

Program Performance Report

Residential Substance Abuse Treatment Program

January–December 2013

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Residential Substance Abuse Treatment Program: January–December 2013

Program Performance Report

The Residential Substance Abuse Treatment (RSAT) program, administered through the Bureau of Justice Assistance (BJA), was created to help States and units of local government develop, implement, and improve treatment programs in correctional and detention facilities. It also helps them create and maintain community-based aftercare services for probationers and parolees. RSAT prison-based (residential) and jail-based programs provide services to offenders before their release; participating offenders are usually housed apart from the general population. RSAT aftercare programs are provided in community settings after offenders have been released and offer substance abuse treatment as well as housing, education, vocational assistance and other services.

RSAT grants are awarded to all 50 States, the District of Columbia, and the 5 U.S. Territories—American Samoa, Guam, the Northern Mariana Islands, Puerto Rico, and the U.S. Virgin Islands (all 56 entities are collectively referred to in this report as States). States may use RSAT grant funds to support three types of programs: State and local correctional facility programs (residential-based), jail-based treatment programs, and aftercare programs. State grantees typically subaward funds to correctional facilities (jails and prisons), treatment providers, and aftercare programs. Grantees are responsible for ensuring that their subrecipients enter performance data into the Performance Measurement Tool (PMT).

This program performance report (PPR) is divided into two sections: (1) jail- and residential-based programs, and (2) aftercare programs. Included in the residential-based data are a small number of juvenile correctional facilities.¹ The following is based on self-reported data from grantees and subrecipients for the January–March, April–June, July–September, and October–December 2013 quarters that had active awards. Table 1 shows the number of awards and subrecipient awards and the PMT completion rate by quarter.

Table 1. Jail-Based, Residential-Based, and Aftercare Awards and Subawards: January–December 2013

Award Type	Reporting Period	Awards (N)	Completed PMT Reports (N)	Completion Rate (%)
State Awards	January–March 2013	235	177	75.3
	April–June 2013	219	164	74.9
	July–September 2013	210	209	99.5
	October–December 2013	183	180	98.4
Subrecipient Awards	January–March 2013	196	191	97.4
	April–June 2013	191	188	98.4
	July–September 2013	174	172	98.9
	October–December 2013	174	173	99.4

The reporting completion rate ranged from 75 percent to 99 percent for State awards and was more than 97 percent for subrecipients.

¹ Grantees and subrecipients self-select their program type, which occasionally results in a program that is incorrectly classified. An example is a large county jail that reports data on the prison-based program questions. BJA is working with grantees to improve reporting. Future reports will reflect these changes.

Not all grantees and subrecipients were operational during the reporting period. Programs may not be operational for many reasons, including administrative issues, a lack of program participants, a grantee/subrecipient that is not yet spending funds, or an award that is closing out. Table 2 shows the number of operational programs by program type. An operational program means that grantees executed program activities outlined in their application and spent award funds during the quarter(s) for which they are reporting.

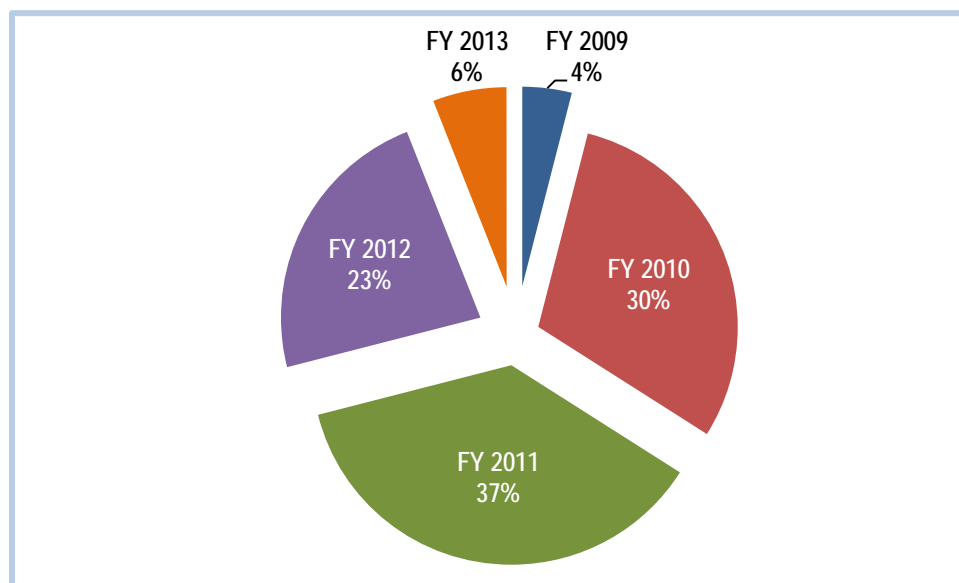
Table 2. Jail-Based, Residential-Based, and Aftercare Operational Programs: January–December 2013

Quarter	Jail Based	Residential Based	Aftercare	Total
January–March 2013	47	67	34	148
April–June 2013	47	69	28	144
July–September 2013	42	68	29	139
October–December 2013	48	65	35	148

- Overall, there are more operational residential-based programs than jail-based and aftercare programs.
- Programs were operational in 52 States (not shown in Table 2).
- Residential-based programs were operational and reported in the PMT in 42 States.
- Jail-based programs were operational and reported in the PMT in 27 States.
- Aftercare programs were operational and reported PMT data in 10 States.
- Six States funded a combination of jail- and/or residential-based programs and aftercare.

Awards are made in the fiscal year of the appropriation and may be expended over the following 3 to 4 years. Figure 1 shows the average percentage of operational awards by the year they were awarded. For example, in Figure 1, it shows that of the operational awards in FY 2013, 37 percent were awarded in FY 2011, 30 percent in FY 2010, and 23 percent in FY 2012.

Figure 1. Percentage of Operational Awards by Appropriation Year: FY 2009 to FY 2013

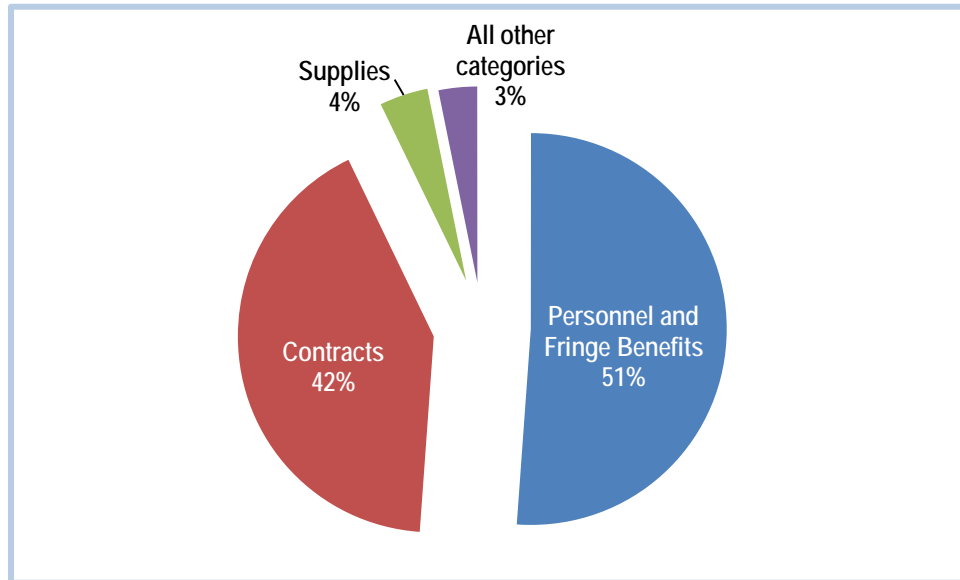


- Ninety percent of the funds spent on RSAT activities during January–December 2013 were awarded in FY 2010, FY 2011, and FY 2012.
- The FY 2013 awards were granted and became operational in October 2013, the beginning of the last quarter this report covers, which accounts for the small percentage of operational awards shown in Figure 1.

BJA and Non-BJA Funds Spent

In July 2013, the PMT was revised to collect data on Federal and non-Federal matching funds spent during reporting periods.² These data were collected during the July–September 2013 and October–December 2013 reporting periods and are presented in Figure 2.

Figure 2. Federal and Non-Federal Matching Funds Spent by Expense Category: July–December 2013



- During the last 6 months of 2013, grantees spent more than \$11.2 million in grant funds and matching non-Federal funds. More than 62 percent of the funds spent were Federal, and about 38 percent were non-Federal matching funds.
- Of the \$11.2 million spent in the second half of 2013, 51 percent went to personnel and fringe benefits, and 42 percent went to contracts. The latter includes contracted services for treatment and other programmatic services, such as housing and employment services if not conducted by grantees in-house.

² A 25 percent match is required from grantees. The non-Federal matching funds accounted for more than 25 percent because some grantees over-match a proportion that is larger than 25 percent. Another contributing factor may be that grantees report spending the “matching funds” before the Federal funds.

Participant-Level Key Measures for Jail- and Residential-Based Programs

This section describes those programs that were operational and using BJA RSAT funds in January–December 2013 (Figures 3–7 and Tables 3 and 4). These programs may not be representative of all residential- and jail-based RSAT programs.

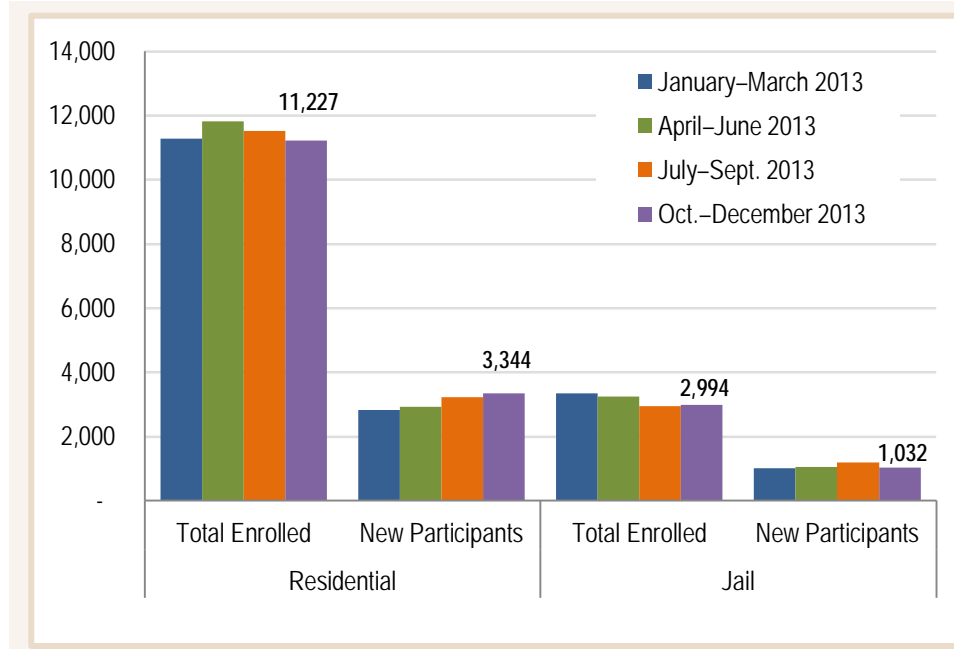


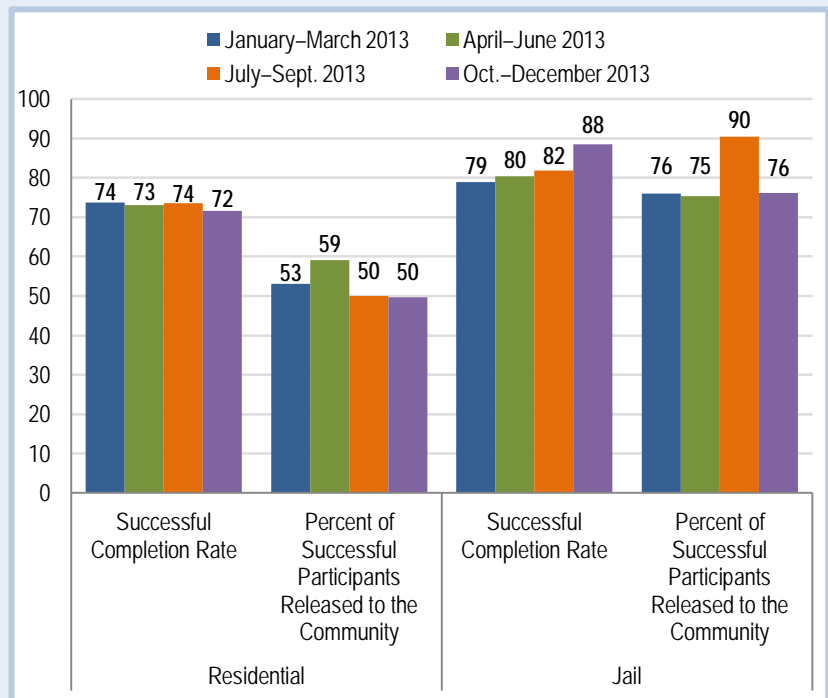
Figure 3. Total Enrolled and Newly Enrolled Participants in Jail- and Residential-Based Programs

The total number of participants enrolled in residential-based programs in 2013 was consistently between 11,000 and 12,000. Also, in residential-based programs, the number of new participants cycling into the program increased slightly each quarter from about 2,840 (January–March) to 3,344 (October–December).

The number of jail-based program participants decreased slightly over the course of the year, from about 3,348 to 2,994. About 1,032 new jail-based program participants entered the program each quarter.

Figure 4. Participants Completing the Jail- or Residential- Based Program and Released

The successful completion rate is the percentage of those participants exiting the program who complete the programmatic requirements, which includes substance abuse treatment as well as participants devoting at least 6 months to the program for residential programs and 3 months for jail-based programs. Reasons participants left the program before completion are listed in Table 4. The completion rate calculation can be found in the “Key Performance Measures” table at the end of this report. Note that participants who exit before program completion because of release or transfer from the facility, death, or serious injury are excluded from the completion rate calculation. The completion rate averages about 73 percent for residential-based programs and 82 percent for jail-based programs. Of those who successfully complete residential-based programmatic requirements during the reporting periods, more than half are released to the community within the same reporting period. Among successful participants in jail-based programs, about 80 percent are released to the community within the same reporting period.



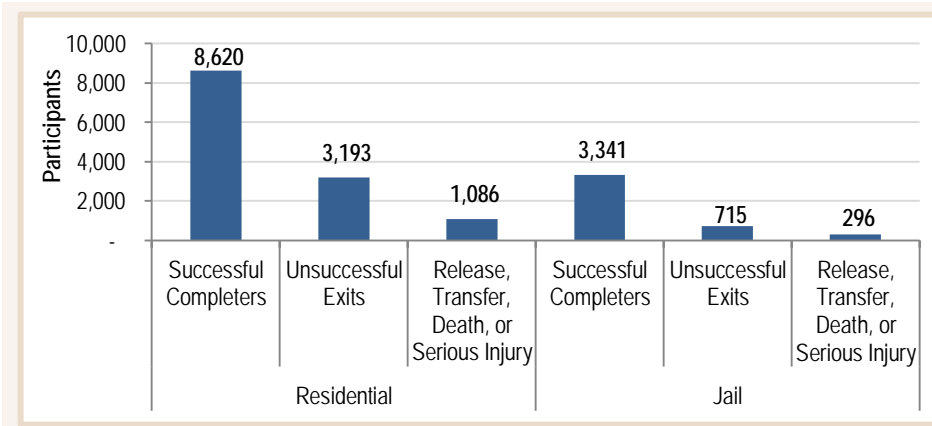


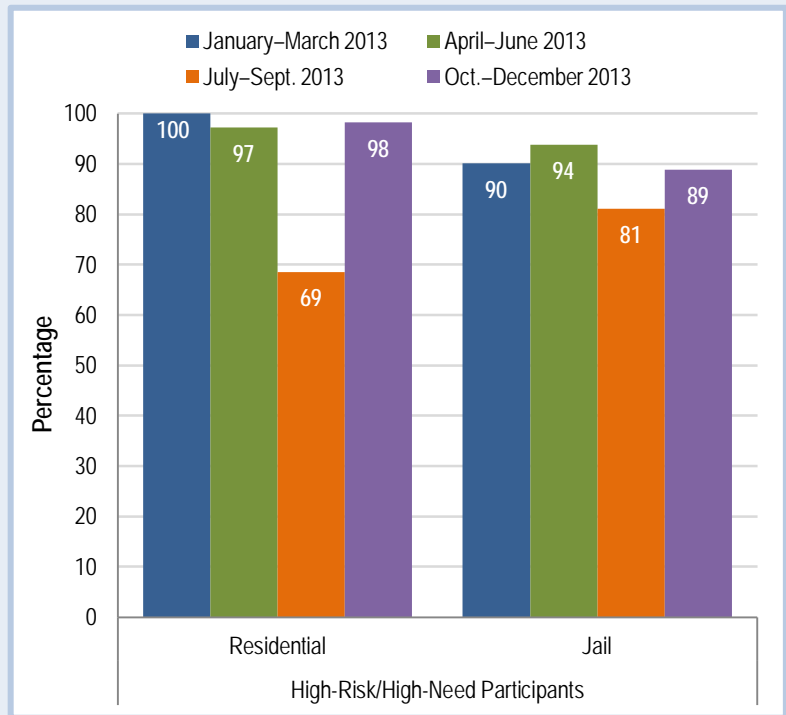
Figure 5. Number of Participants Completing and Unsuccessfully Exiting³ the Program

In 2013, 8,620 prison inmates and 3,341 jail inmates completed the programmatic requirements, including substance abuse treatment and other therapies, within their required program length between January and December 2013.

Figure 6. Participants in Residential- or Jail-Based Programs with High Criminogenic Risks and Substance Abuse Treatment Need

The most common risk/needs assessments used by grantees include the Global Assessment of Individual Need (GAIN), the Level of Service Inventory (LSI)/LSI-Revised, the TCU Global Risk Assessment instrument, the Ohio Risk Assessment System (ORAS), the Correctional Offender Management Profiling for Alternative Sanctions (COMPAS), and the Level of Service/Case Management Inventory (LS/CMI). With the exception of one quarter (July–September 2013), more than 90 percent of participants who entered the program and received assessment screenings were classified as high risk/high need in residential and jail-based programs.

Of the 65 possible responses to the question “please name the risk/need assessment instrument used” during the October–December 2013 reporting period, 7 residential programs either left the text box blank or reported some variation of “none” or “not applicable.” Likewise, of the 48 possible responses for jail-based programs during the same reporting period, 8 either left the text box blank, reported “not applicable,” or gave another illogical response.⁴



³ Unsuccessful exit includes those who are no longer in the RSAT program because of a new criminal charge, voluntary dropout, failure to meet program requirements, and violation of institutional rules.

⁴ Future PMT training will address these issues.

Figure 7. Services Received by Jail- or Residential-Based Program Participants Through RSAT Grant Funds: October–December 2013

These data give a snapshot of treatment service enrollment during this time period. Generally, participants receive more than one type of service while in the program and should receive substance abuse treatment services while participating in the program. During the October–December 2013 reporting period, about 85 percent of residential-based participants and 67 percent of jail-based participants received substance abuse treatment services. About 82 percent of residential-based program participants and 63 percent of jail-based program participants also received cognitive and behavioral services. These include interventions that address criminal thinking and antisocial behaviors. Cognitive and behavior programs may also include a drug treatment component. Substance abuse treatment programs may also include elements of cognitive and behavioral services.

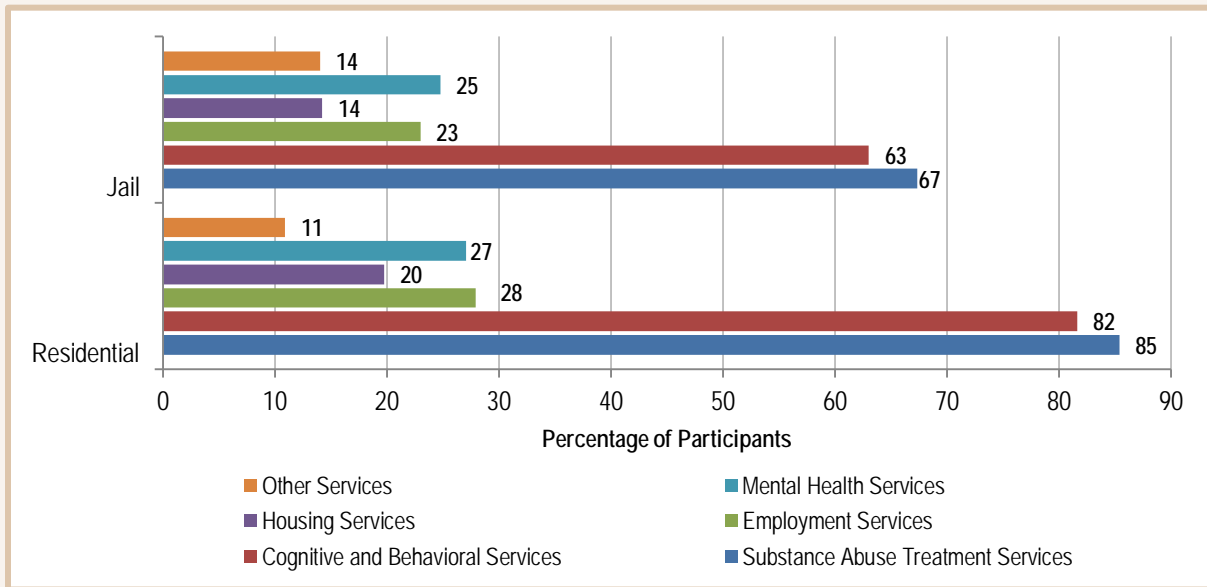


Table 3 shows the number of participants in residential-based and jail-based programs tested for alcohol and illegal substances. A positive alcohol/drug test indicates use of alcohol and/or illegal substances.

Table 3. Alcohol and Illegal Substance Testing in Residential- and Jail-Based Programs: January–December 2013

Alcohol and Illegal Substance Testing	January–March 2013	April–June 2013	July–Sept. 2013	Oct.–December 2013
Residential				
Number of Participants with Positive Test (<i>N</i>)	134	214	130	114
Number of Participants Tested (<i>N</i>)	3,920	3,894	3,868	4,157
Participants Testing Positive (%)	3	5	3	3
Jail				
Number of Participants with Positive Test (<i>N</i>)	95	75	75	66
Number of Participants Tested (<i>N</i>)	1,528	1,141	1,027	761
Participants Testing Positive (%)	6	7	7	9

About 5,000 jail- and residential-based program participants were tested for illegal substance use each quarter. The percentage of positive tests ranges from 3 percent to 5 percent in residential programs and 6 percent to 9 percent in jail-based programs.

Table 4. Completion Time Frames and Reasons for Not Completing Jail- or Residential-Based Programs: January–June 2013

Participants Who Completed Program: Time Frame	Jail-Based Programs		Residential-Based Programs	
	January–December 2013 (N)	% ⁵	January–December 2013 (N)	%
0 to 3 Months	1,711	51	1,234	14
4 to 6 Months	1,308	39	3,497	41
7 to 9 Months	257	8	2,913	34
10 or More Months	65	2	976	11
Total	3,341	100	8,620	100
Participants Who Did Not Complete Program: Time Frame				
0 to 3 Months	864	85	2,090	49
4 to 6 Months	125	12	1,621	38
7 to 9 Months	18	2	388	9
10 or More Months	4	0	180	4
Total	1,011	100	4,279	100
Participants Who Did Not Complete Program: Reasons				
Termination for a New Charge	79	8	68	2
Release or Transfer to Another Facility	269	27	999	23
Death or Serious Illness	27	3	87	2
Voluntary Dropout	161	16	420	10
Failure to Meet Program Requirements	157	16	1,186	28
Violation of Institutional Rules	269	27	1,267	30
Other	49	5	252	6
Total	1,011	100	4,279	100

About 73 percent of residential-based program participants and 82 percent of jail-based program participants successfully completed the program in 2013. Table 4 shows the time frames during which jail- and residential-based program participants exited the program (both successfully and unsuccessfully). It also shows the reasons why participants leave the program prior to completing its requirements.

- For **residential-based** programs, 75 percent of participants who completed the program did so in 4 to 9 months. Generally, residential-based participation should be limited to inmates with 6 to 12 months remaining in their confinement. This is so they can be released from the facility upon completion rather than being returned to the general prison population. The data are largely consistent with that model, despite about 14 percent of participants successfully completing the program in the first 3 months.
- For **jail-based** programs, 90 percent of participants who completed the program did so in the first 6 months. Jail-based programs require at least 3 months of treatment programming.
- Of those participants who did not complete the **residential-based** RSAT program, 49 percent exited in the first 3 months, compared with 85 percent of those in the **jail-based** program. The difference is to be expected, because jail-based participants generally have shorter sentences and terms of release.
- Of those participants who did not complete the **residential-based** programs, the most common reasons given include violation of institutional rules (30 percent), failure to meet program requirements (28 percent), and release or transfer to another facility (23 percent).
- Of those participants who did not complete the **jail-based** programs, the most common reasons given are release or transfer to another facility (27 percent), violation of institutional rules (27 percent), failure to meet program requirements (16 percent), and voluntary dropout (16 percent).

The differences between the jail-based and residential-based RSAT programs can be attributed to the difference between jails and prisons, such as average length of stay and severity of offense.

⁵ Percentages may not add up to 100 percent due to rounding.

The findings are based on 4 quarters of data for a subset of jail- and residential-based programs using BJA funds, which may not be generalizable to all residential- and jail-based RSAT programs.

Participant-Level Key Measures for Aftercare Programs

The funding authorization allows for creating and maintaining community-based aftercare services for offenders: “States may use up to 10 percent of their total RSAT award for treatment of parolees for up to 1 year after they have been released from a correctional facility.”⁶ Aftercare services involve the coordination between correctional treatment programs and other social service and rehabilitation programs, such as education and job training, parole supervision, halfway houses, self-help, and peer-group programs.

In January–June 2013, 58 subrecipients in 10 States (i.e., correctional facilities) have operational aftercare programs. This section represents those programs using BJA RSAT funds from January to December 2013. Data reported in Figures 8–12 and Tables 5 and 6 may not be representative of all aftercare programs.

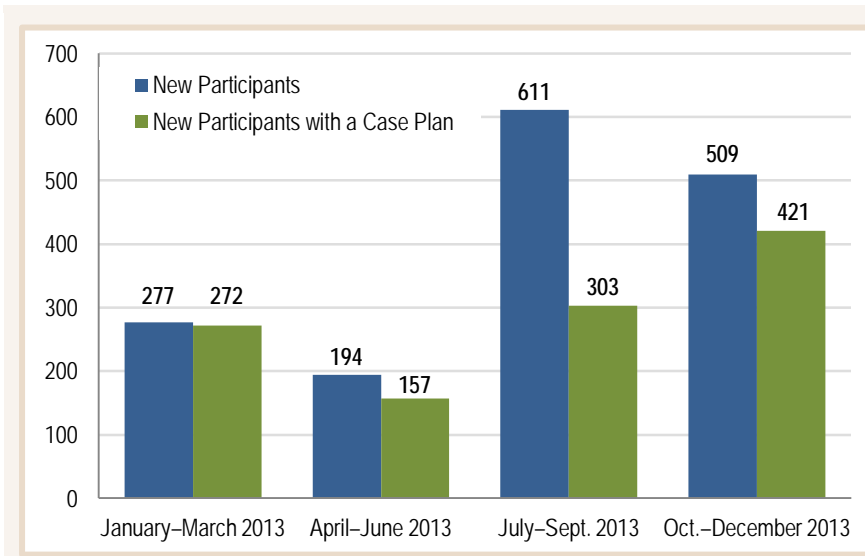


Figure 8. Enrolled Aftercare Program Participants and New Participants with a Case Plan

The number of aftercare participants enrolled as of the end of each quarter of 2013 increased significantly, from 194 to 611 between April–June 2013 and July–September 2013. Individualized case (or treatment) plans that are tailored to each participant’s specific needs is a best practice.⁷ The number of new participants with an individualized case plan tracks closely with the total number of new participants, except during the July–September quarter.

⁶ U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Assistance. (2005). *Program update: Residential Substance Abuse Treatment for State Prisoners (RSAT) program* (Publication No. NCJ 206269). Washington, DC: Author.

⁷ “Principles of Drug Addiction Treatment: A Research-Based Guide (Third Edition).” National Institutes of Health, National Institute on Drug Abuse. Accessed online: <http://www.drugabuse.gov/publications/principles-drug-addiction-treatment-research-based-guide-third-edition/principles-effective-treatment>

Figure 9. Percentage of New Aftercare Program Participants with a Case Plan, and High-Risk/High-Need Participants⁸

This graph shows the percentage of new aftercare program participants with a case plan, and the percentage of participants with high substance abuse treatment needs who have high criminogenic risk factors as determined by a risk/needs assessment. Validated risk/needs assessment tools can help identify a participant's treatment needs. When used together, employing case (or treatment) plans and risk/needs assessment instruments treatment planning is an effective practice.⁹ The percentage of new participants with a case plan ranged from a low of 50 percent during July–September 2013 to a high of 98 percent in January–March 2013.

The percentage of high-risk/high-need participants in 2013 ranged from 96 percent to 99 percent. BJA began collecting data on the assessment instruments used by grantees during the July–September 2013 reporting period. Risk assessment instruments used by program varied widely. The ones most commonly used by aftercare programs include the Addiction Severity Index, LSI/LSI-R, GAIN, the Adult Strength and Needs Assessment (ANSA), ORAS, and the Indiana Risk Assessment System (IRAS).

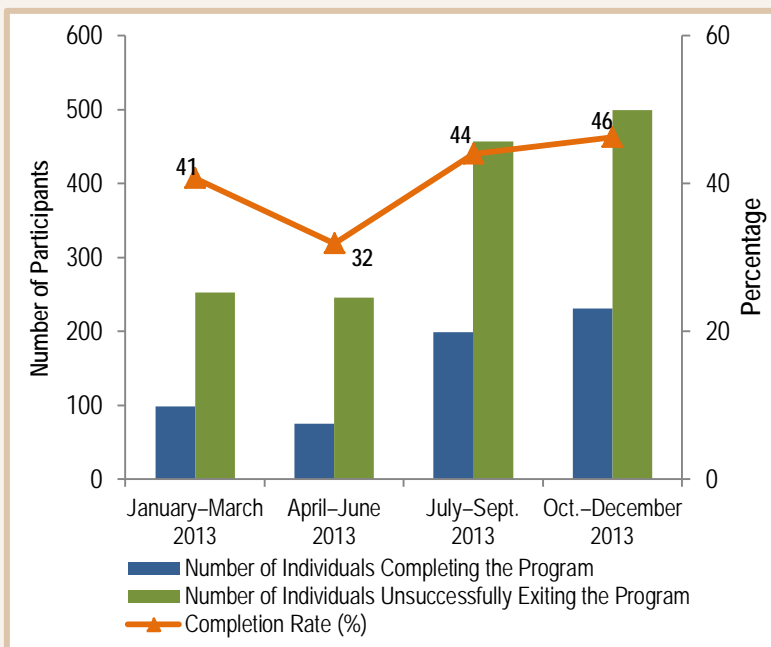
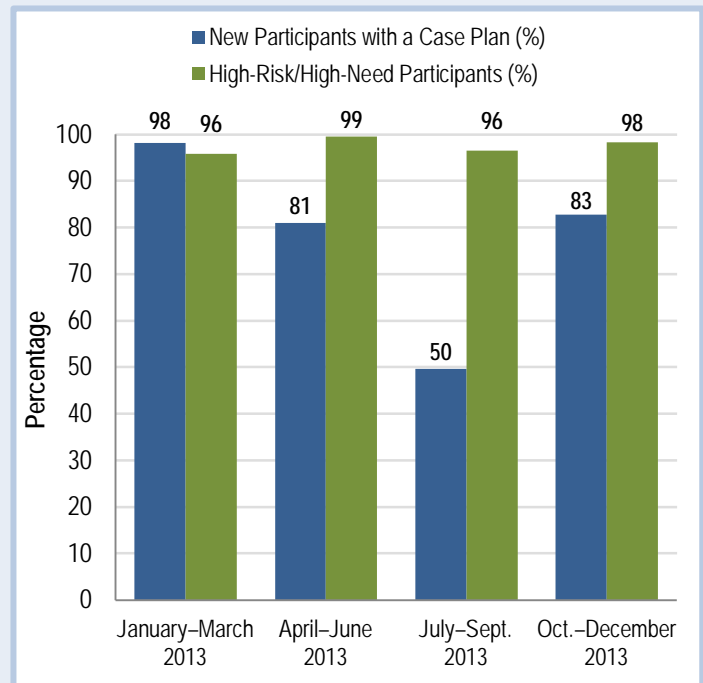


Figure 10. Participants Successfully Completing the Aftercare Program or Exiting the Program, and Completion Rate

These bar graphs show the number of participants exiting the aftercare program, those exiting the program successfully by completing program requirements, and the completion rate. Participant reasons for leaving the program before completion are listed in Table 6. The completion rate calculation can be found in the “Key Performance Measures” table at the end of this report. Participants who exit before program completion because of release, transfer, death, or serious injury are excluded from the completion rate calculation. The completion rate ranged from a low of 32 percent to a high of 46 percent. Past iterations of the RSAT Program Performance Report showed aftercare completion rates ranging from 53 percent to 60 percent.¹⁰

⁸ The PMT questionnaire was recently revised to include a question about the types of risk and needs assessment instruments grantees are using in their programs. Subsequent iterations of this report will include that contextual information.

⁹ “Principles of Drug Addiction Treatment: A Research-Based Guide (Third Edition).” National Institutes of Health. National Institute on Drug Abuse. Accessed online: <http://www.drugabuse.gov/publications/principles-drug-addiction-treatment-research-based-guide-third-edition/principles-effective-treatment>

¹⁰ Steyee, J. (2012). *Program performance report: Residential Substance Abuse Treatment Program*. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Assistance. Available online: https://www.bja.gov/Publications/RSAT_PPR_09-12.pdf.

Figure 11. Number of Participants Successfully Completing the Program, and Unsuccessful Exits

In 2013, more people were terminated from the program than successfully completed all of the program requirements. “Terminated” is defined as exiting the program because of a new charge, voluntarily dropping out (if not on parole or court supervision), failing to meet program requirements, or absconding.

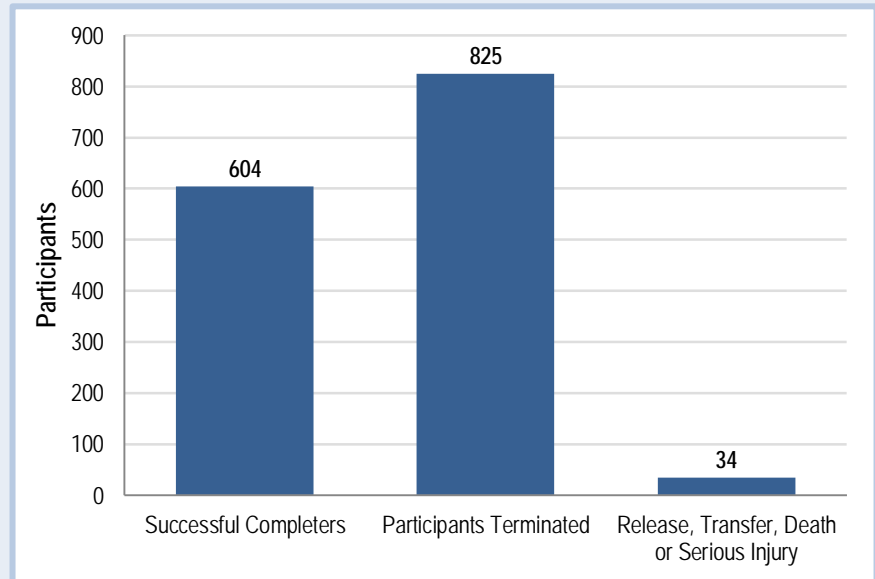


Figure 12. Services Received by Aftercare Program Participants Through BJA RSAT Grant Funds: October–December 2013

These data give a snapshot of treatment service enrollment during the time period examined. Generally, participants receive more than one type of service while in the program and should receive substance abuse treatment services while participating. Overall, about 71 percent of aftercare participants received substance abuse treatment services or cognitive and behavioral services during the reporting period. These services include interventions that address criminal thinking and antisocial behaviors. About 16 percent of participants received mental health services, and 15 percent received employment services during the reporting period examined.

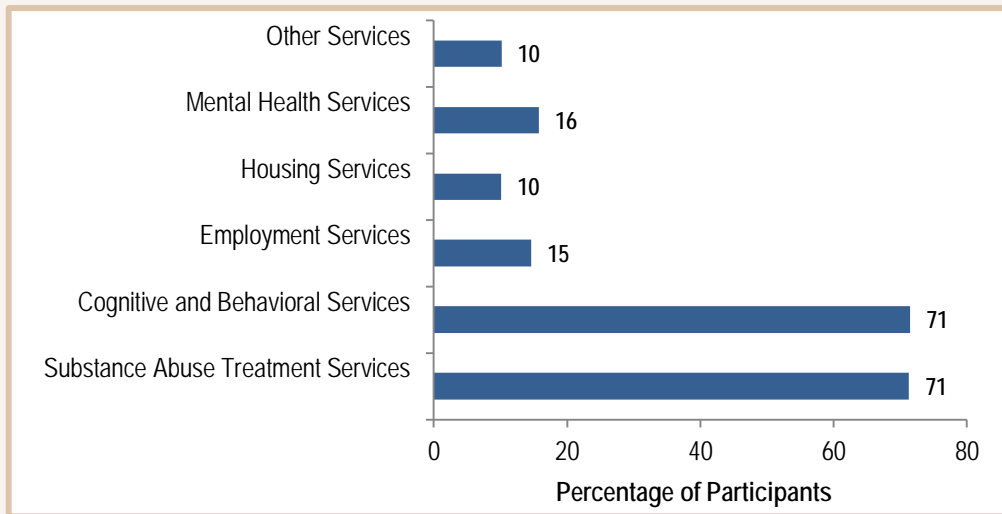


Table 5 shows the number of aftercare program participants tested for alcohol and illegal substances, and of those, the number who tested positive for illegal substance use.

Table 5. Alcohol and Illegal Substance Testing in Aftercare Programs: January–December 2013

Alcohol and Illegal Substance Testing	January–March 2013	April–June 2013	July–Sept. 2013	Oct.–December 2013
Number of Participants with Positive Test (<i>N</i>)	65	50	185	241
Number of Participants Tested (<i>N</i>)	318	531	591	975
Participants Testing Positive (%)	20	9	31	25

- During 2013, the number of participants increased, as did the number of participants tested for drug/alcohol usage. During the last reporting period examined (October–December 2013), 975 participants were administered a drug/alcohol test.
- The percentage of positive drug/alcohol tests by reporting period ranged from a low of 9 percent to a high of 31 percent.
- Previous analysis of PMT RSAT aftercare data resulted in a positive drug testing rate of about 21 percent.¹¹

Table 6. Completion Time Frames and Reasons for Not Completing Aftercare Programs: January–December 2013

Participants Who Completed Program: Time Frame	<i>N</i>	% ¹²
0 to 3 Months	92	15
4 to 6 Months	373	62
7 to 9 Months	85	14
10 or More Months	54	9
Total	604	100
Participants Who Did Not Complete Program: Time Frame		
0 to 3 Months	677	79
4 to 6 Months	122	14
7 to 9 Months	26	3
10 or More Months	34	4
Total	859	100
Participants Who Did Not Complete Program: Reasons		
Termination for a New Charge	139	16
Release or Transfer to Another Facility	32	4
Death or Serious Illness	2	0
Voluntary Dropout	216	25
Failure to Meet Program Requirements	377	44
Absconding	47	5
Other	46	5
Total	859	100

Table 6 shows the time frames during which aftercare participants exited the program (both successfully and unsuccessfully¹³) from January to December 2013. It also shows the reasons why participants left the program without completing its requirements.

- About 62 percent of participants successfully exited the program during the 4- to 6-month timeframe.
- For those participants who did not complete the program and unsuccessfully exited in 2013, 79 percent did so in the first 3 months of the program.

¹¹ Steyee (2012).

¹² Percentages may not add up to 100 percent due to rounding.

¹³ Unsuccessful exit includes those who are no longer in the RSAT program because of a new criminal charge, voluntary dropout, failure to meet program requirements, and absconding.

- The most common reasons cited for not completing the aftercare program include failure to meet program requirements (44 percent), voluntary dropout (25 percent), and termination for a new charge (16 percent).

Observations

- A total of 11,961 jail- and residential-based RSAT program participants and 604 aftercare participants successfully completed the program during the 12 calendar months of 2013.
- The successful completion rate was 73 percent for residential programs, 82 percent for jail-based programs, and 42 percent for aftercare programs.
- The time to completion for the majority of participants was no more than 9 months for jail-, residential-based, and aftercare programs. However, some differences were observed between jail- and residential-based RSAT programs. The time to completion for 90 percent of jail-based program participants was up to 6 months. The average time to completion for residential-based programs was longer, as expected. For residential-based program participants, 89 percent completed the program in up to 9 months.
- Of those who quit the program early, 85 percent of jail-based program participants did so in the first 3 months, compared with 49 percent of residential-based program participants and 79 percent of aftercare program participants.
- In 2013, more than 90 percent of participants who were assessed with a risk/needs assessment instrument exhibited high criminogenic risk and substance abuse treatment needs in all program types, with the exception of one reporting period (July–September 2013) for residential and jail-based programs.
- Other than substance abuse treatment, the most common types of services provided were cognitive and behavioral treatment services.

Key Performance Measures

Measure	Data Elements Used to Calculate Measure	Definition	Interpretation
Participants with High Criminogenic Risk and Substance Abuse Treatment Needs Jail/Residential and Aftercare	A. Number of participants assessed as having high criminogenic risks and needs B. Number of participants assessed using a risk assessment instrument % High risk = A/B	Percentage of participants identified using a valid screening/assessment instrument as having high criminogenic risks and needs.	Assesses the percentage of RSAT participants who have high criminogenic risks and needs; participants with high criminogenic risks and needs are at higher risk for reoffending compared with low- and medium-risk participants.
Successful Completion Rate Jail/Residential and Aftercare	A. Number of participants successfully completing program requirements B. Number of participants terminated for a new charge C. Number of participants who dropped out D. Number of participants who did not complete due to failure to meet program requirements E. Number of participants who did not complete for violating institutional rules (jail/residential only) F. Absconding (aftercare only) G. Number who failed for other reasons % Successful = A/(A+B+C+D+E+F+G)	Number of participants who successfully completed the program.	Assesses how many participants have successfully completed program requirements as determined by the RSAT program; can also be thought of as the graduation rate.
Participants Testing Positive for Using Illegal Substances Jail/Residential and Aftercare	A. Number of participants who tested positive for drug or alcohol use B. Number of participants tested % Positive Drug or Alcohol Test = A/B	Percentage of participants who have failed drug and alcohol tests while in the program.	Assesses how many participants continue to use substances while in the program; also assesses the use of drug and alcohol testing as a key component of the program.
New Participants with an Individualized Treatment Plan (Case Plan) Jail/Residential and Aftercare	A. Number of new participants with a case plan B. Number of new participants % Case Plan = A/B	Percent of participants who receive an individualized treatment plan upon entering the program.	Assesses the percentage of new participants entering the program who are receiving individually tailored treatment plans.
Successful Program Completers Released from Jail/Residential Entering the Community Jail/Residential Only	A. Number of participants successfully completing program requirements and released from incarceration B. Number of participants successfully completing program requirements % Case Plan = A/B	Percent of participants completing all program requirements and released from incarceration.	Assesses the percentage of successful program participants released from incarceration into their communities.