

GENERAL DISTRIBUTION

WEST VIRGINIA
DIVISION OF CORRECTIONS
& REHABILITATION

NUMBER: 453.06

EFFECTIVE DATE: 01 January 2024

SUBJECT: G.O.A.L.S. SUBSTANCE ABUSE
TREATMENT UNITS

POLICY DIRECTIVE

PURPOSE:

To provide inmates having chronic substance abuse treatment needs with intensive evidence-based programs to aid them in their recovery and relapse prevention.

REFERENCE:

WV Code §15A-5-10.

RESPONSIBILITY:

Superintendents of facilities with G.O.A.L.S. Units are responsible for enacting facility-specific Operational Procedures to ensure compliance with this Policy Directive.

CANCELLATION:

Any previous written instruction on the subject, including DCR Policy Directive 453.06, dated 14 February 2022.

APPLICABILITY:

All facilities within the Division of Corrections and Rehabilitation with G.O.A.L.S. Units. This Policy is available for general distribution and is to be made available for inmate review upon the effective date.

DEFINITIONS:

Program Manager: The G.O.A.L.S Program Manager is responsible for and oversees all referrals, curriculum, and related activities associated with the G.O.A.L.S. Unit.

SAT I: The Substance Abuse Therapist I is dedicated to the daily operations of the unit; including, but not limited to, assisting the Correctional Counselors with duties and daily programming in the unit.

SAT II: The Substance Abuse Therapist II oversees treatment planning, programming services, curriculum, groups, and other activities associated with the G.O.A.L.S. Unit.

POLICY:

- I. G.O.A.L.S. “*Getting Over Addicted Lifestyles Successfully*” Units are residential substance abuse treatment units at designated jails and correctional facilities housing inmates court-referred for substance abuse treatment. The six (6) to nine (9) month program primarily utilizes the *New Directions* curriculum by Hazelden, which is an evidence-based program commonly used for justice involved individuals.
 - A. In addition to this curriculum, the G.O.A.L.S. program utilizes additional cognitive behavioral programming geared towards enhancing problem solving skills, social skills development, anger management, and co-dependency issues.
 - B. Curriculum, groups, and activities are implemented at the discretion of the Substance Abuse Therapist II with the approval of the facility Superintendent.
- II. Participants are referred by the court system. The Director of Offender Services/designee will review the referral (**Attachment #1**) and accept if appropriate. Completed referral forms will be uploaded to Offender Information System (OIS) Document Management.
 - A. The Director of Offender Services/designee will determine eligibility of all referrals and notify the referring court within fifteen (15) business days of receiving the referral.
 1. Criteria for admission are as follows:
 - a. Nonviolent crime as determined by the Division of Corrections and Rehabilitation (DCR).
 - b. No history of violence in the past three (3) years.
 - c. Ability to participate in programming.
 - d. Disciplinary violations during incarceration will be taken into consideration.
 2. Further assessment will be required at the discretion of the SAT II or designee in order to determine overall mental health needs.
 - B. Once an inmate has been determined as eligible for the program, the SAT II will coordinate with the referring court in order to obtain an order for treatment. Once an order is received, the inmate will be placed on the unit as bed availability allows.

1. Inmates referred and assessed for the G.O.A.L.S. Unit will be placed on the unit based on their referral date, G.O.A.L.S. program order and bed availability, in addition to overall acceptance into the program.
 2. G.O.A.L.S. Units will house inmates for no less than six (6) months, nor more than nine (9) months, as stated by the treatment order provided by the courts.
- III. Inmates enrolling in the G.O.A.L.S. Unit will be required to sign an informed consent stating the risks and benefits of entering treatment (**Attachment #2**). Consent forms will be uploaded to OIS Document Management.
- A. The inmate will undergo standard facility booking procedures before being transferred to the unit.
 - B. Drug screens will be performed during admission onto the unit and at random, no less than monthly. Any presumptive positive drug screens will be sent to the lab for confirmation testing. Participants that screen positive will be locked down on the unit but will still participate in staff-led programming.
 - C. Upon intake to the unit, inmates will be screened for suicide risk and have a mental health referral completed.
 - D. Additional privileges are an integral part of the program and must be earned, not awarded based on entitlement. Superintendents will have final approval for all incentives. The following list, although not inclusive, is designed to provide guidance for the types of additional privileges that may be utilized.
 1. Ordering take-out food
 2. Additional phone privileges
 3. Increased visitation days and times
 4. Increased commissary spending limit
 5. Provision of unit library
 6. Additional recreational opportunities
 7. Large screen televisions in dayrooms
 8. Movie and/or game nights

- E. No inmate living within a G.O.A.L.S. Unit may have operational decision-making authority; nor shall any inmate have the authority to impose sanctions on another inmate.
- F. G.O.A.L.S. Unit inmates may attend other programs if it does not conflict with the unit programming or commitments. Such attendance should be approved by the G.O.A.L.S. unit team prior to the inmate's attendance.
- G. Every inmate will hold a work assignment within the unit to be assigned by the SAT I. Inmates will not perform work assignments paid or unpaid, outside of the unit.
 - 1. Each inmate will be paid \$30 monthly for their work assignments within the unit.
 - 2. The SAT I will be directly responsible, under the authority of the Superintendent, for ensuring the stipend system is not abused by inmates and that all inmates are working within the unit and their phase, thus justifying their receipt of stipends.
 - 3. Unit staff will be responsible for assigning and monitoring the completion of work assignments.
 - 4. Pay may be decreased or suspended for disciplinary issues/action.
- H. Major rule violations such as violence, sexual harassment or assault, drug use, non-compliance with unit rules, and/or non-participation in the program may result in removal from the program. The Commissioner/designee will notify the sentencing Judge to inform them that the inmate has been removed from the program.
 - 1. The Director of Offender Services must approve the removal of an inmate from the program.
 - 2. All Class I and Class II rule violations occurring within the G.O.A.L.S. Unit population will be sent to the Superintendent/designee for appropriate disposition.
 - 3. Participants that commit Class I or II violations will be subject to the facility disciplinary process to include a disciplinary hearing or referral to the Unit Behavioral Management Team (UBMT), and appropriate sanctions.
 - 4. In addition to sanctions administered by the hearing officer, the SAT II/designee may impose additional interventions such as:
 - a. Revised treatment plan
 - b. Phase adjustment

- c. Additional learning activities
 - d. Thirty (30) to sixty (60) day program extension
5. Class III rule violations should be handled internally by the G.O.A.L.S. unit team, with only informational incident reports being completed, unless otherwise directed by the Superintendent/designee. Sanctions may include, but are not limited to:
- a. Loss of privileges
 - b. Loss of one (1) month pay
 - c. Phase adjustment
 - d. Thirty (30) to sixty (60) day program extension
 - e. Additional learning activities
- I. G.O.A.L.S. Unit programming will process through a structured phase system to monitor and assess inmate progress while on the unit.
- J. Should an inmate refuse to participate in the G.O.A.L.S. program, he/she will be required to complete an Informed Consent/Refusal Form (**Attachment #2**).
- 1. Completion of this form and submission to the SAT II for further communication to the referring court, must be completed by the SAT I or designee.
 - 2. An inmate may elect to withdraw from the program voluntarily after enrollment, without threat of disciplinary action. In this case, the referring court will be notified of the voluntary withdrawal from the program.
- IV. An inmate may be removed from the unit, if after fully exhausting all therapeutic tools and methods of motivational enhancement have failed, staff perceives that the inmate's behavior or level of participation is negatively impacting the programming of other inmates living in within the unit. However, some cases will require a case-by-case evaluation where this will not be applicable. All removals from the program must be approved by the Director of Offender Services.
- A. The Commissioner/designee must be notified of the unsuccessful completion.
 - B. Documentation to the court must also be sent notifying the referral source of the discharge and reasoning.
 - C. Inmate will be returned to general population.

- V. Isolation of the unit population from the general population is required, except in exigent circumstances.
- A. In cases where complete isolation cannot be achieved, contact between the unit population and general population inmates should be minimized and appropriately supervised.
 - B. Separate space will be provided for G.O.A.L.S. Unit inmates to attend substance abuse programming.
 - C. Units will operate on a programs/treatment staff-to-inmate ratio of 1:16.
- VI. Staff working within or having direct contact/supervision of G.O.A.L.S. Unit inmates will participate in general training.
- A. The following staff are required to attend G.O.A.L.S. Basic Training as entry-level training to work with G.O.A.L.S. Unit populations.
 - 1. All staff assigned to work within the housing unit.
 - 2. All Shift Commanders.
 - 3. Chief Correctional Officers, department heads, mid-level managers, and/or Unit Managers, at the discretion of the Superintendent.
 - B. All non-uniform programs staff working within the G.O.A.L.S. Unit will be required to attend Skills Building Training and/or Professional Development as directed by the Director of Offender Services/designee.
- VII. Scheduled releases of G.O.A.L.S. Unit inmates should take place during the normal business hours of 8:00 a.m. to 5:00 p.m., including weekends and holidays, unless otherwise court ordered. In order to assist with appropriate aftercare linkages, a G.O.A.L.S. staff member when available will escort the inmate out of the secure area.
- VIII. Inmates who have successfully completed the G.O.A.L.S. program, including an approved release and reintegration plan will receive a completion certificate, reintegration plan and discharge recommendations. These will be uploaded to OIS Document Management as appropriate and the SAT I will be responsible for sending copies to the referring court system. The court system may then offer a reconsideration hearing at the court's discretion.
- A. Due to the intensive level of individual and group programming, the DCR allows the G.O.A.L.S. program to satisfy the requirement for both Residential Substance Abuse Treatment (RSAT) and all other substance use disorder classes.

B. In accordance with WV Code §15A-5-10 inmates who have successfully completed the G.O.A.L.S. program shall be deemed to have completed the West Virginia DUI Safety and Treatment Program for purposes of reinstatement of driving privileges.

ATTACHMENT(S):

- #1 Referral Form
- #2 Informed Consent/Refusal Form

APPROVED SIGNATURE:  
William K. Marshall III, Commissioner Date

G.O.A.L.S. (Getting Over Addicted Lifestyles Successfully)
Substance Abuse Treatment Unit
Referral Form

Email completed form to Medina.S.Prue@wv.gov

OFFENDER INFORMATION

Name/OID#	
Date of Birth	
Current Facility	

CASE INFORMATION

Referring Judge (please print)	
Case Number & County	
Current & Previous Charges (Convictions only; include all felonies, fines, misdemeanors, etc.)	
Attorney Contact Information (Include printed name & email)	

SUBSTANCE USE HISTORY INFORMATION

Substance Use History (include all substances used & date of last use)	
Substance Use Treatment History (Include type of treatment & dates of service)	
Current Suicidal or Homicidal Ideation (include any within the last 12 months)	_____ No _____ Yes If yes please explain:
History of Violence (include all domestic battery and/or domestic violence)	
Additional Information (attach additional page if needed)	

This is a referral only. It does not guarantee acceptance into the program. Once reviewed, this form will be returned to the Judge with acceptance or denial of entry into the G.O.A.L.S. Program.

WVDCR USE ONLY

Reviewed By:	Signature:
Date of Review:	
Status	Accepted <input type="checkbox"/> Denied <input type="checkbox"/>
Scheduled Date of Admission	

G.O.A.L.S. (Getting Over Addicted Lifestyles Successfully) Substance Abuse Treatment Unit

Informed Consent/Refusal Form

Inmate Name: _____

OID # _____

Date: _____

To the participant: You have the right as a participant in the G.O.A.L.S. program to be informed about your condition, and recommendations for treatment, knowing the risks and hazards involved. At this point, you have been recommended to participate in a 6-month residential substance use treatment program. This consent form is simply an effort to obtain your permission to begin the evaluation and participation in the G.O.A.L.S. Unit. As part of the G.O.A.L.S. Unit, you will be expected to attend group therapy, individual therapy, and self-help meetings. In addition, you will be expected to participate and act in a higher level of conduct than the general population of the facility. The goal of the program is to reduce the risk of relapse and eliminate the return to criminal behavior. In addition to this, the goal of treatment is to return to being a productive functioning member in your family, workplace and community.

As an active participant of the G.O.A.L.S. Unit I understand that I have waived my right to any parole hearings while participating on the unit.

Participant Signature: _____ Date: _____

After the explanation and overview of the G.O.A.L.S. Unit, I give my permission and consent to the program recommended and agree to participate in such a program.

Participant Signature: _____ Date: _____

G.O.A.L.S. Staff Signature: _____

Refusal:

I am aware that it has been recommended that I participate in the G.O.A.L.S program. I have been advised of the nature and content of the program and the benefits and risks of the program. I understand that my refusal to participate will be communicated to the referring court systems. At this time, I do not wish to participate in the program. I understand that if I change my mind, I may notify the unit team, and my admission will be subject to G.O.A.L.S. Unit approval, court approval and treatment bed availability.

Inmate Signature: _____ Date: _____

G.O.A.L.S. Staff Signature: _____