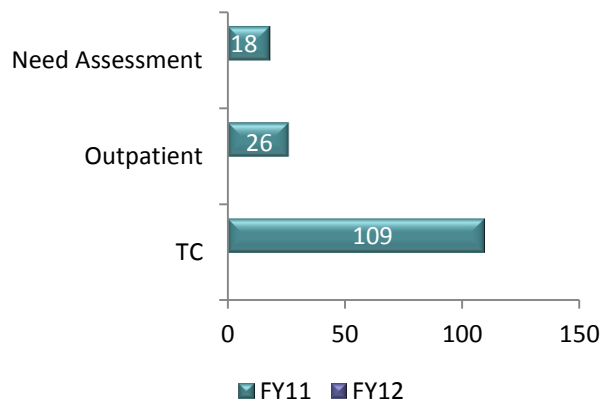
None: 0

CAC I: 0

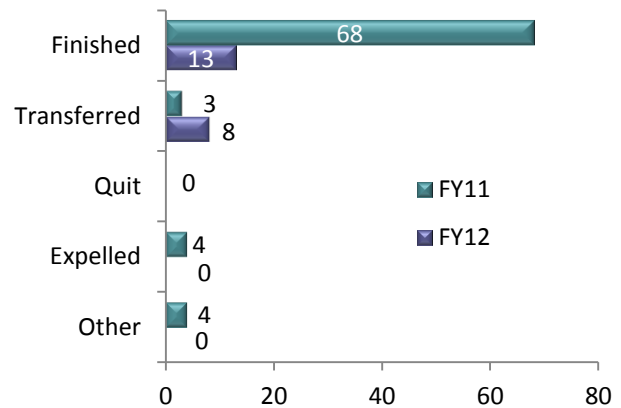
CAC II: 0

CAC III: 0

### Offenders Awaiting A&D Services<sup>4</sup>



### Outpatient Treatment Discharges



### Program Schedule

There are no alcohol and drug programs offered at this facility  
 Due to facility closure, all counselors were transferred to AVCF.

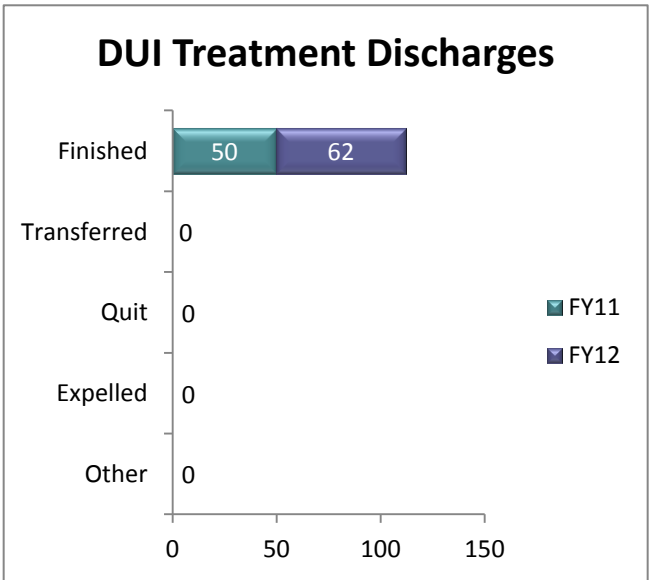
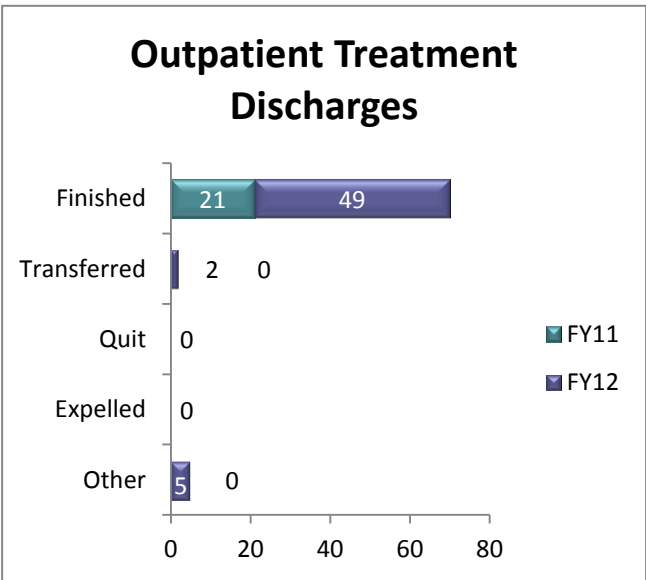
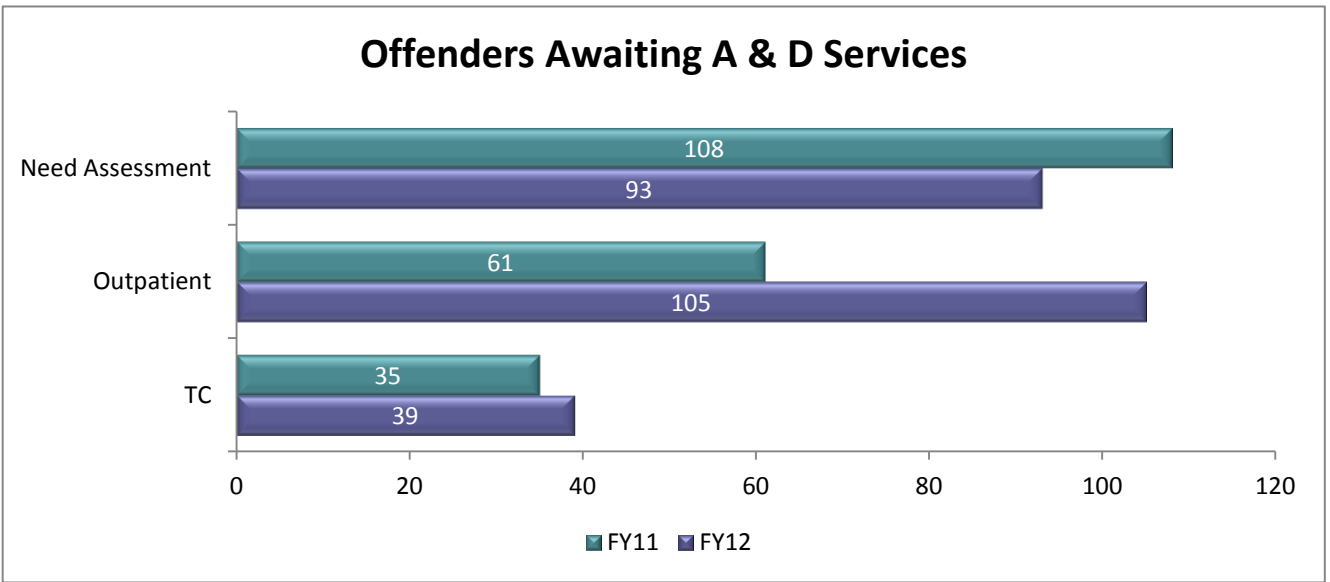
<sup>4</sup> This facility closed in 2012. There are no offenders awaiting services in 2012.



# Four Mile Correctional Center

## Facility and Program Summary

Facility Facts			
Warden: Pam Ploughe	Opened: 1983	Beds: 525	Level: Minimum-R
Program Information			
Treatment Capacity: 84		Licensed Treatment Levels: 2, 3, 4a, 4b, DUI	
Number of Certified Addiction Counselors (CAC)			
None: 0	CAC I: 0	CAC II: 0	CAC III: 1



**Program Schedule**

**SSC Phase I**

**Level:** 4a: Intensive Outpatient (alternates with 10-week 4a)

**Duration:** 10 weeks

**Schedule:** 6 hours per week

**Counselor:** Howard Stumpf

**Elective and Voluntary Programs**

AA

**Driving with Care**

**Level:** DUI Level II Education

**Duration:** 12 weeks

**Schedule:** 2 hours per week per group (2 groups)

**Counselor:** Howard Stumpf

# Fremont Correctional Facility

## Facility and Program Summary

### Facility Facts

Warden: Angel Medina      Opened: 1962      Beds: 1,661      Level: Medium

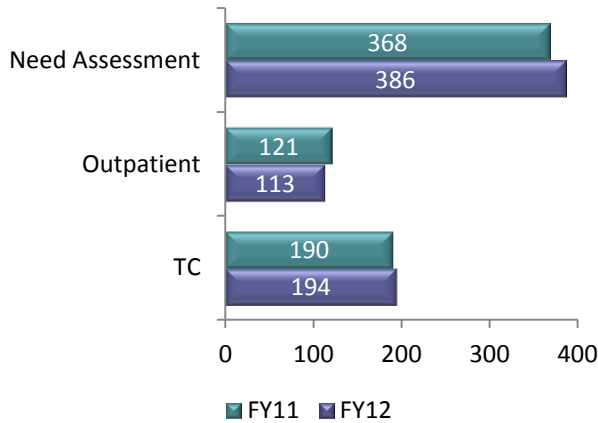
### Program Information

Treatment Capacity: 96      Licensed Treatment Levels: 2, 3, 4a, 4b, DUI

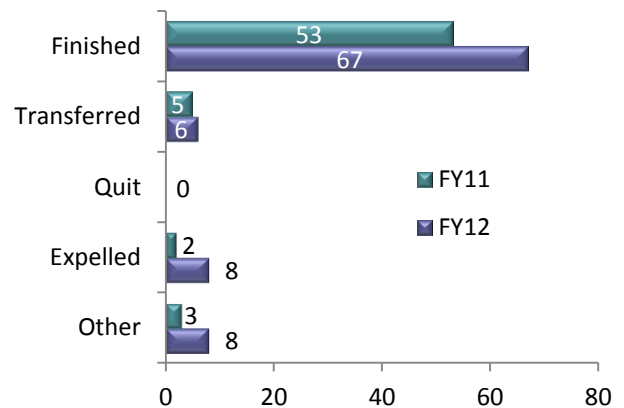
### Number of Certified Addiction Counselors (CAC)

None: 0      CAC I: 0      CAC II: 0      CAC III: 1

### Offenders Awaiting A & D Services



### Outpatient Treatment Discharges



## Program Schedule

### SSC Phase I

**Level:** 4b/paid: Intensive Outpatient  
**Duration:** 8 weeks  
**Schedule:** 10 hours per week per group (AM and PM)  
**Counselor:** Rick Arthurs

### Elective and Voluntary Programs

AA and Relapse Prevention

# Kit Carson Correctional Facility (Private)

## Facility and Program Summary

### Facility Facts

Warden: Vance Everett      Opened: 1998      Beds: 1,562      Level: Medium

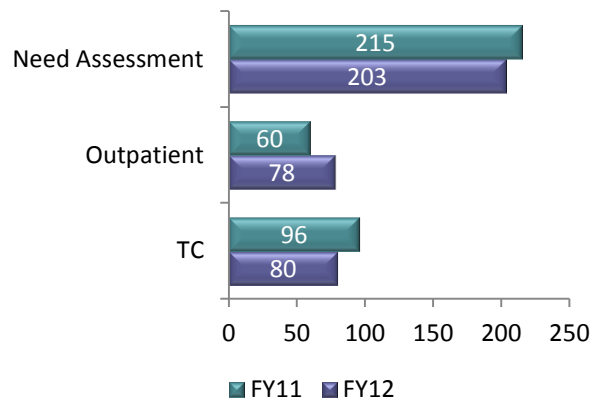
### Program Information

Treatment Capacity: 120      Licensed Treatment Levels: 2, 3, 4a, 4b

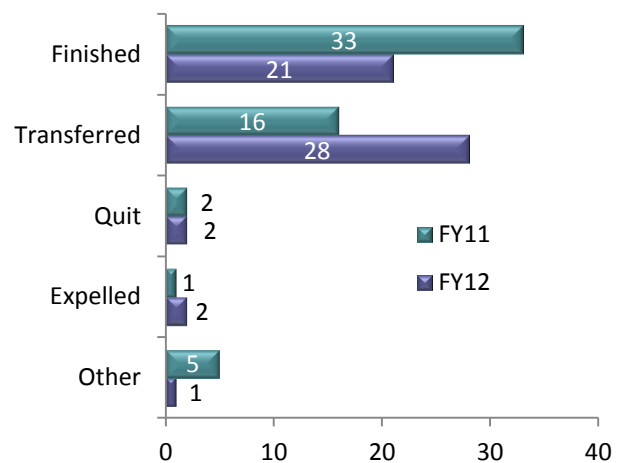
### Number of Certified Addiction Counselors (CAC)

None: 0      CAC I: 0      CAC II: 0      CAC III: 1

### Offenders Awaiting A & D Services



### Treatment Discharges



## Program Schedule

### SSC Phase I

**Level:** 4b: Intensive Outpatient  
**Duration:** 6 weeks  
**Schedule:** 8 hours per week  
**Counselor:** LuAnn Morton-Earl

### SSC Phase II

**Level:** 4b: Intensive Outpatient  
**Duration:** 6 weeks  
**Schedule:** 6 hours per week  
**Counselor:** LuAnn Morton-Earl

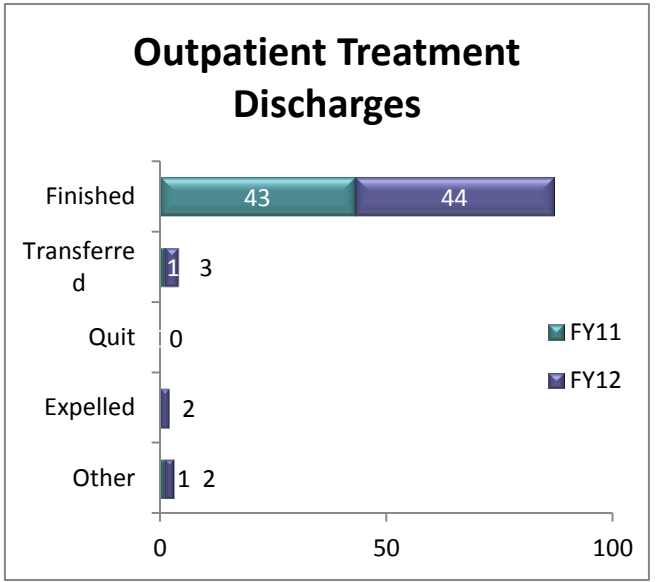
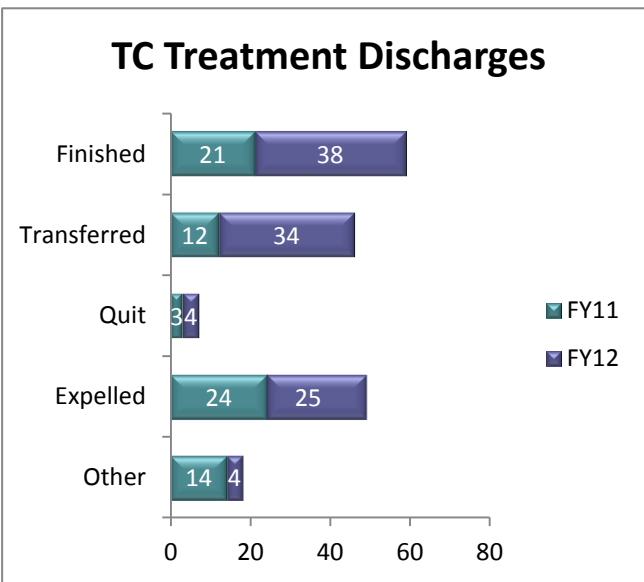
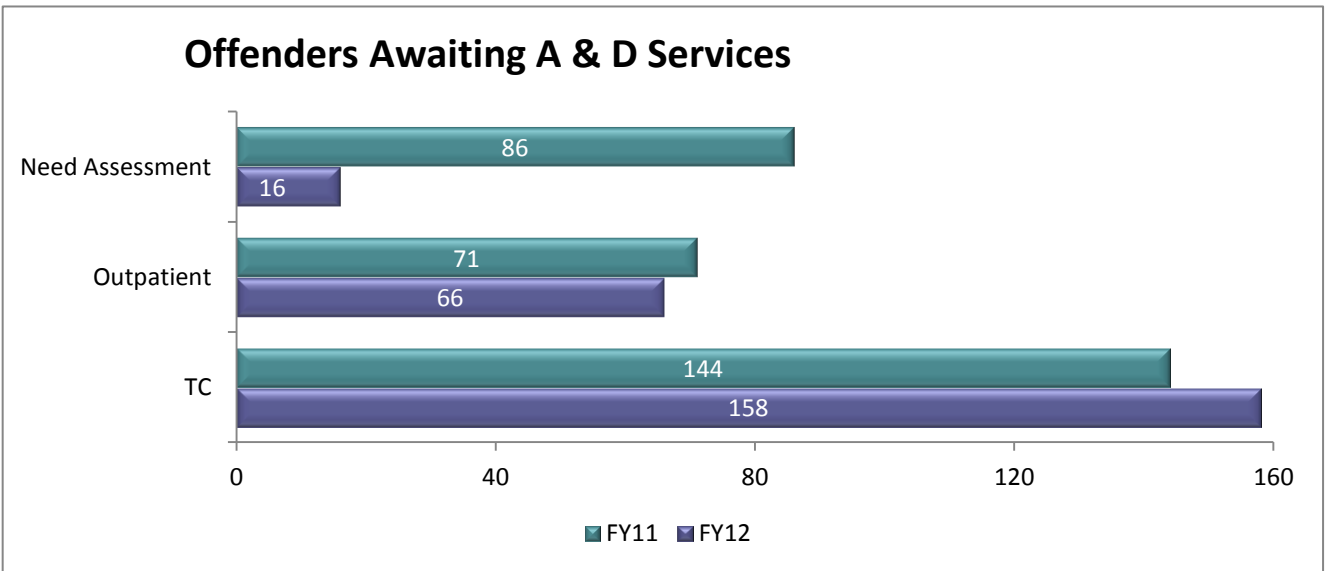
### Elective and Voluntary Programs

AA

# La Vista Correctional Facility

## Facility and Program Summary

Facility Facts			
Warden: David Zupan	Opened: 1994	Beds: 589	Level: Medium
Program Information			
Treatment Capacity: 236		Licensed Treatment Levels: 2, 3, 4a, 4b, 4d, DUI	
Number of Certified Addiction Counselors (CAC)			
None: 1	CAC I: 1	CAC II: 1	CAC III: 5



**Program Schedule**

**Breaking the Chains of Our Past Therapeutic Community**

<b>Level:</b>	4d: Therapeutic Community, ACA accredited since July 23, 2012
<b>Duration:</b>	9 - 18 months
<b>Capacity:</b>	68
<b>Schedule:</b>	Participants attend groups about 10 hours per day, approximately 5 days per week. Participants attend groups for 4 hours per day on Saturday and Sunday. Groups can be led by staff or peers.
<b>Supervisor:</b>	William Mead
<b>Counselors:</b>	Michelle Madrid, Andrea Hernandez, Peggy Gallegos, Michael Valdez, and Arnold Harris

**SSC Phase I**

<b>Level:</b>	4b: Enhanced Outpatient
<b>Duration:</b>	4 weeks
<b>Schedule:</b>	22 hours per week
<b>Counselor:</b>	Norma Warner

**SSC Phase II**

<b>Level:</b>	4b: Enhanced Outpatient
<b>Duration:</b>	4 weeks
<b>Schedule:</b>	12 hours per week
<b>Counselor:</b>	Linda Thrall

**Elective and Voluntary Programs**

AA and NA

# Limon Correctional Facility

## Facility and Program Summary

### Facility Facts

Warden: Frances Falk      Opened: 1991      Beds: 953      Level: Close

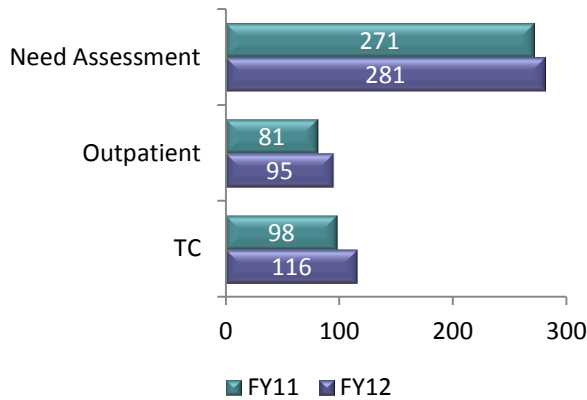
### Program Information

Treatment Capacity: 72      Licensed Treatment Levels: 2, 3, 4a, 4b, DUI

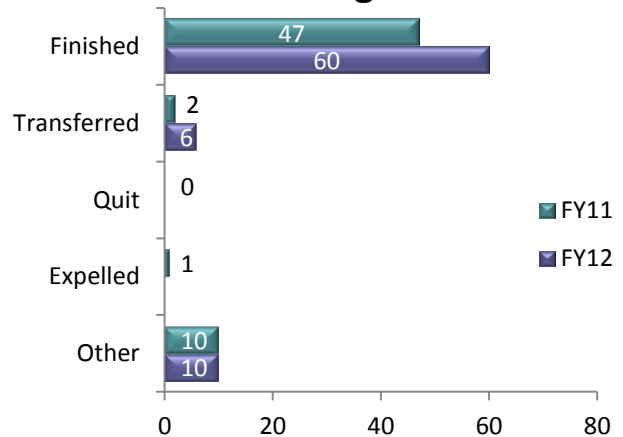
### Number of Certified Addiction Counselors (CAC)

None: 1      CAC I: 0      CAC II: 0      CAC III: 1

### Offenders Awaiting A & D Services



### Outpatient Treatment Discharges



## Program Schedule

### SSC Phase I

**Level:** 4b/paid: Enhanced Outpatient (alternates with 13-week 4a/paid)

**Duration:** 13 weeks

**Schedule:** 8 hours per week

**Counselor:** Wayne Driver and Robert Carter

### SSC Phase II

**Level:** 4b/paid: Enhanced Outpatient (alternates with 10-week 4a/paid)

**Duration:** 10 weeks

**Schedule:** 8 hours per week

**Counselor:** Wayne Driver and Robert Carter

### Elective and Voluntary Programs

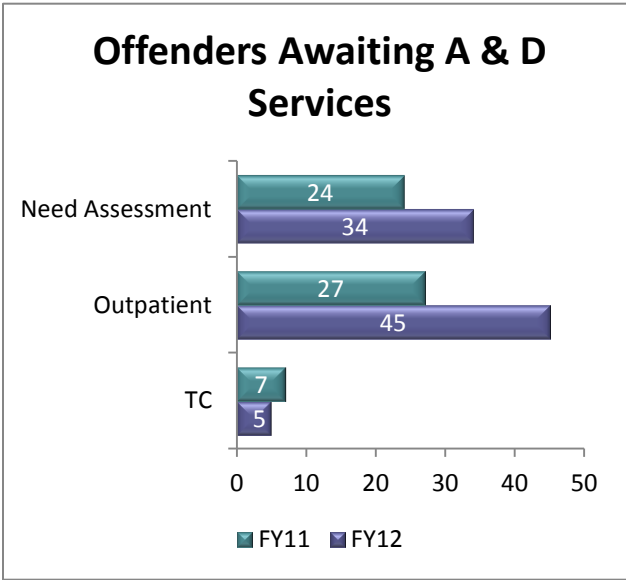
AA

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# Rifle Correctional Center

## Facility and Program Summary

Facility Facts			
Warden: Steven Green	Opened: 1979	Beds: 192	Level: Minimum
Program Information			
Treatment Capacity: N/A		Licensed Treatment Levels: N/A	
Number of Certified Addiction Counselors (CAC)			
None: 0	CAC I: 0	CAC II: 0	CAC III: 0



### Treatment Discharges

*There are no counselors assigned to this facility.*

### Program Schedule

There are no alcohol and drug programs offered at this facility.

### Elective and Voluntary Programs

AA



# San Carlos Correctional Facility

## Facility and Program Summary

### Facility Facts

Warden: David Zupan      Opened: 1995      Beds: 255      Level: Multi/AdSeg

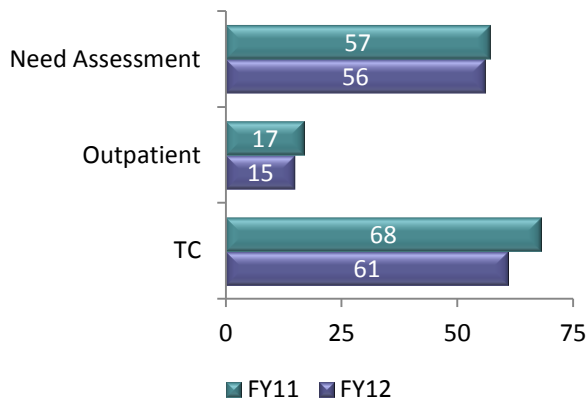
### Program Information

Treatment Capacity: 35      Licensed Treatment Levels: 2, 3, 4a, 4b, 4d, DUI

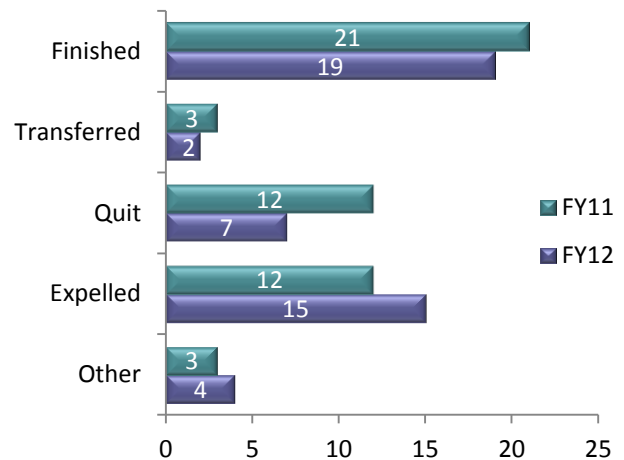
### Number of Certified Addiction Counselors (CAC)

None: 1      CAC I: 0      CAC II: 2      CAC III: 2

### Offenders Awaiting A & D Services



### TC Treatment Discharges



## Program Schedule

### Personal Reflections Therapeutic Community

**Level:** 4d: Therapeutic Community, ACA accredited since 2009

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**Duration:** 9 - 18 months

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**Capacity:** 35

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**Schedule:** Participants attend groups from 7:00 AM - 6:00 PM, except when working. Participants work 3.5 hours per day, 5 days per week.

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**Supervisor:** William E. Mead

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**Counselors:** Art Ducharme, John Dilorio, Virginia Mollica, and Heather Maestas

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**Independence House Transition:** Once every 3 months at SCCF

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**Independence House Director:** Jenny Remack

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**Independence House Staff:** Laurie Lucero

### Elective and Voluntary Programs

AA and NA  
60

# Skyline Correctional Center

## Facility and Program Summary

### Facility Facts

Warden: Pam Ploughe      Opened: 1964      Beds: 249      Level: Minimum

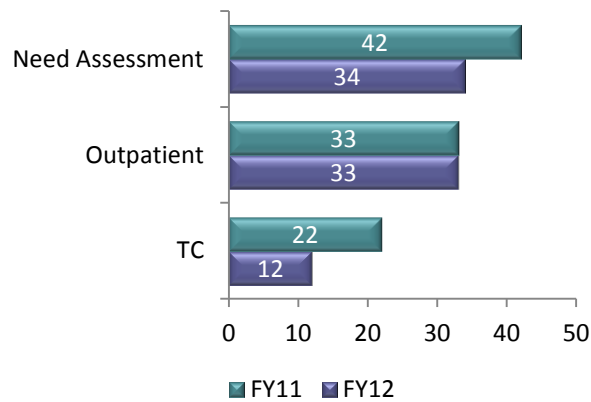
### Program Information

Treatment Capacity: N/A      Licensed Treatment Levels: N/A

### Number of Certified Addiction Counselors (CAC)

None: 0      CAC I: 0      CAC II: 0      CAC III: 0

### Offenders Awaiting A & D Services



### Treatment Discharges

*There are no counselors assigned to this facility.*

### Program Schedule

There are no alcohol and drug programs offered at this facility

### Elective and Voluntary Programs

AA

# Sterling Correctional Facility

## Facility and Program Summary

### Facility Facts

Warden: James Falk      Opened: 1998      Beds: 2,485      Level: Multi/AdSeg

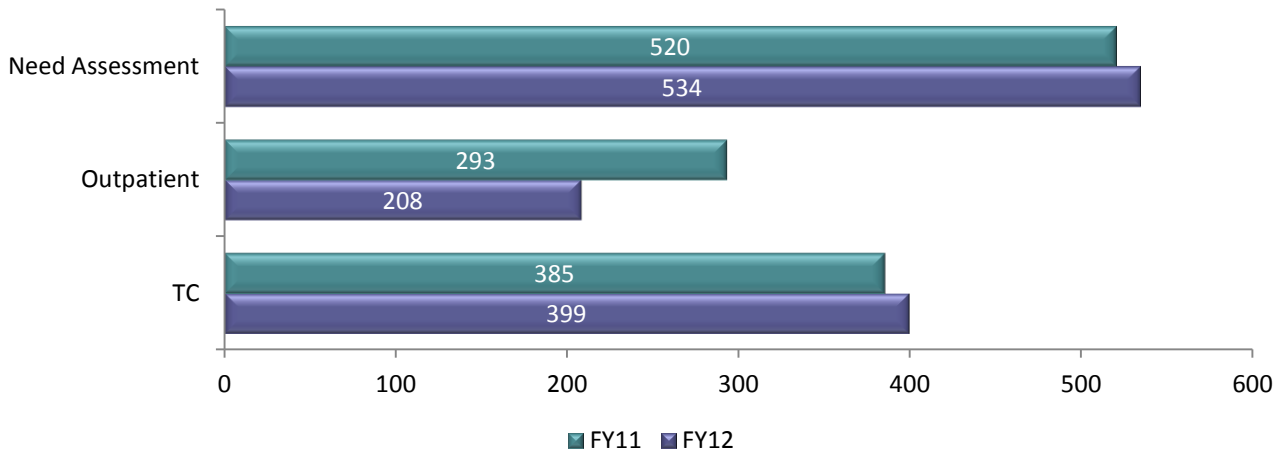
### Program Information

Treatment Capacity: 336      Licensed Treatment Levels: 2, 3, 4a, 4b, 4d, DUI

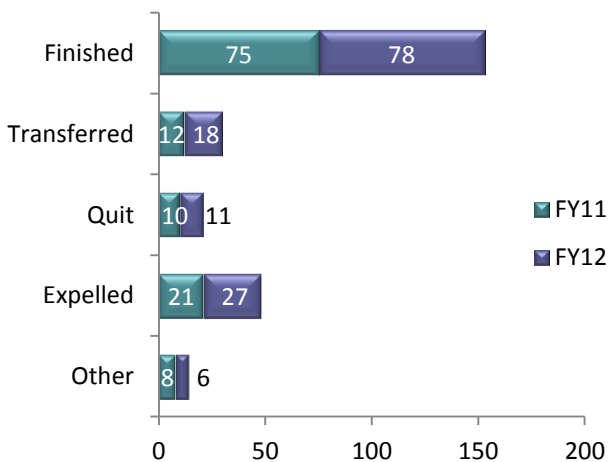
### Number of Certified Addiction Counselors (CAC)

None: 2      CAC I: 0      CAC II: 1      CAC III: 4

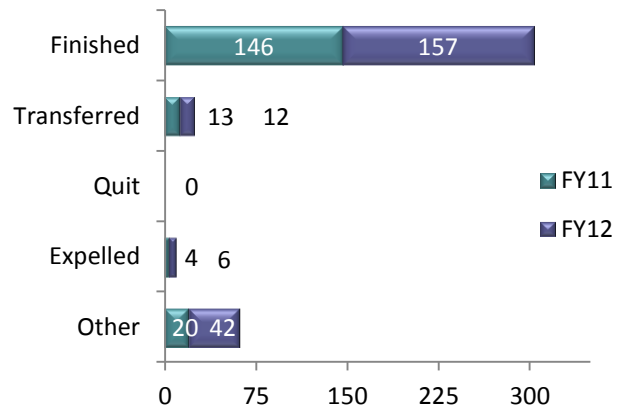
## Offenders Awaiting A & D Services



## TC Treatment Discharges



## Outpatient Treatment Discharges



**Program Schedule**

**O.U.R. House Therapeutic Community**

<b>Level:</b>	4d: Therapeutic Community, ACA accredited since 2007
<b>Duration:</b>	9-12 months
<b>Capacity:</b>	96
<b>Schedule:</b>	Participants work or attend GED classes 4 hours in the morning and spend the remainder of the day attending at least 3 hours of group.
<b>Supervisor:</b>	Dave Booth
<b>Counselors:</b>	Janet Kipp, Elizabeth Pelner-Ehrmann, BreAnn Steele, and Timmarie Ballard
<b>Mental Health Clinician:</b>	Breton Willson

**SSC Phase I**

<b>Level:</b>	4a/paid: Enhanced Outpatient
<b>Duration:</b>	9 weeks
<b>Schedule:</b>	8 hours per week
<b>Counselor:</b>	Mindy Estrada
<b>Level:</b>	4a/paid: Enhanced Outpatient
<b>Duration:</b>	9 weeks
<b>Schedule:</b>	8 hours per week
<b>Counselor:</b>	Mindy Estrada
<b>Level:</b>	4b/paid: Intensive Outpatient
<b>Duration:</b>	12 weeks
<b>Schedule:</b>	8 hours per week
<b>Counselor:</b>	Mindy Estrada
<b>Level:</b>	4b/paid: Intensive Outpatient
<b>Duration:</b>	12 weeks
<b>Schedule:</b>	8 hours per week
<b>Counselor:</b>	Mindy Estrada
<b>Level:</b>	4b/paid: Enhanced Outpatient
<b>Duration:</b>	9 weeks
<b>Schedule:</b>	8 hours per week
<b>Counselor:</b>	Michael Hotz
<b>Level:</b>	4b/paid: Intensive Outpatient
<b>Duration:</b>	14 weeks
<b>Schedule:</b>	8 hours per week
<b>Counselor:</b>	Michael Hotz

**Elective and Voluntary Programs**

AA, NA, and Relapse Prevention

# Trinidad Correctional Facility

## Facility and Program Summary

### Facility Facts

Warden: David Zupan      Opened: 2001      Beds: 404      Level: Min R

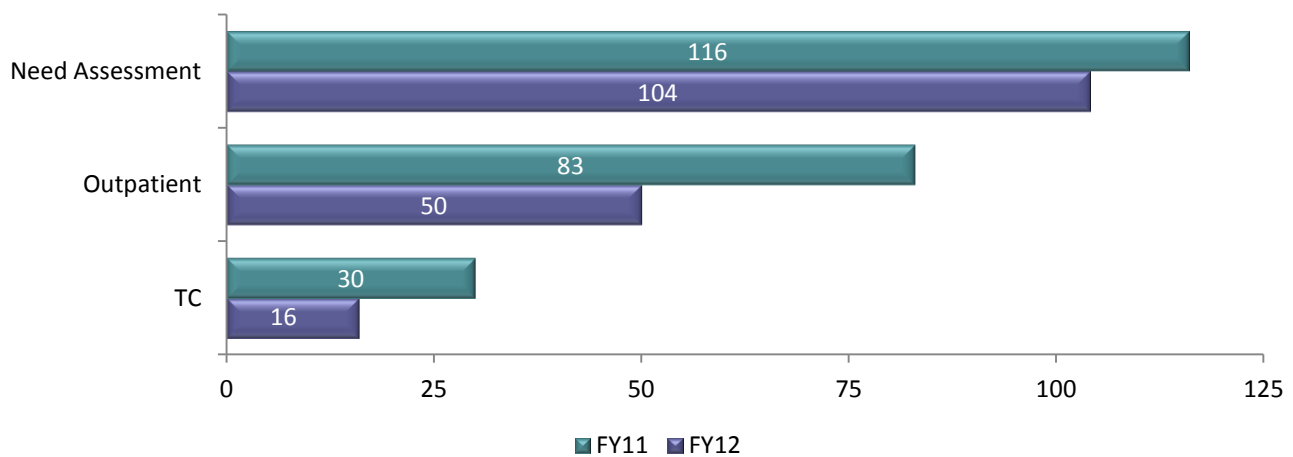
### Program Information

Treatment Capacity: 96      Licensed Treatment Levels: 2, 3, 4a, 4b, DUI

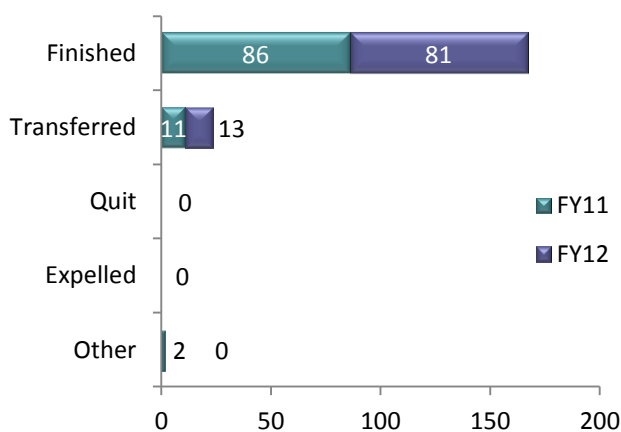
### Number of Certified Addiction Counselors (CAC)

None: 0      CAC I: 0      CAC II: 0      CAC III: 1

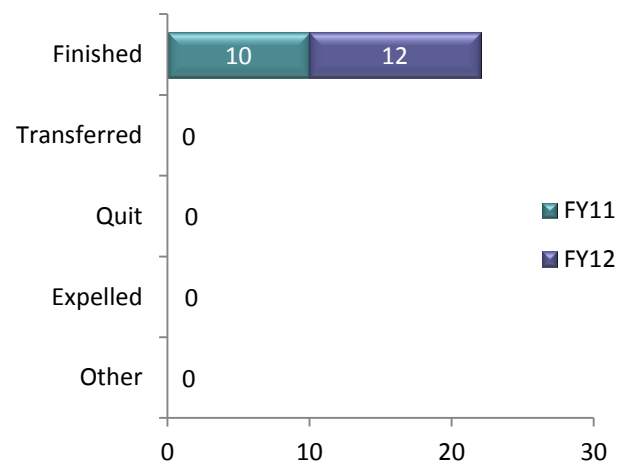
### Offenders Awaiting A & D Services



### Outpatient Treatment Discharges



### DUI Treatment Discharges



**Program Schedule**

**SSC Phase I**

**Level:** 4a: Enhanced Outpatient

**Duration:** 12 weeks

**Schedule:** 7 hours per week

**Counselor:** Anita Archibeque

**Level:** 4b/paid: Intensive Outpatient

**Duration:** 6 weeks

**Schedule:** 21 hour per week

**Counselor:** Anita Archibeque

**Elective and Voluntary Programs**

AA

**Driving with Care**

**Level:** DUI Level II Education

**Duration:** 12 weeks

**Schedule:** 2 hours per week

**Counselor:** Anita Archibeque

**FY11 Facilities by Treatment Level and Curriculum**

	TCF	SCF	SCGF	LVCF	LCF	KCCC	FMCC	FLCF	FCF	DWCF	DCC	CTCF	CSP	CMRC	CCF	CCCF	BVMC	BVCF	BCCF	AVCF	ACC	
2: Educ	E			E			E			E	E		E		E		E					
3: WOP						R										R						
4a: EOP	1	1			1	1 2	1	R			R					1	1		1 2	1		
4b: IOP	1	1		1	1 2	1 2	1	1 2	1	1	1 2	1 2		1		1 2	1	1	1 2	1		
4d: TC		T	T	T						T							T					T

*See individual facility pages for detailed program information.  
The following facilities are not listed because they do not offer groups: CCC, DRDC, RCC, & SCC*

Curriculum	Symbol	Curriculum	Symbol
Alcohol and Drug Education	E	SSC I	1
Relapse Prevention	R	SSC II	2
Therapeutic Community	T		

### FY11 Facilities by Elective and Voluntary Programs

	TCF	SCF	SCCF	SCC	RCC	LVCF	LCF	KCCC	FMCC	FLCF	FCF	DWCF	DRDC	DCC	CTCF	CSP	CMRC	CCF	CCCF	CCC	BVMC	BVCF	BCCF	AVCF	ACC	
AA Sponsorship												X														
Aftercare										X																
Alcohol and Drug Education												X														
Anger Management																									X	
Alcoholics Anonymous	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Celebrate Recovery												X														
Challenge to Change I & II*																			X							
Christian 12-Step Ministry																							X			
HIV 101 Workshop															X											
Narcotics Anonymous		X	X			X		X				X		X			X		X				X	X		
Parenting																									X	
Relapse Prevention*		X				X					X												X			
Victim Impact*																								X		
White Bison						X													X				X			

\*Elective program

Full program descriptions are listed in the Overview of Prison-Based Services section



**FY12 Facilities by Treatment Level and Curriculum**

	TCF	SCF	SCCF	LVCF	LCF	KCCC	FMCC	FCF	DWCF	DCC	CTCF	CSP	CCF	CCCF	BVMC	BVCF	BCCF	AVCF	ACC
2: Educ	E						E		E	E		E	E		E			E	
3: WOP														R				R	
4a: EOP	1	1		1 2			1			R				1 R	1		1 2	2	
4b: IOP	1	1	1 2	1 2	1 2	1 2		1	1	1 2	1 2			1 2	1	1	1	1	
4d: TC		T	T	T					T						T				T

Curriculum	Symbol	Curriculum	Symbol
Alcohol and Drug Education	E	SSC I	1
Relapse Prevention	R	SSC II	2
Therapeutic Community	T		

## FY12 Facilities by Elective and Voluntary Programs

	TCF	SGF	SCGF	SCC	RCC	LVCF	LCF	KCCC	FMCC	FLCF	FCF	DWCF	DRDC	DCC	CTCF	CSP	CMIRC	CCF	CCGF	CCC	BVMC	BVCF	BCCF	AVCF	ACC	
Aftercare*																								X		
Al-Anon												X														
Alcohol and Drug Education												X														
Anger Management																										X
Alcoholics Anonymous	X	X	X	X	X	X	X	X	X	X	X	X		X	X	X	X	X	X	X	X	X	X	X	X	X
Challenge to Change I & II																			X							
Christian 12-Step Ministry												X														
Driving With Care*	X								X					X								X				
HIV 101 Workshop															X											
Narcotics Anonymous		X	X			X						X		X			X		X				X	X		
Parenting																										X
Relapse Prevention		X									X												X			
Victim Impact*																								X		
White Bison																			X							

\*Elective program  
Full program descriptions are listed in the Overview of Prison-Based Services section

***Overview of Community-Based Services***

Through TASC, a case management program within parole, offenders who have paroled and are living in the community are referred to substance abuse treatment. Treatment in the community is delivered by approved treatment providers (ATPs) who have applied to the CDOC to gain approved status; ATP counselors must meet the same background requirements as CDOC prison-based employees.

IRT and TC programs are offered in some community corrections centers. Oversight of these specialized programs is done through the Division of Criminal Justice of the Department of Public Safety and DBH in the Department of Human Services. Available IRT and TC programs in Colorado are listed in this overview. Due to frequently changing ATPs and group schedules, outpatient services are not detailed here.

# TASC

## Agency Facts

Regional Director: Melissa Ippolito	Contracting Agency: Peer Assistance Services, Inc.
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Colorado TASC is a state-wide community-based case management program for parolees. Parolees are referred to TASC for substance abuse assessment, treatment referral, and monitoring services. Identified substance-abusing offenders are referred to ATPs for treatment, and their attendance is monitored by TASC case managers. TASC further monitors parolees’ substance abuse through urinalyses, breathalyzers, and oral swabs. Most of the TASC regions incorporate a Co-Occurring Service (COS) team that works exclusively with offenders who have been dually diagnosed with serious mental illness and chemical addiction. There were 4,938 offenders admitted to TASC during FY11. Of those parolees who went to TASC, 18% were identified as having a serious mental illness (i.e., mental health needs level of 3-5 with a [C]hronic or [O]rganic qualifier). There were 5,638 offenders admitted to TASC during FY12. Of those parolees who went to TASC, 17% were identified as having a serious mental illness (i.e., mental health needs level of 3-5 with a [C]hronic or [O]rganic qualifier). All TASC services are provided through Peer Assistance Services, Inc. Office hours are listed below, but random urinalysis testing may be done 7 days per week.

### Mile High TASC Denver

<b>Phone:</b>	(303) 595-4194
<b>Schedule:</b>	8:00 AM – 12:30 PM and 1:30 PM – 5:30 PM Monday through Friday
<b>Staff:</b>	Anita Hoffman, Program Director Esther Kaiser, Team Lead, Case Manager Matt Bustos, COS Case Manager Thomas Chatfield, COS Case Manager Meredith Donner, Case Manager Melissa Woods, Case Manager Mekka Banks, Intake Coordinator Vacancy: Case Manager Vacant: Colorado TASC Director

### Mile High TASC Englewood

<b>Phone:</b>	(303) 761-7554
<b>Schedule:</b>	8:30 AM – 12:30 PM and 1:30 PM – 5:30 PM Monday through Friday
<b>Staff:</b>	Matthew Plumb, Case Manager Jill Peterson, COS Case Manager Lynn Koenck, Intake Coordinator

## Community-Based Services

### Northeast TASC Westminster

**Phone:** (303) 428-5264

**Schedule:** 8:30 AM – 12:00 PM and 1:00 PM – 5:30 PM Monday through Friday

**Staff:** Anthony Wash, Program Director  
Kevin Beyerlein, Case Manager  
Dorinda Robinson, Case Manager  
Karen Wagner, Case Manager  
Jason Arb, Intake Coordinator  
Vacancy: Case Manager

### Northeast TASC Greeley

**Phone:** (970) 336-9034

**Schedule:** 8:00 AM – 12:00 PM and 1:00 PM – 5:00 PM Monday, Thursday, and Friday  
9:00 AM – 12:00 PM and 1:00 PM – 6:00 PM Tuesday and Wednesday

**Staff:** Chris Kesterson, Program Director  
Christina Ochoa, COS Case Manager  
Langston Jacobs, Case Manager

### Northeast TASC Fort Collins

**Phone:** (970) 530-3009

**Schedule:** 8:00 AM – 12:00 PM and 1:00 PM – 5:00 PM Monday, Tuesday, Thursday, and Friday  
9:00 AM – 12:00 PM and 1:00 PM – 6:00 PM Wednesday

**Staff:** Chris Kesterson, Program Director  
Brian Ferrans, Case Manager  
Makenzie Molitor, Case Manager

### Northeast TASC Longmont

**Phone:** (303) 532-3462

**Schedule:** 8:00 AM – 12:00 PM and 1:00 PM – 5:00 PM Monday through Wednesday, Friday  
9:00 AM – 12:00 PM and 1:00 PM – 6:00 PM Thursday

**Staff:** Chris Kesterson, Program Director  
Megan Bland, Case Manager  
Kevin Hughes, Case Manager

### Southeast TASC Colorado Springs

**Phone:** (719) 444-0882

**Schedule:** 7:30 AM – 12:30 PM and 1:30 PM – 6:30 PM Monday through Friday

**Staff:** Nanette Biggers, Program Director  
Myron Byles, Case Manager  
Dominica Reinhard, Case Manager  
Jason Humphrey, Case Manager  
Jonathan Teisher, Case Manager  
Dustin Robinson, Case Manager  
Lisa Anderson, Intake Coordinator

Scott Nuismer, Intake Coordinator  
Vacancy: Case Manager

### Southeast TASC Pueblo

**Phone:** (719) 543-0690

**Schedule:** 8:00 AM – 1:00 PM and 2:00 PM – 6:00 PM Monday through Friday

**Staff:** Tiffany Esquibel, Case Manager  
Stephen Maes, Case Manager  
Jacob Alfonso, Case Manager  
Richard Gomez, Intake Coordinator

### Western TASC Grand Junction

**Phone:** (970) 242-2800

**Schedule:** 8:00 AM – 1:00 PM and 2:00 PM – 6:00 PM Monday through Friday

**Staff:** Luxie Gannon, Program Director  
David Joslyn, Team Lead, Case Manager  
Justin Arnold, Case Manager  
Bryn Brocklesby, COS Case Manager  
Timothy Rison, Case Manager  
Vacant: Intake Coordinator

### Western TASC Durango

**Phone:** (970) 385-8561

**Schedule:** 8:00 AM – 12:00 PM and 1:00 PM – 5:00 PM Monday through Friday

**Staff:** Mary Blevins, Case Manager  
Travis Furnari, Case Manager

## Level 4C: Intensive Residential Treatment (IRT)

### San Luis Valley

San Luis Valley is a 24-bed program for male offenders. The program is based on the first two phases of the SSC curriculum and other cognitive-behavioral curricula. The goal of this approach is to prevent criminal recidivism and substance abuse relapse within community-based and correctional settings. Clients are provided with knowledge about addictive substances and abuse through journaling and structured exercises. Clients learn techniques to change their irrational beliefs and criminal thinking patterns. Other approaches to treatment are also incorporated, such as 12-step, interpersonal relationships, life skills, and leisure activities.

<b>Provider:</b>	San Luis Valley Community Corrections	(719) 589-7514
<b>Location:</b>	Alamosa	
<b>Schedule:</b>	20 hours of counselor-led therapeutic activities 20 hours of other structured activities	
<b>Duration:</b>	90 days	

### Larimer County Community Corrections

This program provides treatment services to 24 male and female offenders. The program incorporates SSC, Relapse Prevention, and a broad range of cognitive and life skills classes that concentrate on communication, management of emotions, healthy relationships, nutrition, prosocial activities, budgeting/finances, résumé writing, and job searching. Individual counseling is also available for clients with co-occurring mental health disorders. Each offender successfully completing the program transitions to the aftercare program or to another aftercare setting.

<b>Provider:</b>	Larimer County Community Corrections	(970) 498-7554
<b>Location:</b>	Fort Collins	
<b>Schedule:</b>	20 hours of counselor-led therapeutic activities 20 hours of other structured activities	
<b>Duration:</b>	90 days	

### Intervention Community Corrections Services (ICCS)-Weld

ICCS Weld is a 12-bed program for male offenders. The program is based on the SSC curriculum and other cognitive-behavioral curricula. The goal of this approach is to prevent criminal recidivism

and substance abuse relapse within community-based and correctional settings. Clients learn techniques to change their irrational beliefs and criminal thinking patterns. Other approaches to treatment are also incorporated, such as 12-step, interpersonal relationships, life skills, marriage/family counseling, and leisure activities. Clients must have been convicted in or have a parole plan for Weld County.

<b>Provider:</b>	Intervention Community Corrections Services	(970) 584-2526
<b>Location:</b>	Greeley	
<b>Schedule:</b>	20 hours of counselor-led therapeutic activities 20 hours of other structured activities	
<b>Duration:</b>	90 days	

**CMI Fox**

CMI Fox is a 32-bed program for male offenders. The program is based on the SSC curriculum and other cognitive-behavioral curricula. The goal of this approach is to prevent criminal recidivism and substance abuse relapse within community-based and correctional settings. Clients learn techniques to change their irrational beliefs and criminal thinking patterns. Other approaches to treatment are also incorporated, such as 12-step, interpersonal relationships, life skills, and leisure activities. This program does not accept clients with prior arson charges.

<b>Provider:</b>	CMI Fox	(720) 854-0264
<b>Location:</b>	Denver	
<b>Schedule:</b>	20 hours of counselor-led therapeutic activities 20 hours of other structured activities	
<b>Duration:</b>	90 days	

**Mesa County Community Corrections**

Mesa County Community Corrections is a 12-bed program for male offenders. The program is based on the SSC curriculum and other cognitive-behavioral curricula. The goal of this approach is to prevent criminal recidivism and substance abuse relapse within community-based and correctional settings. Clients learn techniques to change their irrational beliefs and criminal thinking patterns. Other approaches to treatment are also incorporated, such as 12-step, interpersonal relationships, life skills, and leisure activities. Clients must arrive with 90 days of medication.

<b>Provider:</b>	Mesa County Community Corrections	(970) 244-3340
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## Community-Based Services

<b>Location:</b>	Grand Junction
<b>Schedule:</b>	20 hours of counselor-led therapeutic activities 20 hours of other structured activities
<b>Duration:</b>	90 days

## Short-Term Intensive Residential Remedial Treatment (STIRRT)

STIRRT is a highly structured and compact drug and alcohol treatment program for offenders at high risk of re-offending. It is a 9-month program that begins with 2 weeks of residential treatment and then 8-9 months of continuing care services. The primary goal of STIRRT is to initiate a change in clients' substance use and criminal involvement. The program aims to temporarily remove clients from society and subsequently return them with the skills to reduce criminal involvement and substance abuse so they avoid further incarceration or jail time. The program has a largely cognitive-behavioral emphasis, utilizing Phase I of the SSC curriculum. The cognitive-behavioral approach is integrated in the educational and employment skills groups. A full schedule of groups is held each day, Sunday through Saturday, for the 2-week program duration.

<b>Provider:</b>	Arapahoe House	(303) 412-3928 (female) (303) 412-3961 (male)
<b>Location:</b>	Commerce City (male) Littleton (female)	
<b>Schedule:</b>	Minimum of 112 therapeutic hours before transition to an outpatient program	
<b>Duration:</b>	14 days	
<b>Provider:</b>	Crossroads' Turning Points, Inc.	(719) 545-1181 (female) (719) 566-0234 (male)
<b>Location:</b>	Pueblo	
<b>Schedule:</b>	Minimum 112 therapeutic hours before transition to an outpatient program	
<b>Duration:</b>	14 days	
<b>Provider:</b>	Larimer County Community Corrections	(970) 498-7530
<b>Location:</b>	Fort Collins	
<b>Schedule:</b>	Minimum 112 therapeutic hours before transition to an outpatient program	
<b>Duration:</b>	14 days	

## Level 4d: Therapeutic Community (TC)

### Independence House Pecos

This program is a community-based TC designed to transition general population male offenders, sex offenders, mentally ill chemical abusing offenders, and male offenders from special populations or programs including the Vocational Heavy Construction Technology Program and those who learn construction trades while in BVCC and SCF. The overall goal of this TC is to assist residents to use their training in the construction field. Residents learn how to maintain a positive lifestyle free of drugs and crime by receiving education about resources available at the community, state, and federal levels. Each resident may earn the privilege of working based on progress in treatment. Graduation is dependent upon progress in treatment.

**Provider:** Independence House, Inc.

**Location:** Denver

**Beds:** 75

**Duration:** 6 - 12 months residential

### Peer I

Residential TC activities are divided among intensive and transitional services for male offenders. Intensive services are aimed at changing attitudes, values, and behaviors as well as increasing motivation, readiness for treatment, and ownership of change. The goal of transitional services is reintegration into the community, with specific emphasis on employment, budgeting, family support groups, and appropriate leisure activities. Clients who transition to non-residential services learn independent living skills while engaging in weekly treatment groups. Graduation depends on progress in treatment. Graduates may remain under Peer I monitoring for the duration of their sentence. In addition, Peer I has a reach-in component that visits CDOC facilities at ACC TC, SCF TC, CMRC, and Buena Vista Correctional Complex on a regular basis.

**Provider:** Addiction Research and Treatment Services (ARTS)

**Location:** Denver

**Beds:** 121<sup>5</sup>

**Duration:** 9 – 12 months residential

<sup>5</sup> Includes probation, diversion, and drug court.

## Community-Based Services

### *Sisterhood Teaching Alternatives for Recovery (STAR) TC*

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This modified TC treats females with complex substance abuse needs. Women with co-occurring substance abuse and mental health needs, as well as women who have level 5 treatment needs, are accepted into the program on an individual basis. The program includes group and individualized treatment, cognitive-behavioral therapy, relapse prevention groups, and gender specific/trauma informed women's treatment services.

**Provider:** Crossroads' Turning Points, Inc.

**Location:** Pueblo

**Beds:** 24

**Duration:** 6 - 9 months residential

### *Therapeutic Community for Southern Colorado*

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This TC is a male-only program that treats offenders from the southern region of Colorado who have demonstrated severe and chronic substance abuse issues. This is a very rigorous and confrontational program that demands a high standard. The participants are held accountable for their thoughts and actions. After completing the residential phase of the program, clients move into a non-residential phase that can last up to 12 months.

**Provider:** Crossroads' Turning Points, Inc.

**Location:** Pueblo

**Beds:** 60

**Duration:** 9 – 12 months residential and 12 months outpatient

### *The Haven Modified TC*

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The Haven is a unique long-term residential substance abuse treatment center for women and their children and has the ability to serve pregnant and postpartum women. The Haven houses 38 women and The Haven Mother's House serves an additional 26 women with their infant children who reside with their mothers in treatment. The Haven serves women with chronic substance abuse disorders. The program offers group treatment, individualized treatment, psychiatric services, cognitive-behavioral therapy, parenting education, infant developmental evaluations and services, on-site childcare, medication monitoring, on-site medical services, supervised children's visitation, exercise and recreational activities, relapse prevention groups, gender specific/trauma informed women's treatment services, transitional housing, and day treatment. Graduation depends on progress in treatment.

<b>Provider:</b>	Addiction Research and Treatment Services (ARTS)
<b>Location:</b>	Denver
<b>Beds:</b>	91 <sup>6</sup>
<b>Duration:</b>	12 – 18 months residential

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<sup>6</sup> Treatment beds are for pregnant mothers and mothers with their infants in residence; pregnant women are prioritized first (includes probation, diversion, drug court, Department of Human Services, and self-referral).

# Residential Dual Diagnosis Treatment Programs

## Residential Dual Diagnosis Treatment (RDDT) Providers and Programs

RDDT serves male and female offenders who are dually diagnosed with substance abuse and serious mental illness. The purpose of RDDT is to provide an intense treatment intervention with continuing care after completion of the residential component. The program is coordinated with local mental health centers to provide a range of services including individual therapy, group therapy, and psychiatric services. The program also uses structured motivational enhancement. Providers use standardized curricula to treat offenders and include psycho-educational, support, and other wrap-around services to support the therapeutic activities.

<b>Provider:</b>	Larimer County Community Corrections	(970) 498-1518
<b>Location:</b>	Fort Collins	
<b>Schedule:</b>	5 hours weekly of direct therapeutic contact 1 hour weekly of individual psychotherapy 3 hours weekly of other treatment activities	
<b>Duration:</b>	Open-Ended – approximately 150 days	
<b>Provider:</b>	COMCOR, Inc.	(719) 473-4460 ext. 50
<b>Location:</b>	Colorado Springs	
<b>Schedule:</b>	5 hours weekly of direct therapeutic contact 1 hour weekly of individual psychotherapy 3 hours weekly of other treatment activities	
<b>Duration:</b>	180 days	
<b>Provider:</b>	Mesa County Community Corrections	(970) 244-3340
<b>Location:</b>	Grand Junction	
<b>Schedule:</b>	5 hours weekly of direct therapeutic contact 1 hour weekly of individual psychotherapy 3 hours weekly of other treatment activities	
<b>Duration:</b>	Open ended – approximately 120 days	
<b>Provider:</b>	Intervention Community Corrections Services	(303) 232-4002 ext. 5529
<b>Location:</b>	Lakewood	
<b>Schedule:</b>	5 hours weekly of direct therapeutic contact 1 hour weekly of individual psychotherapy 3 hours weekly of other treatment activities	
<b>Duration:</b>	Open ended – approximately 120 days	

**Community-Based Services**

<b>Provider:</b>	Independence House Fillmore	(303) 321-1718
<b>Location:</b>	Denver	
<b>Schedule:</b>	5 hours weekly of direct therapeutic contact 1 hour weekly of individual psychotherapy 3 hours weekly of other treatment activities	
<b>Duration:</b>	9 months minimum	
<b>Provider:</b>	The DOOR Program	(303) 232-4002 ext. 5529
<b>Location:</b>	Lakewood	
<b>Schedule:</b>	5 hours weekly of direct therapeutic contact 1 hour weekly of individual psychotherapy 3 hours weekly of other treatment activities	
<b>Duration:</b>	Open ended – approximately 120 days	
<b>Provider:</b>	John Eachon Reentry Program	(303) 232-4002 ext. 5529
<b>Location:</b>	Lakewood	
<b>Schedule:</b>	5 hours weekly of direct therapeutic contact 1 hour weekly of individual psychotherapy 3 hours weekly of other treatment activities	
<b>Duration:</b>	Open ended – approximately 120 days	
<b>Provider:</b>	Arapahoe Community Residential Center	(303) 795-6975 ext. 207
<b>Location:</b>	Littleton	
<b>Schedule:</b>	5 hours weekly of direct therapeutic contact 1 hour weekly of individual psychotherapy 3 hours weekly of other treatment activities	
<b>Duration:</b>	Open ended	

## Denver Homeless Transition Program

The Denver Homeless Transition Program (DHTP) identifies male and female parolees who are 12 months from their mandatory release date and would otherwise be homeless in the City and County of Denver once released. DHTP is a 25-bed program that provides parolees with transitional housing and employment resources.

<b>Provider:</b>	Denver Homeless Transition Program	(303) 763-2489 (720) 913-3665
<b>Location:</b>	Denver	
<b>Schedule:</b>	Placement is 9 months to mandatory release date	
<b>Duration:</b>	6 - 9 months	

**References**

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## Appendix

Acronym	Facility
ACC	Arrowhead Correctional Center
AVCF	Arkansas Valley Correctional Facility
BCCF*	Bent County Correctional Center
BVCF	Buena Vista Correctional Facility
BVMC	Buena Vista Minimum Center
CCC	Colorado Correctional Center (Camp George West)
CCCF*	Crowley County Correctional Facility
CCF	Centennial Correctional Facility
CMRC*	Cheyenne Mountain Re-entry Center
CSP	Colorado State Penitentiary
CTCF	Colorado Territorial Correctional Facility
DCC	Delta Correctional Center
DRDC	Denver Reception and Diagnostic Center
DWCF	Denver Women's Correctional Facility
FCF	Fremont Correctional Facility
FLCF	Fort Lyon Correctional Facility**
FMCC	Four Mile Correctional Center
KCCC*	Kit Carson Correctional Facility
LCF	Limon Correctional Facility
LVCF	La Vista Correctional Facility
RCC	Rifle Correctional Center
SCC	Skyline Correctional Center
SCCF	San Carlos Correctional Facility
SCF	Sterling Correctional Facility
TCF	Trinidad Correctional Facility

\*Indicates a private facility

\*\* Closed in 2012

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