

Drug Offender Reform Act

Smarter Sentencing + Smarter Treatment = Better Outcomes and Safer Neighborhoods

Utah Substance Abuse Advisory (USAAV) Council

DORA Program Report to the Office of the Legislative Fiscal Analyst

September 1, 2014

Purpose of the Report

The *DORA Program Report to the Office of the Legislative Fiscal Analyst* is submitted in compliance with the following intent language passed during the 2014 General Session of the Utah Legislature:

The Legislature intends the Utah Substance Abuse Advisory Council report to the Office of the Legislative Fiscal Analyst by September 1, 2014 its recommendations regarding the best use of current DORA funding in treating drug abusers in response to the November, 2013 final multi-year study of DORA by the Utah Criminal Justice Center at the University of Utah that found “DORA did not have a significant impact on participants when compared to similar offenders on traditional probation and parole” and also in regard to the approved “Guidelines for the Implementation of DORA-Funded Services for Probationers” which states that “Programs will . . . ensure DORA funding is utilized for evidence-based substance abuse treatment and supervision strategies.” The Legislature further intends that if the Utah Substance Abuse Advisory Council recommends continued funding for current DORA programs, it will provide specific and detailed explanations in its report to the Legislative Fiscal Analyst demonstrating how its recommendation is consistent with its guideline that funding be used for evidence-based substance abuse treatment and supervision strategies.

S.B. 8 – Social Services Base Budget, Item 38, Lines 913-932.

USAAV Council DORA Funding Recommendations

- Recommendation 1:** The USAAV Council recommends the continuation of ongoing funding for DORA in FY 2016 at the current appropriation level of \$3,654,000.
- Recommendation 2:** The USAAV Council recommends funding the full service model, including treatment and intensive supervision.¹ The Council further recommends the funding be utilized to provide community-based substance use disorder treatment (including screening, assessment, case management and drug testing) and intensive correctional supervision for felony probationers only.
- Recommendation 3:** The USAAV Council recommends implementation of Governor Herbert’s *Healthy Utah Plan*, which will provide considerable new resources to enable those currently uninsured to obtain health care coverage, including treatment for substance use disorders.

¹ If the Legislature decides to increase funding for DORA in FY 2016 or in the future, the USAAV Council recommends the appropriation employ the following funding formula: 66% to the Division of Substance Abuse and Mental Health for treatment; 32% to the Department of Corrections for intensive supervision; and 2% to the Courts.

Rationale for Continued Funding of DORA

The 2013 Utah Criminal Justice Center DORA Report

While the 2013 *Drug Offender Reform Act: DORA Statewide Report*² prepared by the Utah Criminal Justice Center (UCJC) at the University of Utah concluded that its “post-exit recidivism analyses suggested that DORA participants’ outcomes were not significantly different from those of the matched comparison group,” it must be noted that the study did have some notable limitations, which were also addressed in the UCJC Report as follows:

The 2013 Report indicates “**it is possible that the comparison group may have received similar types and levels of treatment services as the DORA group.** DORA was implemented as a legislative and policy change, rather than a discrete criminal justice program. As such, it may be difficult to implement the model with fidelity and/or limit the diffusion of its treatment effects. For example, AP&P refers many of their supervisees to community-based treatment providers and resources.” In fact, data obtained from the Division of Substance Abuse and Mental Health following the release of the 2013 Report indicated nearly 66 percent of probationers and 50 percent of parolees in the matched comparison group had received substance use disorder treatment in publicly-funded programs during their comparison supervision period, and likely from the same programs and providers serving the DORA participants. The numbers are even larger when comparison group offenders are examined for treatment participation beyond their comparison supervision period, with nearly 80 percent of parolees and 72 percent of probationers having received substance use disorder treatment within five years of the comparison period.

The 2013 Report suggested “**the introduction of DORA may itself have had an impact on the way that AP&P agents worked with all supervisees, not just DORA.** It is also possible that AP&P practices in general have evolved to be more in line with the evidence-based principles of DORA as agents and treatment providers anecdotally shared experiences on what practices worked.”

Furthermore, the UCJC did *not* recommend discontinuation of DORA on the basis of these findings, but rather confirmed **the DORA model is sound and utilizes evidence-based principles** (e.g., combining substance use disorder treatment with intensive supervision), and provided research-based suggestions to improve both DORA implementation and outcomes:

“The findings of the current report confirm those from previous years, and show that higher risk participants demonstrated worse outcomes than lower risk ones. **As currently implemented, DORA may not have sufficient intensity or breadth of treatment targets to adequately address the dynamic needs of the high risk population it serves. DORA’s exclusive focus on substance abuse, to the exclusion of other criminogenic risk factors, may be insufficient to reduce recidivism among a high-need group of offenders.**”

“The current report provides an overview of the impact of DORA, which is a statewide policy initiative. As such, **the analysis does not shed light on differential offender outcomes as a result of program-level differences by treatment provider and AP&P agency.** Future analyses

² The *Drug Offender Reform Act: DORA Statewide Report, November 1, 2013 Final Report* is available on the UCJC website at: http://ucjc.utah.edu/wp-content/uploads/DORASTatewide_2013Final_103113.pdf

should consider the impact of program-level factors on offender outcomes, including: staff training, program philosophy, treatment fidelity, and targeting appropriate and sufficient criminogenic needs.”

The USAAV Council recognizes the need to improve DORA outcomes and is in the process of executing strategies to address the UCJC Report’s recommendations for strengthening DORA implementation. As we undertake these steps toward improvement, we recommend sustaining the DORA appropriation at the current level, with the possibility of recommending increased funding in the future.

Evidence-Based Treatment and Supervision Strategies

The USAAV *Guidelines for Implementation of DORA-Funded Services* require the utilization of evidence-based substance use disorder treatment and supervision strategies. Currently, compliance with this requirement is promoted in several ways, including the following: 1) a description of the evidence-based strategies to be utilized must be included in the DORA annual plan submitted by each local DORA program to the USAAV Council; 2) DORA funding is released to local programs only upon agreement to adhere to the Guidelines; 3) oversight and monitoring of program adherence to the annual plan is provided by the Division of Substance Abuse and Mental Health and Department of Corrections; and 4) a description of the evidence-based strategies implemented must be included in the DORA annual report submitted to the USAAV Council.

As a next step in ensuring the utilization of evidence-based treatment and supervision strategies, the USAAV Council’s DORA Oversight Committee has recommended implementation of the **Correctional Program Checklist** as a quality improvement initiative. This initiative, which is described in more detail in the following section, will provide the DORA partner agencies and providers with a better understanding of evidence-based practices and technical assistance to ensure effective implementation. The focus will then be upon targeting and strengthening any weaknesses in DORA implementation through a comprehensive technical assistance and quality improvement plan.

Implementation of a DORA Technical Assistance and Quality Improvement Process: The Evidence-Based Correctional Program Checklist

Prior to the completion of the 2013 UCJC Report, the USAAV Council’s DORA Oversight Committee had already begun work to improve DORA outcomes. Toward this end, the Committee recommends utilization of the **Correctional Program Checklist (CPC)**. Unlike the UCJC annual DORA reports, the CPC is not an outcome evaluation. As explained by the Utah Criminal Justice Center, the CPC is an *evidence-based quality improvement process* “developed for assessing correctional intervention programs, and is used to ascertain how closely correctional programs meet known principles of effective intervention. The CPC is divided into two basic areas: content and capacity. The capacity area is designed to measure whether a correctional program has the capability to deliver evidence-based interventions and services for offenders. The content area focuses on the substantive domains of offender assessment and treatment, and the extent to which the program meets the principles of risk, need, responsivity³ and treatment.” The CPC process is designed to answer three basic questions: **Where is the program now? Where does the program need to go? How can the program improve?**

³ “Risk” is the likelihood that an individual will engage in new criminal activity; “Needs” are characteristics (such as antisocial attitudes, beliefs, and thinking patterns) or circumstances (such a person’s friends or family dynamics) that research has shown are associated with criminal behavior, but which can be modified; and “Responsivity” is the concept of tailoring services to individuals’ distinct characteristics, service needs, motivation, and learning styles.

The CPC has been utilized successfully with other adult and juvenile justice programs in Utah and has been found to be very helpful in identifying program strengths, weaknesses, and areas for improvement; as well as promoting evidence-based practices. It will also provide an in-depth analysis of the program-level factors identified by the UCJC Report, including staff qualifications and training; utilization of evidence-based practices for treatment and supervision, including sufficient targeting of criminogenic risks and needs; and fidelity of program implementation.

The Commission on Criminal and Juvenile Justice (CCJJ) will contract with the University of Utah Criminal Justice Center (UCJC) to conduct the CPC. The DORA partner agencies – CCJJ, Department of Corrections, and Division of Substance Abuse and Mental Health – will share the \$144,000 cost for the CPC with funds from within their existing budgets. *No DORA funding will be utilized for this process.* The CPC process is scheduled to begin in January 2015 and will be completed by July 2016. Following completion of the CPC assessment with the eight local DORA programs currently receiving funding, including both the treatment and supervision components, the UCJC will continue to work with the state-level DORA partner agencies to provide technical assistance and training for local DORA program providers as they develop and implement quality improvement plans. As a result, it is anticipated future DORA outcome studies will show a greater impact on reducing substance use and recidivism. At the completion of this process, the USAAV Council, in collaboration with the DORA partner agencies, may recommend an increase in DORA funding to expand the program statewide once again and to address the needs of additional correctional populations (e.g., parolees).

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