Correctional Behavioral Health

Mission Statement

To provide quality mental health and substance use disorder services to offenders committed to the Department of Corrections institutions using evidenced based practices to maximize opportunities for rehabilitation and recovery.
Sioux Falls

South Dakota State Penitentiary, Jameson Prison Annex, and Sioux Falls Community Work Center

Male Offenders
- South Dakota State Penitentiary (SDSP)
- Jameson Prison Annex (JPA)
- Sioux Falls Community Work Center (SFCWC)

Specialized Units
- Admission and Orientation Unit (JPA)
- Acute Mental Health Unit (JPA)
- Transition/Step Down Mental Health Unit (JPA)
- Secured Mental Health Housing
- Supportive Living Environment (SDSP)

DSS Staffing
- 2 Clinical Supervisors
- 8 Mental Health Professionals
- 10 Addiction Counselors
- 1 Support Staff

Strong families- South Dakota’s foundation and our future
Mike Durfee State Prison and Yankton Community Work Center

Male Offenders
- Mike Durfee State Prison (MDSP)
- Yankton Community Work Center (YCWC)

Specialized Units
- Supportive Living Environment

DSS Staffing
- 1 Clinical Supervisor
- 2 Mental Health Professionals
- 9 Addiction Counselors
- 1 Support Staff
Rapid City Community Work Center

- Male Offenders

- Staffing
  - 1 Clinical Supervisor
  - 1 Mental Health Professional-dually credentialed
  - 2 Addiction Counselors

Strong families – South Dakota’s foundation and our future
South Dakota Women’s Prison and Pierre Community Work Center

- **Female Offenders**
  - South Dakota Women’s Prison (SDWP)
  - Pierre Community Work Center (PCWC)

- **Specialized Units**
  - Admission and Orientation Unit (SDWP)
  - Acute Mental Health Unit (SDWP)

- **Staffing**
  - 1 Clinical Supervisor
  - 3 Mental Health Professionals
  - 5 Addiction Counselors
  - 1 Behavioral Health Tech
  - 1 Support Staff
Additional Staffing to Support Correctional Behavioral Health

• Assistant Director

• Quality Assurance and Training
  • 1 Quality Assurance and Training Specialist

• Resource Coordination
  • 1 Resource Coordination Program Manager
  • 3 Resource Coordinators
Contracted Services

Psychiatry

• Contract with Midwest Wellness Institute to support psychiatric services at the prison in Sioux Falls (SDSP/JPA/SFCWC), Pierre (SDWP/PCWC), and Rapid City Community Work Center
• Contract with Lewis and Clark Behavioral Health Services to support psychiatric services at the Mike Durfee State Prison and Yankton Community Work Center

Additional Contracted Services

• Contract with Lewis and Clark Behavioral Health services to provide intake assessment support to the Women’s Prison in Pierre
• Contract with Capital Area Counseling to provide Mental Health support to the Women’s Prison in Pierre
• Contract with Lutheran Social Services to provide substance use disorder group services as needed
Accreditation

National Commission on Correctional Health Care (NCCHC)

• All facilities are accredited by NCCHC
• Accreditation survey every three years of medical and behavioral health services

Additional Review

• Correctional Behavioral Health collaborates with the DSS Office of Licensing and Accreditation to ensure that the standards required for accredited community behavioral health agencies are also met within the correctional system
Q1: In FY21, what percentage of offenders were identified with mental health concerns at time of intake?

A) 40%   B) 62%   C) 73%   D) 87%
Answer: C) 73%
Behavioral Health Services: Assessments

Behavioral Health Intake Assessments
• All offenders are provided an integrated behavioral health intake assessment within 14 days of admission
• Identify substance use disorder and mental health needs and referral for services.
• In FY21:
  • 1,634 male Behavioral Health intake assessments were completed
    • 93% were identified with having a substance use disorder at intake
    • 67% were identified with having mental health concerns
  • 493 female Behavioral Health intake assessments were completed
    • 97% were identified with having a substance use disorder at intake
    • 94% were identified with having mental health concerns

Mental Health Evaluation
• Completed by a Masters level Mental Health Professional for all offenders who are identified as having a Serious Mental Illness (SMI) or if there is an identified clinical need
Behavioral Health Services: Substance Use Disorder Groups

Cognitive Behavioral Interventions for Substance Abuse (CBISA)
• Evidenced Based Treatment for the offender population with moderate to high substance use disorder needs

Breaking the Cycle
• Utilized individually with offenders who struggle cognitively with CBISA

CBISA Pre-Treatment
• Targets offenders with an identified substance use disorder need who are referred for treatment services but would not otherwise receive services, typically due to a short incarceration period (less than 6 months)
Behavioral Health Services: Substance Use Disorder Groups - Special Populations

Native American Treatment
• Provided to offenders who have a desire to participate in a culturally specific treatment program focusing on the Native American culture
• Material from the Red Road Approach to Wellbriety in addition to the Cognitive Behavioral Intervention for Substance Abuse (CBISA) curriculum

Intensive Methamphetamine Treatment program (IMT)
• Specific to offenders with a diagnosed severe methamphetamine use disorder, who have not been successful in maintaining recovery following previous treatment experiences
• An approximately one-year long program encompassing four phases: detoxification, outpatient group services, low intensity residential services, and aftercare services.
Cognitive Behavioral Interventions for Substance Abuse (CBISA)

Outcome Measure: University of Rhode Island Change Assessment (URICA)

Offender’s Stage of Change at Completion of CBISA

63% percent of offenders reported being in Contemplation and 26% reported being in Action stages of change at completion of services.
Behavioral Health Mental Health Groups

Dialectical Behavior Therapy (DBT)
• DBT is recognized as an evidenced based treatment effective in treating a wide range of disorders including depression, post-traumatic stress disorder, and borderline personality disorder
• Adapted DBT skills may be used with offenders with cognitive impairment

Resilience Group
• Focuses on individuals with a history of trauma and indicators of post-traumatic stress disorder (PTSD) utilizing the Seeking Safety curriculum, an evidenced based treatment with topics to address cognitive, behavioral, and interpersonal domains
Dialectical Behavior Therapy (DBT) Skills Group

Outcome Measure: Difficulties in Emotion Regulation Scale (DERS)

Offenders showing improvement at the completion of DBT

- 88% percent of offenders showed improvement at the completion of DBT
- 85% of women offenders showed improvement at the completion of DBT
- 91% of male offenders showed improvement at the completion of DBT
Behavioral Health Services: Additional Groups

**Beyond Violence**
- An intervention that relies on cognitive-behavioral approaches to address aggression and/or violence

**Moving On**
- A program for at risk women involved in the criminal justice system with the goal to assist women in developing resources to reduce the risk of future criminal behavior

**Moral Reconation Therapy (MRT)**
- A systematic cognitive-behavioral evidenced based program that is designed to facilitate the development of higher stages of moral reasoning
- Provided in partnership with the Department of Corrections to help reduce recidivism
Moral Reconciliation Therapy (MRT)
Outcome Measure: TCU Criminal Thinking Scales

TCU score at Start and Completion of MRT

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<th>Entitlement</th>
<th>Justification</th>
<th>Power Orientation</th>
<th>Cold Heartedness</th>
<th>Criminal Rationalization</th>
<th>Personal Irresponsibility</th>
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<tr>
<td>Initial</td>
<td>Group Completion</td>
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Other Behavioral Health Services Provided

**Individual mental health counseling**
- All offenders have access to individual mental health counseling provided by a Masters level Mental Health professional

**Psychiatric services**
- Offenders who enter the prison are provided mediation management services
- Offenders with an identified needs are referred into psychiatry for medication management services

**Crisis Intervention**
- Staff referrals
- Mental Health on call services
- Mental Health safety watch
Q2: In FY21, what percentage of female offenders engaged in self-injurious behavior?

A) 3%   B) 7%   C) 10%   D) 13%
Answer: B) 7%
Zero Suicide Efforts

- Zero Suicide is a system wide approach to improve care and outcomes for individuals at risk of suicide in health care systems
- Collaborative effort with Department of Corrections and Department of Health
Zero Suicide Efforts: Columbia and CAMS Procedure

Columbia-Suicide Severity Rating Scale (C-SSRS)

• The C-SSRS is an evidenced based assessment used to identify
  • Whether someone is at risk for suicide
  • Assess the severity and immediacy of that risk
  • Gauge the level of support the client needs

• This tool is used to support clinical decisions when an individual is removed from a mental health watch and to assist in determining appropriate follow up care
Collaborative Assessment and Management of Suicidality (CAMS)

• CAMS is an evidenced based therapeutic framework for the ongoing assessment and treatment of a patient’s suicidal risk.

• CAMS is guided by a clinical tool called the Suicide Status Form (SSF) which guides ongoing assessments, treatment planning, tracking of ongoing risk and clinical outcomes.

• Treatment length is dependent on the individual and identified needs and concerns.
Medication Assisted Treatment (MAT) for the treatment of Opioid Use Disorder

• Offenders who enter the prison on a medication prescribed for the treatment of opioid use disorder are reviewed to determine if it is clinically appropriate to continue this medication while incarcerated

• MAT pilot at the Women’s Prison

• Male offenders with a diagnoses opioid use disorder are currently able to request to be set up with MAT services upon release and an appointment will be made in the community to assess for these services
Resource Coordination

- Resource Coordinators are the central point of communication

- Resource coordination staff work with offenders with mental health and/or substance use disorder needs

- Schedule services for offenders releasing to a parole status and any offender that requests assistance prior to completing their prison sentence

- Upon request from parole agents, resource coordinators may assist with coordinating residential services and scheduling new intake appointments for parolees that are being detained
Q3: In FY21, how many intake appointments were scheduled for substance use disorder (SUD) services in the community for offenders releasing to parole?

A) 1,328  B) 1,548  C) 2,014  D) 2,267
Answer: D) 2,267 appointments
Resource Coordination: SUD services

• SUD Resource Coordination Efforts

  • In FY21 there were 2,267 intake appointments scheduled for SUD services. The attendance rate for attending the first intake scheduled was 74%.

• Intensive Methamphetamine Treatment (IMT)
Resource Coordination: Mental Health services

• MH Resource Coordination
  • DSS release planning worksheets
  • Indigent Medication Application
    • Resource coordinators completed 76 Indigent Medication applications
    • In FY21 there were 249 intake appointments scheduled for MH services

• Release planning for offenders with a Serious Mental Illness (SMI)
  • Release planning can begin up to a year before release
  • Quarterly meetings with the offender and the Mental Health Professional
  • Indigent Medication Application
  • Coordination of care call is held including the Resource Coordinator, MH Professional, Parole Agent, and community agency staff who will be receiving the offender into services
  • In FY21, resource coordinators had 231 contacts with offenders with a SMI and conducted 69 release calls
Behavioral Health Training

- DOC pre-service training
- DOC annual in-service
- Mental Health First Aid
- Enhanced training
- Other training as requested
Thank You

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