

CHAPTER: 900

Inmate Programs and Services

DEPARTMENT ORDER:

**917 – Substance Use Disorder Treatment
Services**

**OFFICE OF PRIMARY
RESPONSIBILITY:**

**EPCR
HS
OPS**

Department Order Manual



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A handwritten signature in black ink, appearing to read 'Ryan Thornell', written over a horizontal teal line.

Ryan Thornell, Director

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PURPOSE

This Department Order (DO) establishes a series of well-managed, cost effective Substance Use Disorder (SUD) program interventions as part of a continuum for all inmates and offenders whose assessments and histories suggest they have a need for intervention. These services support the Department goal of properly addressing drug and alcohol use with the appropriate services and the philosophy that effective programming promotes rehabilitation, wellness, and good security.

RESPONSIBILITY

The Assistant Director for Education, Programs and Community Reentry, through the Counseling and Treatment Services Administrator, shall administer the Department's institution-based SUD programming, and administer SUD treatment services in the community. The administrators for Counseling and Treatment Services and Community Corrections shall collaborate and cooperate to ensure a continuum of care is equally available to all inmates and offenders on a voluntary basis, without discrimination.

The Assistant Director for Education, Programs and Community Reentry shall provide a report annually to the Director, Deputy Directors, and Chief of Staff outlining all SUD Treatment Services provided for the fiscal year. In addition to any and all reports mandated by statute.

PROCEDURES

1.0 OFFICE OF COUNSELING AND TREATMENT SERVICES – To assure full utilization of existing social service and behavioral health networks, the Department participates on various interagency councils and task forces, seeks collaborative relationships with agencies having similar client bases, and continually seeks external funding in the form of grants or partnerships.

1.1 The Office of Counseling and Treatment Services is responsible for:

- 1.1.1 Administering a SUD Assessment to all new intakes to identify SUD treatment needs.
- 1.1.2 Administering and delivering institution-based SUD treatment programs and/or services.
- 1.1.3 Administering institution-based contracted SUD education, including prevention, treatment, and recovery services.
- 1.1.4 Collaborating with other agencies to access and deliver services.
- 1.1.5 Assisting and supporting the efforts of the Assistant Director for Education, Programs and Community Reentry in obtaining and managing community-based SUD education and treatment for offenders.
- 1.1.6 Assisting and supporting the efforts of the Contract Beds Bureau in oversight of the clinical aspects of SUD treatment delivered at Contract Beds facilities.
- 1.1.7 Establishing a comprehensive data collection process that includes, at a minimum:
 - 1.1.7.1 Individual demographic data
 - 1.1.7.2 Contractor and partner agency identification and information

1.1.7.3 Data related to Department services

1.1.7.3.1 This data shall be used as follows:

1.1.7.3.1.1 For individual outcome and programmatic analysis.

1.1.7.3.1.2 Shared, as appropriate, with related organizations to improve care, services, and continuity post release pursuant to Arizona State law and any applicable policies.

1.1.8 Development and presentation of specialized training for Department staff and others on SUD related topics. This training shall be in addition to, and more specific than, that provided by the Staff Development and Training Bureau.

1.1.9 Administering and supporting the collaborative efforts, including with the Healthcare Services Division (HSD), specific to Medicated Assisted Treatment (MAT).

2.0 CONFIDENTIALITY

2.1 The staff members, contractors, volunteers, Program Associates, and/or inmates responsible for the delivery of Recovery Support Specialist (RSS) led programming, treatment, and aftercare programs shall adhere to confidentiality laws and regulations promulgated in the United States (U.S.) Code of Federal Regulations, 42 C.F.R. § Part 2, Confidentiality of Substance Use Disorder Patient Records and 42 U.S.C. § 290dd-2, Confidentiality of Records.

2.2 Staff members working in areas considered to be qualified service organizations who, in the course of their duties, may have access to information which identifies an inmate as a participant in RSS led programming, treatment, recovery, or aftercare program shall not re-disclose any participant-identifying information. (See the Glossary of Terms for "qualified service organizations")

2.3 Inmates participating in alcohol treatment, recovery, and aftercare programs shall be asked to sign an Informed Consent for Alcohol and/or Drug Treatment, Form 917-1, authorizing:

2.3.1 The documentation of their participation in and completion of the program in the Arizona Correctional Information System (ACIS).

2.3.1.1 Inmates who do not authorize the documentation of their participation shall be removed from the program and replaced by an inmate who has signed or is willing to sign the form.

2.3.1.2 An Informed Consent for Alcohol and/or Drug Treatment form is not required for participation in educational classes only.

2.3.2 Disclosure of confidential program-related information only to the person(s) specifically identified by job title or name on the form. Persons having a legitimate need to access program information may include:

2.3.2.1 Department Administrators

2.3.2.2 Correctional Officers (CO) III or IV

- 2.3.2.3 Community Corrections Officers
 - 2.3.2.4 Arizona Board of Executive Clemency Members
 - 2.3.2.5 Department contracted SUD treatment or recovery providers
 - 2.3.2.6 County Adult Probation Officers (statewide)
- 2.4 At the discretion of the Counseling and Treatment Services Administrator and unit Deputy Warden, contracted SUD treatment providers working within the unit may be permitted to view Department inmate records, to include ACIS and hard copy inmate files per DO #901, Inmate Records Information and Court Action. Review of this information may be critical in attaining a full understanding of the inmates' SUD history when doing initial assessment and treatment planning.
- 2.5 Staff professionally licensed through the Arizona Board of Behavioral Health Examiners (AzBBHE) shall develop written treatment plans with an inmate and shall maintain clinical files containing documents with inmates' signature, treatment plans, and progress notes. A copy of the Treatment Plan shall be provided to the inmate and reviewed periodically with a licensed professional to identify progress and make necessary adjustments.

3.0 PROGRAM AND SERVICES DESCRIPTION

- 3.1 Structured SUD treatment programs are available, as follows:
- 3.1.1 Clinically appropriate SUD treatment.
 - 3.1.2 All group behavioral treatment shall be delivered utilizing evidenced based Cognitive Behavioral treatment.
 - 3.1.2.1 Treatment groups shall be conducted by professional staff licensed through the AzBBHE.
 - 3.1.2.1.1 If the treatment group is conducted by a paraprofessional under the umbrella of a licensed program, the clinical supervision and oversight shall be documented in a clinical supervision notebook.
 - 3.1.2.2 Treatment groups shall not exceed 15 participants.
- 3.2 SUD education may be facilitated by a CO III trained or licensed to provide such treatment. Clinical files shall not be maintained for educational programming.
- 3.3 Self-directed SUD educational programs may be delivered through electronic or workbook formats. Clinical files shall not be maintained for self-directed educational programming.
- 3.4 Self-Help/12-Step Support Groups are available in units where inmates are permitted to meet in groups.
- 3.4.1 The assigned Counseling and Treatment Services staff member shall conduct a pre-screening interview with volunteers.

- 3.4.2 Once volunteers have completed the volunteer badging process per DO #204, Volunteer Services, the unit CO IV shall be responsible for scheduling and oversight of Self-Help/12-Step Support Groups conducted in their unit.
- 3.4.3 The unit CO IV shall contact the Counseling and Treatment Services Administrator if there are any issues with volunteers or if more volunteers are needed.
- 3.5 Driving Under the Influence (DUI) education and treatment is offered through the Department, contracted providers, and/or at Contract Beds facilities.
 - 3.5.1 Approval as a DUI provider through the Arizona Department of Health Services, Division of Licensing Services is required.
 - 3.5.2 Neither contracted nor Department treatment staff shall complete Motor Vehicle Revocation Investigation Packets.
- 3.6 Offenders who participate in specific treatment programs while incarcerated may be directed or referred to community-based SUD education and treatment programming based on assessed need and available resources upon release.
 - 3.6.1 Referrals shall be based upon the extent of the offender's participation in specific treatment programs while incarcerated and identified on-going treatment needs.
 - 3.6.2 Community Corrections Officers shall refer all offenders with an identified substance use need to a community-based SUD treatment program per DO #1003, Community Corrections.
- 3.7 Modified Therapeutic Community (TC) – This model uses “community as a method” as an approach that emphasizes and holds TC inmate members accountable to pro-social values and behavior that better typifies how people interact within their communities outside of prison.
 - 3.7.1 Infractions of Discipline Violations will normally be addressed by the TC to include inmate community meetings and/or clinical staffing. Only Class A violations would routinely result in discipline violations, though clinical staff might also refer other infractions to be processed through the formal discipline process.
 - 3.7.1.1 Staff will document infractions by writing a discipline violation and referring that violation to the Program Manager for review disposition. When appropriate, the TC shall address the infraction within the community, rather than having the discipline violation processed.
 - 3.7.2 Inmates shall remain in the TC program and not be transferred due to a custody reduction. Inmates subject to a custody increase shall be carefully considered for a custody override decrease to remain in the program, if possible.
 - 3.7.2.1 A review shall be conducted and a recommendation made by the unit CO IV of each individual case and inmate. Upon receipt of the recommendation, the Unit Administrator shall approve/deny the override.
 - 3.7.3 Inmates in the TC program shall have drug tests completed at least monthly. Inmates failing drug tests shall have the same process for discipline as outlined in section 3.7.1.

3.7.4 Earned Incentives privileges may be modified per DO #809, Earned Incentive Program.

4.0 PROGRAM STANDARDS

- 4.1 The overarching goal of the Office of Counseling and Treatment Services is to provide the appropriate level of treatment, relapse prevention, recovery, and intervention to inmates who have SUD. Objectives toward achieving the goal include:
 - 4.1.1 Providing relevant cognitive behavioral based RSS led programming, treatment, recovery, and aftercare which addresses SUD. This shall include cultural competency treatment objectives, as appropriate.
 - 4.1.2 Placement of the inmates in the appropriately identified level of treatment.
 - 4.1.3 Placement in specialized SUD programs, such as co-occurring programs or MAT.
 - 4.1.4 Providing gender specific programming to female inmates.
 - 4.1.5 Assisting inmates and offenders in identifying and accessing services available to them in prison and/or the community, and providing information on how to independently access the services should future needs arise.
 - 4.1.6 Providing trauma informed care, as appropriate.
 - 4.1.7 Mental health evaluation and treatment, as needed.
 - 4.1.8 Making treatment widely available.
- 4.2 The goals and objectives shall be reviewed no less than annually and updated as needed.
- 4.3 In accordance with available resources, the Department provides access to some type of RSS led programming, or treatment to all inmates or offenders who request such services.
 - 4.3.1 Inmates may be matched with SUD education or treatment in the community as a condition of supervision based on reviews of their treatment needs and behaviors.
- 4.4 Institution-Based Programs (Mandatory Standards) – To meet the established mandatory program standards, institution-based SUD treatment programming shall:
 - 4.4.1 Ensure that confidentiality regulations are followed in accordance with section 2.0.
 - 4.4.2 Contain clearly stated program goals.
 - 4.4.3 Contain measurable objectives.
 - 4.4.4 Include a written program description, describing methodology and activities that may occur over the course of the program.
 - 4.4.5 Maintain clinical files for each inmate participant that includes at a minimum:
 - 4.4.5.1 Signed copy of the Informed Consent for Alcohol and/or Drug Treatment, Form 917-1, for treatment.
 - 4.4.5.2 Signed copy of intake interview, assessment, diagnosis, and identification of problem areas.

- 4.4.5.3 Signed copy of treatment plan, objectives, and goals.
- 4.4.5.4 Data Assessment Plan (DAP) Progress Notes that reflect at a minimum:
 - 4.4.5.4.1 Inmate’s date of attendance and time spent receiving service.
 - 4.4.5.4.2 Inmate’s level and type (in-person, computer-based training, etc.) of participation.
 - 4.4.5.4.3 If services were provided in a group or individual format.
 - 4.4.5.4.4 Topic for the session.
 - 4.4.5.4.5 Dated signature of the person who provided the service.
- 4.4.5.5 Signed copy of the Discharge Plan.
- 4.4.5.6 A certificate or other evidence of completion (e.g., entry in the ACIS system).
- 4.4.6 Be delivered by qualified staff, contractors, Program Associates, or volunteers.
- 4.4.7 Have specific admission and discharge criteria.
- 4.4.8 Contain mechanisms for initial participant assessment and subsequent documentation of clinical progress by a qualified clinician (treatment programs only).
- 4.4.9 Conduct group treatment activities with no more than 15 participants.
- 4.4.10 Be delivered in an environment that is confidential.
- 4.4.11 Provide a chair for each participant and the facilitator and offers adequate space and equipment for the activity being conducted.
- 4.4.12 Be approved by the Assistant Director for Education, Programs and Community Reentry.
- 4.5 The standardized unit of service for institution-based SUD group treatment shall be one or two hours.
- 4.6 Wardens and Deputy Wardens are responsible for ensuring the minimum threshold of institution-based SUD treatment services. The Counseling and Treatment Services Administrator shall be notified if this minimum threshold cannot be maintained. CO IIIs or other staff may be trained to deliver required educational programs. Minimum required services may include:
 - 4.6.1 SUD education groups.
 - 4.6.2 Self-Help/12-Step Support Group meetings, such as Alcoholics Anonymous (AA), Narcotics Anonymous (NA), and Gamblers Anonymous (GA) or similar groups.
 - 4.6.2.1 Self-Help/12-Step Support Groups may be offered at least weekly in every unit where inmates are permitted to participate in group activities.
 - 4.6.2.2 Self-Help/12-Step Support Groups and similar groups are not inmate clubs; they are Department-sanctioned treatment support groups.

- 4.6.3 Clinically appropriate treatment.
- 4.6.4 RSS Program – The RSS Program is an inmate run psycho-educational and peer support SUD recovery program. The RSS Program shall only be delivered by credentialed RSS inmate facilitators. Refer to DO #925, Inmate Programming for additional information.
 - 4.6.4.1 Certification
 - 4.6.4.1.1 Inmates are certified in RSS through a seven-day training program that teaches: motivational interviewing techniques; reducing stigma, fundamental knowledge on behavioral health, substance use, and medical diagnoses; and skills such as, documenting progress notes, collaborating with staff, referrals for services upon release, and effective participation in weekly meetings with an on-site supervisor.
 - 4.6.4.1.2 This certification is an acceptable credential, recognized by community behavioral health providers, should a certified inmate seek employment upon release.
 - 4.6.4.2 Following certification, an inmate RSS may facilitate an approved substance use class to the population and meet with other inmates one-on-one to provide further recovery support as needed.
 - 4.6.4.3 RSS inmates may be utilized in non-treatment programs, as approved by the Assistant Director for Education, Programs and Community Reentry.
- 4.6.5 Mental Health Peer Support Services – The Mental Health Peer Support Program is a credentialed inmate run psycho-educational and peer support program. Mental Health peer support groups or individual peer support services shall be delivered by trained and credentialed Peer Support Specialist inmate facilitators. Peer support led psycho-educational groups shall only utilize evidence based curriculum approved by the Department.
- 4.7 Staff members, contractors, volunteers, Program Associates, and/or inmates delivering SUD education, providing RSS led programming, providing SUD treatment or managing Self-Help/12-Step Support Group meetings shall meet the following minimum qualifications:
 - 4.7.1 SUD Education and/or RSS Led Programming – Facilitator shall be a CO III or other staff and participate in Department-recognized training in the delivery of the program.
 - 4.7.2 SUD Treatment – Professionals licensed through AzBBHE or a paraprofessional operating with clinical supervision under a licensed program.
 - 4.7.3 Self-Help/12-Step Support Groups – Volunteer applicants shall be processed per DO #204, Volunteer Services.
 - 4.7.3.1 With approval from Warden and unit Deputy Warden, Self Help/12-Step Support Groups may be conducted by inmates with appropriate oversight by correctional staff.

4.7.3.2 These groups must be of a purely voluntary nature with no incentive or reward for participation.

4.7.3.3 No inmate shall be given authority over any other inmate.

5.0 CASE MANAGEMENT

5.1 Each inmate shall complete a self-report substance use screening instrument and have their substance use history reviewed as part of the initial classification process. From this, they shall be assigned a Substance Use Needs Score and a Substance Use Referral Score, which shall be recorded in ACIS.

5.2 More specific assessment of treatment needs shall be performed using approved instruments as part of an inmate's referral for participation in a more formal treatment program.

5.3 In accordance with available resources, inmates being released from prison after completing formal institution-based SUD treatment programs may be referred to continuing treatment services in the community.

5.4 Unit CO IIs and Community Corrections Officers are responsible for the facilitation of individual inmate participation in educational programs, recognizing and encouraging continued sobriety/recovery, ensuring personal accountability for sobriety/recovery through urinalysis, and promoting the continuity of care by connecting the institution-based programming with programming to occur during Community Supervision.

6.0 ALCOHOL ABUSE TREATMENT FUND

6.1 Per provisions of Arizona Revised Statute (A.R.S.) § 31-255, the lesser of 67% of gross or \$.50 per hour of the monies earned for all inmates convicted under the DUI statutes shall be deposited into the Alcohol Abuse Treatment Fund. This is an appropriated fund, for example: The Arizona Legislature appropriates the amount requested annually by the Department to be expended as requested by the Department.

6.1.1 Fund monies shall be used to pay for alcohol use treatment for inmates convicted of DUI offenses. (A.R.S. §§ 28-1381, 28-1382, and 28-1383)

6.1.2 Expenditure of Alcohol Abuse Treatment Funds is carefully monitored by the Counseling and Treatment Services Administrator to ensure spending is compliant with A.R.S. § 31-255.

6.2 The Contract Beds Administrator shall ensure DUI Inmate labor contracts are established and monitored at private DUI units or treatment facilities.

6.3 The Business Manager assigned to Education, Programs and Community Reentry shall:

6.3.1 Process approved Requests for Purchase.

6.3.2 Ensure money accrued by the Department for work performed by DUI inmates is deposited into the Alcohol Abuse Treatment Fund.

6.3.3 Provide fiscal reports of receivables, expenditures, and the fund balance upon request.

DEFINITIONS/GLOSSARY

Refer to the Glossary of Terms for the following:

- Program Associate
- Qualified Service Organizations
- Self-Help/12-Step Support Groups
- Substance Use
- Treatment

FORMS LIST

917-1, Informed Consent for Alcohol and/or Drug Treatment

RELATED POLICIES

DO #204, Volunteer Services

DO #809, Earned Incentive Program

DO #901, Inmate Records Information and Court Action

DO #925, Inmate Programming

DO #1003, Community Corrections

AUTHORITY

A.R.S. § 28-1381, Driving or Actual Physical Control While Under the Influence; Trial by Jury; Presumptions; Admissible Evidence; Sentencing; Time Limitation; Violation; Classification

A.R.S. § 28-1382, Driving or Actual Physical Control While Under the Extreme Influence of Intoxicating Liquor; Trial by Jury; Sentencing; Time Limitation; Violation; Classification

A.R.S. § 28-1383, Aggravated Driving or Actual Physical Control While Under the Influence; County Jail Program; Annual Report; Violation; Classification; Definitions

A.R.S. § 31-255, Alcohol Abuse Treatment Fund

A.R.S. § 32-3321, Licensed Substance Abuse Technician; Licensed Associate Substance Abuse Counselor; Licensed Independent Substance Abuse Counselor; Qualifications; Supervision

A.R.S. § 41-1651, Prison Construction and Operations Fund

A.A.C. R4-6-701, Licensed Substance Abuse Technician Curriculum

42 C.F.R. § Part 2, Confidentiality of Substance Use Disorder Patient Records

42 U.S.C. § 290dd-2, Confidentiality of Records