

2019 ANNUAL REPORT



GEO REENTRY SERVICES

SHASTA DAY REPORTING CENTER
In Partnership with Shasta County Probation

APRIL 2019

PRESENTED TO CHIEF OF SHASTA COUNTY PROBATION
TRACIE NEAL

SECTION 1:

EVALUATION OF SERVICES

The Shasta Day Reporting Center Celebrated its Sixth Anniversary in April of this Year.

The Shasta County DRC is pleased to continue to work in partnership with Shasta County Probation and the community to provide participants with effective and cost-efficient programming and services designed to address criminogenic needs, promote participant reintegration into the community, and reduce the risk of recidivism. We are deeply committed to developing and enriching our collaborative relationships with Probation and community providers to help participants transition from life in the criminal justice system to a successful life in the community.



The Shasta DRC is dedicated to advancing the art and science of Evidence-Based Principles (EBP) and putting the “What Works” correctional programming research into practice. We understand the complexities of operationalizing the principles of effective intervention, and we continuously work towards enhancing our interventions.

This past year was a difficult year for Shasta County as we battled the Carr Fire, which became the sixth most destructive fire in California history (soon after, the seventh). The DRC worked to provide a safe and stable place for participants where they could have a place to talk through their concerns and emotions and also find some normalcy. We are proud of the community coming together to support one another during this difficult time.

At the end of 2018, we engaged national expert Dr. Natalie Pearl Ilarraza on a technical assistance project to analyze the DRC program, develop solutions to ongoing challenges, and began piloting new approaches to improve outcomes. Our cycle of innovation includes evaluating the effectiveness of implemented changes and analyzing corresponding outcomes to determine what works for Shasta County DRC participants. We look forward to implementing the rest of these changes in July 2019.

Throughout the Annual Report, you will learn about the highlights from the last year. From implementing new strategies, increasing DRC staff, to enhancing our Alumni Events, the year kept us busy!

Ongoing activities such as service delivery refinement and continuous staff training are key components to persistently improving program outcomes. The Shasta DRC remains flexible, listens to County feedback, and adjusts program activities accordingly in order to best accommodate the specific needs and goals of participants, Probation, and the DRC. We are committed to delivering best practices and correctional programming innovations to Shasta County and we appreciate our partnership. Thank you for allowing us to be a part of changing behavior, changing lives.

What part of the program has caused the most positive change in your life?

“The welcoming atmosphere and amazing staff members who really have an interest to help every individual in our daily lives and to be successful. The DRC is my 'safe haven’.”
- Anonymous Participant

Participants Served

Combined, the DRC and in-custody programs have provided reentry and behavior change programming to 975 unique participants. The average length of stay for participants discharged over the past year was 191 days.

The DRC has served 930 unique participants to date.

DAY REPORTING CENTER	2013/14	2014/15	2015/16	2016/17	2017/18	2018/19
Individuals Served	116	203	279	294	371	336 ¹
Active Participants, year end	52	68	79	98	146	112
Aftercare Participants, year end	7	6	10	13	11	9
Participants Completing Program	-	24	39	22	37	36
Participants Discharged	57	125	190	168	214	207
Male / Female Participant Ratio	80%/20%	82%/18%	79%/21%	79%/21%	79%/21%	82%/18%

IN-CUSTODY	2013/14	2014/15	2015/16	2016/17	2017/18	2018/19
Individuals Served	-	-	19	120	100	-
Active Participants, year end	-	-	9	20	0	-
Participants Discharged	-	-	10	100	100	-
Participants Continuing Services at the DRC	-	-	7	54	67	-
Participants Not Continuing Services	-	-	3	46	33	-
Male / Female Participant Ratio	-	-	84%/16%	80%/20%	81%/19%	-

Active Count by Phase



Services Provided

Putting effective correctional interventions into place involves ensuring participants receive the right amount of dosage. High criminogenic needs require high levels of treatment and moderate needs require moderate treatment. The DRC has over 300 available hours of dosage to offer participants throughout their length of stay.

¹ Includes 8 participants on authorized leave while in-custody at the end of the year

Below are some of the individual and group services the DRC offers participants. All services are tailored to the unique individual and based on the areas of their life most likely to cause them to recidivate.

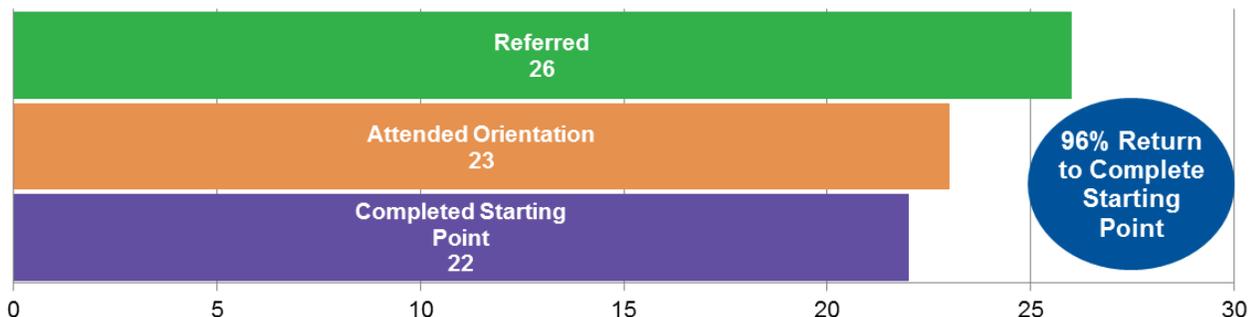
Services Available at the DRC



Impact: Pilot Phase 1 Enhancements to the DRC Starting Point Process

Starting in February 2019, the DRC began piloting a new approach to the Starting Point and Orientation process. Since the beginning of this project, 26 total participants have undergone the new process. Of those, 85% successfully completed both Orientation and the Starting Point process within a three-week period, including the participants who received second and third referrals. We are especially excited to see that of the 23 who attended the Orientation, 22 came back to the program to complete the Starting Point process, resulting in a 96% completion rate.

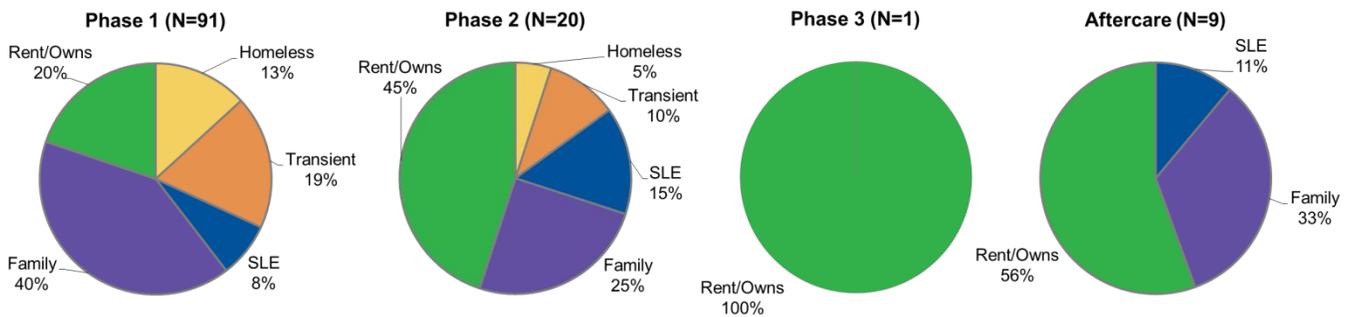
REFERRALS	# Referred	# Attended Orientation	# Completed Starting Point	% Completing Starting Point After Attending Orientation
1 st Referral	26	18	18	100%
2 nd Referral	5	4	3	75%
3 rd Referral	1	1	1	100%
TOTAL		23	22	96%



The most promising part of this new process is that the Orientation Group attendance rate has significantly increased, from 31% in the last quarter of 2018 to 72% since the pilot started. In addition to continuing to track Orientation Group attendance data, we will also be measuring to see if this new process impacts Phase 1 completion rates.

Impact: Housing Stability

The population referred to the DRC has limited independent housing. In preparation for this report and to measure change in future years, **the DRC took a current snapshot of housing by phase** (as of April 7, 2019). We found that 19% of our current Phase 1 participants rent or own. As participants progress through the phases, it appears that there is an increase in self-supported living situations. We believe that the changes to the Phase 1 process may also help impact this. Housing stability will continue to be evaluated as we assess the piloted Phase 1 changes.



LIVING SITUATION	DEFINITION
Homeless	Participant does not have a residence of any classification
Transient	Participant lacks stable ties to a permanent residence
Sober Living Environment (SLE)	Participant lives in a Sober Living Environment in Shasta County
Family	Participant lives in a positive environment with a family member or relative
Rents/Owns	Participant rents/owns the home/apartment in which they are living

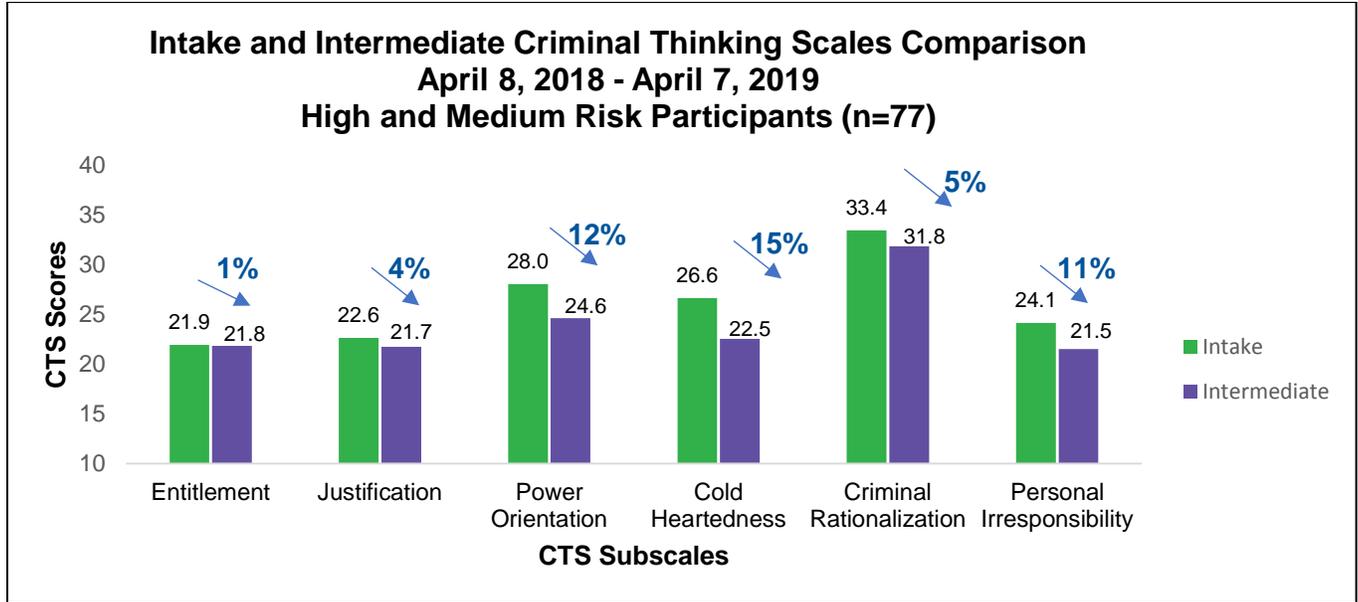
Impact: Criminal Thinking Reduction

Why is a Reduction in Criminal Thinking Important?

Criminal thinking domains, such as antisocial cognitions and antisocial attitudes, are frequent targets for change in correctional treatment, and are described in current theories of criminal behavior. The research on “What Works” to reduce recidivism indicates that antisocial cognition and antisocial attitudes (criminal thinking) are among the top three risk factors as drivers of recidivism. The Texas Christian University Criminal Thinking Scales (CTS), a reliable and validated instrument, measures the effect of DRC’s programming on antisocial cognition and

attitudes. The results of this assessment indicate that the Shasta DRC reduces criminal thinking patterns as measured by the CTS, and therefore lowers the potential for future recidivism.

Summary of Results



Shasta County DRC CTS Results from April 8, 2018 – April 7, 2019

Criminal thinking research demonstrates that targeting antisocial cognitions, values, and beliefs can impact criminal behavior. The results shown above indicate that the Shasta County DRC reduced criminal thinking patterns—as measured by CTS scores—and therefore lowered participant potential for future recidivism.

Criminal Thinking Scales

CTS ELEMENTS	DESCRIPTION
Entitlement	Focuses on a sense of ownership and privilege. High scores are associated with the offender’s belief that the world “owes them” and they deserve special consideration.
Justification	Refers to patterns of thought that minimize the seriousness of antisocial acts and by justifying actions based on external circumstances. High scores may be associated with perceived social injustice.
Power Orientation	Measures the need of power and control. High scores are associated with higher levels of aggression and controlling behaviors.
Cold Heartedness	High scores reflect a lack of emotional involvement.
Criminal Rationalization	High scores on this scale are associated with negative attitude towards the law and authority figures.
Personal Irresponsibility	Assesses the degree to which an offender is willing to accept ownership for criminal actions. Therefore, high scores are associated with non-acceptance of criminal actions and often blaming others.

Program Measures and Evaluation

To be truly evidence-based, data must be used to monitor, evaluate, and guide improvements to program performance. This performance feedback cycle can take place on a variety of levels. At the most macro level, outcome studies are conducted to determine if a program is having an impact on recidivism or another outcome measure. This is a measure of program “outputs” or the end results of a program. In addition to measuring outputs, it is important to measure program “input.” This refers to process evaluations in which the program content and delivery methods are measured for alignment to current research and evidence-based approaches.

We use three common methodologies to monitor program input and output to ensure we are attentive to both program health and success:

- Fidelity Program Audits (Input)
- Intermediate Outcomes (Output)
- Recidivism (Output)

Fidelity Program Audits are often referred to as program evaluations. This type of audit helps determine whether a program adheres to the principles of effective intervention. Two of the most well-known and respected program evaluation tools are the Correctional Program Assessment Inventory (CPAI) and the Correctional Program Checklist (CPC).

The Shasta County DRC went through a CPC during the Winter 2017 and scored a “High Adherence” on the evaluation. In addition to our use of the formalized CPC, our Quality Assurance team developed an internal EBP Fidelity Review. The most recent EBP Fidelity Review from June 2018 scored the Shasta County DRC at a 99% for adherence to the principles of effective intervention.

During the EBP audit, 85% of the program staff and 15% of the participants were interviewed. The EBP Program Fidelity Review was performed by a GEO Reentry Manager of Program Performance.

Actuarial Risk/Needs	100%
Intrinsic Motivation	100%
Target Intervention	96%
Skill Train	94%
Contingency Management	100%
Community Support	100%
Measure Practices	100%
Provide Feedback	100%
Leadership	100%
Treatment Team	100%
Participant Satisfaction	94%
Total	99%

EBP FIDELITY REVIEW CATEGORY	DESCRIPTION
Actuarial Risk/Needs	<ul style="list-style-type: none"> • Facility utilizes scientific, validated assessment instruments and incorporate results into the participant’s individualized treatment plans.
Intrinsic Motivation	<ul style="list-style-type: none"> • Program staff receives training on Motivational Interviewing techniques in order to effectively engage with participants.

Target Intervention	<ul style="list-style-type: none"> • Treatment plans are created targeting criminogenic needs as identified through the assessment process. • Individual cognitive behavioral treatment counseling sessions are provided and focus on criminogenic needs.
Skill Train	<ul style="list-style-type: none"> • Treatment group model uses behavioral practice to build skills.
Contingency Management	<ul style="list-style-type: none"> • Behavior modification system is in place focusing on four positive responses targeted for pro-social behavior to every one negative consequence for non-compliance.
Community Support	<ul style="list-style-type: none"> • The program partners with community providers to be able to offer helpful resources and pro-social community support to participants. • The program offers a Continuum of Care to support program participants post completion of the program.
Measure Practices	<ul style="list-style-type: none"> • The program tracks key performance indicators (KPI) to monitor, measure and report program outcomes.
Provide Feedback	<ul style="list-style-type: none"> • Program leadership provides ongoing performance evaluations and feedback to staff. • The program offers opportunities for participants to provide feedback about their programming to measure participant satisfaction.
Leadership	<ul style="list-style-type: none"> • Leadership provides ongoing training, support and coaching in staff's professional development.
Treatment Team	<ul style="list-style-type: none"> • Staff receive ongoing training and demonstrate technical knowledge and skills.
Participant Satisfaction	<ul style="list-style-type: none"> • Staff identify and are responsive to participant motivation levels. • Participants have buy-in to the staff and the program.

The Shasta DRC scored a 99% on their EBP Fidelity Review. The two recommendations that came from the review are as follows:

Target Intervention

Recommendation: The Shasta DRC could benefit from piloting an MRT group for those with high anxiety or severe substance abuse issues. The group should maintain fidelity to the MRT curriculum and have a smaller group size with a maximum of six participants. This group may help with participants that have trouble presenting in front of large groups and those who need more attention due to substance abuse issues.

Action: The Shasta DRC began piloting in April 2019, an MRT group for those with high anxiety and/or severe substance abuse issues. Group attendance will be tracked and measured to evaluate impact and provide ongoing outcomes of this pilot.

Skill Train

Recommendation: Treatment staff that facilitates MRT groups should undergo refresher training on Learning Management System (LMS). The training should be followed by a coaching session from the Program Performance team.

Action: All staff trained to facilitate MRT undergo annual refresher trainings through LMS. In addition, the Program Manager will lead MRT step refreshers during team meetings to review MRT steps as a group and follow-up to the staffs LMS training.

SECTION 2:

ANALYSIS OF PROGRESS-ESTABLISHED GOALS & OUTCOMES

Active Participants Program Count

PROGRAM COUNT												
	Target	6.30.14	12.31.14	6.30.15	12.31.15	6.30.16	12.31.16	6.30.17	12.31.17	6.30.18	12.31.18	4.7.19
DRC	110	49	71	70	75	71	103	93	133	144	127	112
In-Custody	-	-	-	-	-	5	17	18	-	-	-	-

Starting in late July 2018, the Carr fire greatly impacted Shasta DRC program operations. Despite remaining open during this difficult time, not all participants were able to report for services. Referrals to the DRC were also diminished until county operations returned to normal.

Since the summer of 2018, Shasta Probation has worked with the DRC to make quality referrals that focus on participants who are appropriate for DRC Services. In addition, the Shasta County DRC is working to increase participant buy-in at the beginning stages of the program by piloting program enhancements.

Discharges

The Shasta County DRC program discharges are broken down into three broad categories:

1. **Completions:** Completed the program (i.e. completed program requirements)
2. **Neutral:** Services were discontinued to address alternate needs (i.e. address stability factor such as mental health or highly dependent substance abuse)
3. **Non-Completions:** Participant failed to meet program requirements (i.e. absconded or discharged from program or sentenced to incarceration)

DISCHARGES												
	Target	6.30.14	12.31.14	6.30.15	12.31.15	6.30.16	12.31.16	6.30.17	12.31.17	6.30.18	12.31.18	4.7.19
Completion	26%	7%	23%	19%	14%	21%	8%	14%	13%	15%	13%	15%
Neutral	23%	7%	28%	24%	23%	24%	18%	21%	22%	23%	19%	22%
Non-Completions	51%	86%	49%	57%	64%	55%	74%	65%	65%	62%	68%	63%

Graduates

GRADUATION											
	Target	6.30.14	12.31.14	6.30.15	12.31.15	6.30.16	12.31.16	7.27.17	1.18.18	8.22.18	3.7.19
Graduates	18	6	8	16	18	8	15	14	17	13	10

*As of 2018 Annual Report we included actual Transition Celebration dates in lieu of reporting period.

Attendance

CHECK-IN ATTENDANCE											
	Target	6.30.14	12.31.14	6.30.15	12.31.15	6.30.16	12.31.16	12.31.17	6.30.18	12.31.18	4.7.19
Phase I	77%	72%	77%	75%	68%	72%	75%	69%	65%	69%	70%
Phase II	86%			84%	80%	88%	91%	80%	82%	83%	81%
Phase III	90%			91%	77%	88%	91%	88%	91%	87%	88%

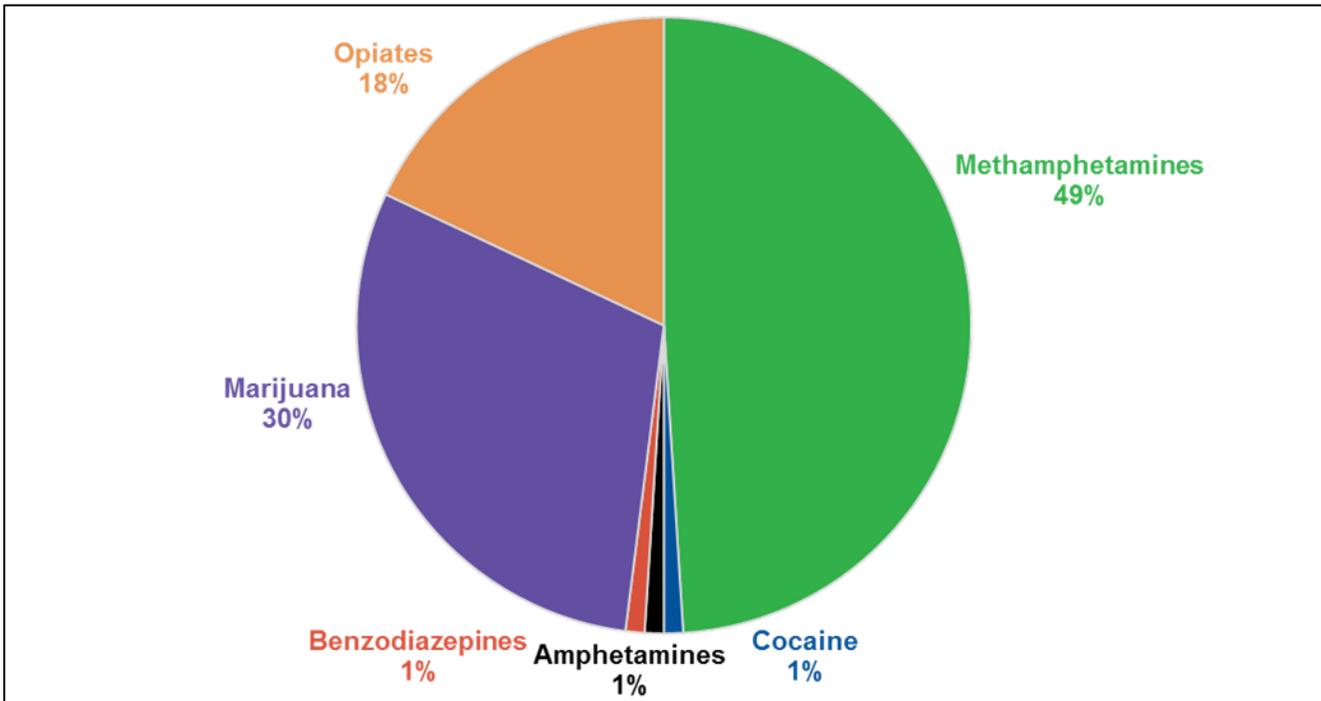
GROUP ATTENDANCE											
	Target	6.30.14	12.31.14	6.30.15	12.31.15	6.30.16	12.31.16	12.31.17	6.30.18	12.31.18	4.7.19
Phase I	64%	69%	63%	60%	44%	52%	47%	43%	34%	29%	30%
Phase II	76%			74%	68%	75%	78%	71%	75%	68%	67%
Phase III	85%			97%	81%	78%	92%	82%	85%	72%	91%

INDIVIDUAL COGNITIVE BEHAVIORAL THERAPY (ICBT) ATTENDANCE											
	Target	6.30.14	12.31.14	6.30.15	12.31.15	6.30.16	12.31.16	12.31.17	6.30.18	12.31.18	4.7.19
Weekly	72%	66%	78%	69%	60%	65%	64%	60%	52%	52%	62%
Bi-Weekly	76%	62%	80%	74%	80%	94%	90%	88%	90%	79%	87%

Sobriety

DRUG TEST OUTCOMES											
Clean Tests											
	Target	6.30.14	12.31.14	6.30.15	12.31.15	6.30.16	12.31.16	12.31.17	6.30.18	12.31.18	4.7.19
Phase I	41%	33%	47%	43%	28%	29%	41%	23%	20%	23%	21%
Phase II	73%	26%	69%	66%	63%	82%	91%	62%	63%	55%	56%
Phase III	85%	-	100%	83%	80%	77%	94%	89%	89%	80%	84%
Missed Tests											
	Target	6.30.14	12.31.14	6.30.15	12.31.15	6.30.16	12.31.16	12.31.17	6.30.18	12.31.18	4.7.19
Phase I	32%	26%	27%	27%	42%	42%	29%	30%	29%	34%	28%
Phase II	19%	34%	16%	25%	22%	16%	3%	23%	21%	22%	19%
Phase III	8%	-	0%	10%	20%	12%	6%	9%	6%	10%	14%
Positive Tests											
	Target	6.30.14	12.31.14	6.30.15	12.31.15	6.30.16	12.31.16	12.31.17	6.30.18	12.31.18	4.7.19
Phase I	27%	41%	27%	30%	29%	29%	29%	47%	51%	43%	51%
Phase II	8%	40%	16%	9%	15%	3%	5%	15%	16%	23%	25%
Phase III	7%	-	0%	8%	0%	11%	0%	2%	5%	10%	2%

Positive Drug Test by Type



The ratio of drugs participants test positive for have remained largely static over the past three years. Methamphetamines continues to be the most prevalent drug detected in urinalyses, followed by marijuana and opiates.

POSITIVE DRUG TESTS BY TYPE						
	2013/14	2014/15	2015/16	2016 /17	2017/18	2018 /19
Methamphetamines	45%	51%	40%	47%	51%	49%
Marijuana	41%	34%	34%	34%	31%	30%
Opiates	9%	13%	16%	14%	14%	18%
Benzodiazepines	>1%	1%	2%	2%	3%	1%
Amphetamines	3%	>1%	6%	2%	1%	1%
Cocaine	1%	>1%	1%	1%	>1%	1%

Substance Abuse Programming

The majority of the participants at the DRC struggle with substance abuse. In response, we are proactive in identifying a responsive approach to treatment to help participants obtain sobriety. This is done through a variety of strategies and partnerships.

In the initial stages of the DRC, participants undergo a substance abuse assessment that aids in creating an individualized behavior change plan. Establishing a professional therapeutic alliance with the participant allows DRC staff to identify the drivers of a participant’s substance usage, therefore having a greater chance of the individual sustaining long term success with sobriety.

Every participant assessed and recommended for substance abuse treatment will also complete a relapse prevention plan. This intervention supports the participant’s ability to further understand their substance usage and construct a foundational plan to obtain resources, identify goals, build skills, and establish a support system.

The DRC staff and probation officers communicate daily about participant barriers and progress and have established a strong collaborative partnership to provide timely and supportive resources to participants. Probation officers attend a variety of DRC services and events to offer additional support and reinforcement, including weekly case staffings, participant one-on-one with their Case Manager, and monthly sobriety recognition events.

Substance Abuse ICBTs

To respond to the ongoing participant substance abuse issues, the DRC has begun providing participants the opportunity to receive additional, personalized substance abuse dosage in SA ICBT sessions in addition to onsite treatment groups. During these sessions, the participant meets one-on-one with a DRC Substance Abuse Counselor to work through any issues and further address needs on an individual basis.

Substance Abuse Counselor and Case Manager Collaboration

The DRC has also adopted a collaborative staffing model to better address participants with substance abuse issues. Each week the DRC Substance Abuse Counselors meet with every caseload carrying staff member to review the substance abuse status and needs of every participant. Through these collaborative meetings the Substance Abuse Counselor and Case Manager discuss participant drug screen results and how to respond based on the participants identified stage of change. Further, the staff are able to work together to identify how to best support the participant in making progress toward sobriety.

Education and Employment

We continue to see strong improvements in employment from Phase 1 to Phase 3.

EDUCATION/EMPLOYMENT RATE (Does not include SSI and AC)											
	Target	6.30.14	12.31.14	6.30.15	12.31.15	6.30.16	12.31.16	12.31.17	6.30.18	12.31.18	4.7.19
Phase I	33%	52%	57%	28%	33%	26%	33%	38%	44%	41%	49%
Phase II	70%			56%	57%	78%	79%	92%	60%	69%	75%
Phase III	87%			80%	82%	96%	78%	100%	92%	100%	100%

Employment Assessment and Individual Employment Plan (IEP)

DRC staff use an internal employment assessment and the WorkKeys Fit and Talent assessments to gather information on participant employment history, level of education, skills, abilities, and interests. Participants work closely with our Education/Employment Coordinators (EEC) to discuss the assessment results and career recommendations.

With the assessment results, the EEC then conducts a one hour individual meeting with each participant to help create and maintain an Individual Employment Plan. The IEP is a customized, step-by-step plan for obtaining employment and developing a lasting career. The IEP is then shared with the participants Case Manager to provide additional support in meeting action items and goals established in the IEP.

Step-Up Program Referrals

Shasta County offers a unique opportunity through the Step-Up program to support our program participants with earning their education and learning new skills to be able to sustain long-term employment. The DRC identifies participants that have a desire to further their education and works in partnership with Probation to refer them to the Step-Up program and get them enrolled in school. For the spring 2019 semester alone, the DRC referred 10 participants to the Step-Up program in which 9 out of 10 are currently attending courses through the program at Shasta College.

DID YOU KNOW?

The Shasta DRC works to increase employment stability through employment readiness classes and services that eliminate the barriers to work. Before focusing on employment skills, staff works closely with participants to increase their intrinsic motivation to work. It's important that they understand the benefits of legitimate employment and find satisfaction in pro-social jobs. By conducting mock interviews, resume workshops and informing participants about open positions, our staff help participants meet their career goals. Staff work with participants to get professional clothing to wear on job interviews, eliminating another barrier to employment. Our DRC staff also build connections with local businesses and host and attend local job fairs with participants where participants can meet with employers and apply for open positions on the spot.

SECTION 3:

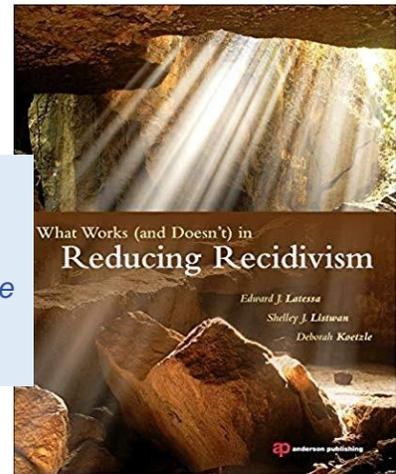
SPECIALIZED TRAINING & CURRICULUM DEVELOPMENT

Organizational Learning Culture

We view the complex and ongoing process of operationalizing Evidence-Based Principles as both an art and a science. The science aspect includes studying EBP, having an awareness of the history and research, and understanding the fundamental concepts of the Eight Principles of Effective Intervention.

At the Shasta County DRC, we take pride in the art of operationalizing EBP. This includes investing significant time and resources to help our staff develop their EBP skills. Our Area Manager, Program Manager and Supervising Case Manager provide DRC staff with daily coaching on how to operationalize EBP.

Staff from the DRC are expected to understand and operationalize the latest research on effective interventions. One of the ways that we embrace an EBP culture is studying the book What Works (and Doesn't) in Reducing Recidivism. This book is a great tool that can be utilized to create a foundation of the 8 Principles of Effective Intervention.



An organizational learning culture is an environment where skill building and professional development are embraced, supported, and affirmed. The Shasta DRC strives to provide a variety of ongoing opportunities for staff to invest in their professional growth. The Area Manager and Shasta DRC leadership team serve as coaches to staff to offer feedback and help staff progress with their own professional development action items and goals. Being intentional about creating a learning culture at the Shasta DRC further allows staff to serve as positive role models for our program participants to be open-minded and embrace skill building.

The Shasta DRC values creating an organizational culture that values learning. A learning culture establishes an environment where professional growth and development is embraced, encouraged, and supported.

Our Shasta County DRC staff have participated in more than 40 different training modules over the last year alone—receiving over 100 hours of training. This includes, but is not limited to, the following:

- Professional Alliance Traits
- Adverse Childhood Experiences
- Antisocial Thinking
- Art and Science of EBP
- Anger Management Competency
- Behavior Chain
- EBP BriefCASE Series
- Case Management Competency
- Effectively Using Carey Guides
- Cognitive Thinking Errors
- Conflict Resolution
- Contingency Management
- Courtroom Procedures
- Creative Leadership
- Emotional Intelligence
- Effective Case Staffings
- Effective Listening
- 8 Criminogenic Needs
- EBP Research
- Guiding Principles of EBP
- Giving Feedback
- History of EBP
- Identifying Skill Deficits
- Identifying the Driver
- Implementing EBP
- Leadership and Management
- Participant Engagement
- Noble ONA Training
- Measuring Outcomes
- Pro-Social Behavior
- Understanding Data
- Starting Point Process
- SMART Goals

- Shaping Offender Behavior
- Reducing Absconds
- Responsivity

Managers Training

In June 2018, the Shasta DRC Program Manager attended a Managers Training held at The GEO Group corporate office. The Managers Training was a week long and served as an opportunity for all current managers, from across the country, to receive training and coaching from senior leadership. The Managers also attended a day of breakout sessions where Managers engaged in collaborative activities and discussions around *The Leadership Challenge* book. The training served as a great way to continue investing in our DRC leadership.

Refresher Training

Staff are required to complete at least 40 hours of refresher training each year. Our Continuum of Care Training Institute maintains a list of required annual trainings and provides elective training options to program staff. Examples of elective refresher courses include human relations, roles of law enforcement agencies, and cultural and ethnic sensitivity.

Weekly EBP Refreshers

"To be professional in the workplace is to bring your "best self" to work each and every day: your good character, positive attitude, dedication to excellence, and appropriate conduct. It suggests we should be committed to lifelong learning, be open to new ideas, show initiative, have a "can do" attitude, and work to improve ourselves by constantly striving to meet higher standards and improved outcomes".

-Mark Carey and Madeline M. Carter

Every Friday for one hour the Shasta DRC gathers for a team meeting. Ms. Gehrung begins each of these team meetings by spending 15 - 20 minutes discussing or practicing an EBP related topic or activity. This weekly opportunity allows the team to invest in their professional development and enhance their skills around understanding, articulating and operationalizing evidence-based practices.

EBP Trivia: Ms. Gehrung has focused on creating an organizational culture that embraces ongoing growth, knowledge and opportunities for skill building. Whether it is during a team meeting or stopping by a staff member's office, Ms. Gehrung does EBP trivia, pop EBP quizzes, or engages in role plays, with staff throughout each week. This allows Ms. Gehrung to incorporate role play as a coaching technique, prompts questions and discussion about EBP, and fosters skill building with staff.

Monthly EBP Recognition: Within our Northern California region, our Program Managers each write a summary to recognize a staff member for operationalizing EBP. Ms. Owens distributes a regional notification to commend these staff and also includes corporate-level GEO Reentry personnel on the distribution to provide further recognition. Every quarter, all staff who were recognized are entered into a drawing for a gift of their choice.

EBP BriefCASE Series

Every month the Shasta DRC team members conduct an EBP BriefCASE session. Developed by The Carey Group, the EBP BriefCASE consists of 18 modules that cover a multitude of topics that are essential to criminogenic risk reduction. This curriculum provides structure for establishing a collaborative coaching atmosphere among program staff and allows for teaching and reinforcement of the principles and practices of EBP. To further invest in the development of staff, leadership will offer the opportunity for another staff member to lead the session with their peers and further



develop their leadership skills. Some of the modules covered in the BriefCASE include: Modeling and Affirming Prosocial Attitudes and Behaviors, Identifying Skill Deficits, Overcoming Thinking Traps, and many more!

BriefCASE Professional Development Plans: To remain intentional about improving and applying the skills learned in each session each staff has a professional development plan that they complete post each BriefCASE session. This development plan allows staff to note the key objectives of each session, do by a self-assessment by reflecting on their areas of strength and growth and set goals for improvements.

The BriefCASE sessions are an ongoing investment opportunity in which once all 18 sessions are conducted, we restart the sessions to continue supporting a learning culture.

Weekly Staff Key Performance Indicator (KPI)

Every week, each staff member completes a KPI for the groups and services they facilitated. Each staff member's individual KPI report is then reviewed and compiled by the Program Manager into a team KPI for the week. The weekly team KPI is then discussed on a manager's weekly conference call held with Area Manager Amanda Owens to discuss, analyze, and create management goals around improve outcomes using best practices.

Enhancement: Weekly KPI 1 on 1 Meetings and Goal Setting with Staff: In September 2018, management began holding weekly 1 on 1 KPI meetings with each caseload carrying staff member. The goal is for each staff member to build a stronger relationship with their weekly KPI and be able to make ongoing data driven decisions to help improve their outcomes from week to week.

During these meetings a variety of data elements are reviewed, discussed and analyzed including absconds, group rates, ICBT rates, rewards and sanctions, behavior change plans, and role plays. As each data element is analyzed we identify action items to implement immediately to help improve participant engagements and group and service rates for the following week. In addition, the meeting concludes with each staff member setting weekly target goals for each of the data elements listed. Throughout the week staff can continuously measure their effectiveness and if they are on target to meet their individually set target goals.

Area Manager Staff Meetings. Every week, GEO Reentry management personnel within our Northern California region have a Key Performance Indicator (KPI) teleconference meeting. The first 20-30 minutes of these meetings is dedicated to reviewing a selection from the "What Works (and Doesn't) in Reducing Recidivism" book or other pertinent EBP literature. The remainder of the meeting is dedicated to analyzing KPIs and sharing best practices.

Motivational Interviewing (MI)

DRC staff are trained by a qualified trainer in Motivational Interviewing and receiving ongoing training from Shasta DRC leadership. This form of communication is an evidence-based best practice for working alongside our program participants to help elicit intrinsic motivation that results in long-term pro-social behavior change.

Staff are encouraged and supported to continuously increase their MI proficiency by working to obtain MI certification as part of the rigorous certification process; DRC staff must record an interaction with a participant and send the taped interaction to a GEO Training Specialist. Our Training Specialist evaluates the taped interaction in accordance with MI Treatment Integrity standards and provides the staff member with feedback. The DRC staff member then works closely with our DRC management personnel and other Subject Matter Experts within our company to improve their MI delivery. This intensive process of refining MI skills and achieving proficiency generally takes several months from the first submission of the taped interaction.

Program Manager Ms. Gehrung obtained certification in June 2018 and has been able to directly provide staff ongoing coaching and development around their MI skills. Currently most staff who have been trained in MI have submitted one to two tapes each. Each staff member has an MI certification game plan with an identified target goal date for certification.

Obtaining MI certification is about continued growth and enhancing the effectiveness of our engagement with participants. Ensuring that we use a communication style of open-ended questions, affirmations, reflections, and summaries, is proven to help participants move through the stages of change and choose for themselves to make positive changes.

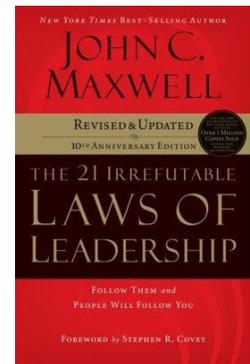
DID YOU KNOW?

Motivational Interviewing is one of the innovative techniques the Shasta DRC uses to foster a supportive environment while addressing participant commitment and motivation to improving their behavior. Unlike other therapies, MI takes an individualized approach to explore empathy, optimism and personal choice. Studies have suggested that individuals who are exposed to MI and successfully follow through with appropriate counseling are less likely to argue or pursue criminal behavior. By analyzing responses to different types of interactions, our skilled staff adapts individual conversations to be affirmative and optimistic while simultaneously increasing awareness toward any possible conscious or unconscious decisions that could be dangerous or detrimental. Research indicates participants treated with MI are more likely to engage in long term pro-social behavior.

Lunch and Learn Sessions

Amanda Owens, GEO Reentry Area Manager, hosts regular Lunch and Learn sessions for regional GEO Reentry management. Staff choose a leadership book that will be discussed and staff members rotate in facilitating the meeting. We have found that these sessions are an effective method for increasing the leadership abilities of our staff.

- Emotional Intelligence 2.0 – Travis Bradberry & Jean Greaves
- Fish!: A Remarkable Way to Boost Morale and Improve Results – Stephen C. Lundin
- The 5 Languages of Appreciation in the Workplace: Empowering Organizations by Encouraging People – Gary Chapman, Paul White
- The 21 Irrefutable Laws of Leadership: Follow Them and People Will Follow You – John C. Maxwell



Fundamentals Meeting

After studying GEO Reentry-operated DRCs, Ms. Owens developed six regional fundamentals that we believe are integral to the success of our operations. These fundamentals are: Quality Assurance Through Coaching, Participatory Management, Community Involvement, Customer Relationships, Providing Value Added Services, and Investing in Growth. Ms. Owens leads a fundamentals meeting every month to discuss these ideals with staff and ensure that our programs continually embrace these standards.

Program Feedback

Outcome Rating Scale (ORS)

During an ICBT session, the participant completes an ORS. This instrument gives DRC staff insight into a participant's personal functioning, interpersonal relationships, and social role performance in areas such as work adjustment. We use ORS results to help monitor program progress, evaluate the effectiveness of assigned programming, determine any need for further treatment, and investigate any lack of progress.

Session Rating Scale (SRS)

At the end of the ICBT session, the Case Manager asks the participant to complete an SRS. This allows the participant to rate the staff member in four areas. The SRS assesses the relational bond between participant and staff—including the level of agreement on goals, methods, and the overall treatment approach. The SRS also helps the Case Manager determine if the participant is engaged in programming and if services are responsive to the participant's assessed needs, risks, and vulnerabilities. The Case Manager discusses the ratings with the participant.

Substance Abuse Surveys

The objective with the quarterly substance abuse surveys is to obtain feedback from participants around the impact of the substance abuse components of their programming. The Substance Abuse Counselors utilize this feedback to measure the effectiveness of our approach in working alongside participants to help them obtain their sobriety and progress through the program.

Focus Groups

In 2018, we engaged national expert Dr. Natalie Pearl Ilarraza on a technical assistance project to analyze the DRC program and identify and develop solutions to identified areas of improvement. In January 2019, Dr. Ilarraza visited the Shasta DRC. During her visit she conducted two focus groups with participants. The focus groups were to allow participants to speak to a third party and provide feedback about their programming at the DRC. During this discussion participants were encouraged to share their likes and dislikes about the program, what motivates them, and what they would like to see improved to better serve them. The feedback was received well by Dr. Ilarraza and was incorporated into some of the program enhancement recommendations provided.

Program Changes and Enhancements

Program Orientation

Every DRC participant must complete a formalized intake process as part of their initial referral and introduction to the DRC program. The intake process can be substantial in duration, involves significant paperwork, and requires participants to provide sensitive information about themselves—often resulting in participant frustration or subsequent absence from the program.

In direct response to this issue, GEO Reentry developed a more interactive and engaging intake and orientation process—which we implemented within the Shasta County DRC in February 2019. As part of this improved process, new participants complete Orientation as their first interaction with the DRC. We designed the Orientation to prepare participants for the DRC program; to foster an understanding of program elements (including an explanation of the upcoming intake process); and to provide an overview of program benefits. Since participants are introduced to the intake process during Orientation, there is a better understanding of why personal information is requested and less participant resistance to completing the required paperwork during Intake. Additionally, we revamped our Starting Point packet to streamline the process.

What part of the program has caused the most positive change in your life?

“The fact that the doors are open and it’s up to me to walk through them...The help is here and it’s up to me to receive what’s being offered...” - Anonymous Participant

Work Readiness Event

Shasta County Day Reporting Center hosted a Work Readiness Event on Wednesday, March 27, from 9 a.m. to 1 p.m., at the Shasta County Library, located at 1100 Park View Ave. This event was hosted in collaboration with Shasta County Health and Human Services, Far Northern Regional Center, SMART Business Resource Center and Shasta County Probation Department. The Work Readiness event offered participants at the Shasta County DRC, as well as other members of the community, the opportunity to eliminate job barriers, build skills, and receive tools needed to make a good impression at the community job fair held the following week on April 3rd. The event offered a range of resources, from hygiene kits and guidance with interview attire, to practicing mock interviews and workshops for refining important soft job-search skills. The goal of the Work Readiness Event was to help eliminate barriers to employment, empowering the participants to feel more prepared for the Job Fair and secure long-term employment.

Maximizing Outreach Opportunities - Education/Employment Coordinator (EEC)

In order to increase maximizing outreach opportunities in the community with employers and provide greater individual assistance to unemployed and underemployed participants, we have increased a part time

Education/Employment Coordinator (EEC) position to full time. By increasing the availability of the second EEC we have been able to reduce the number of participants assigned to each Case Manager and continue to focus on enhanced engagement opportunities.

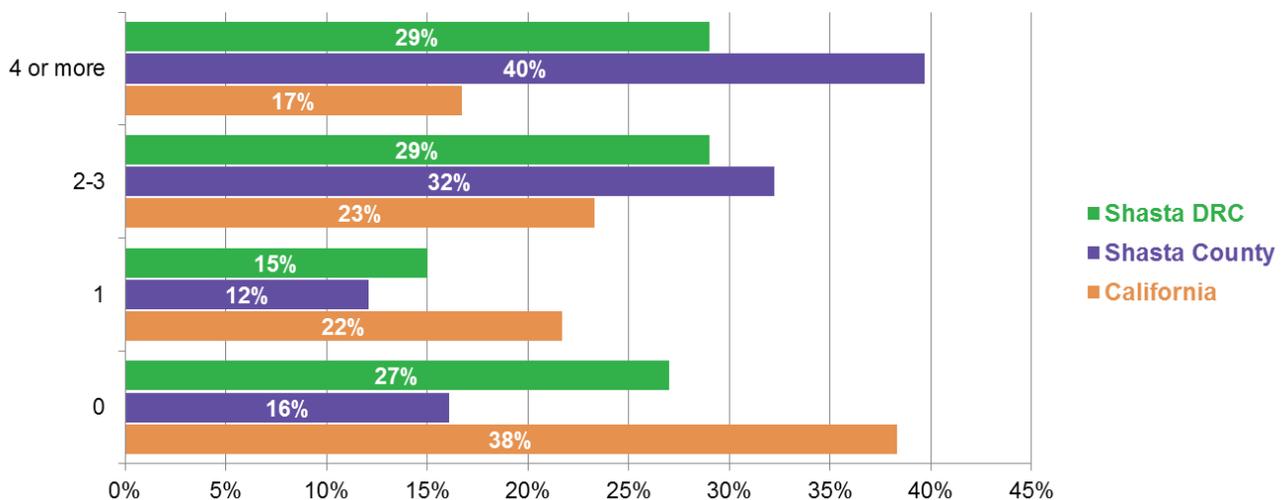
Adverse Childhood Experiences (ACEs)

As a long-term provider and partner within Shasta County, we are aware of the community-wide initiative to address ACEs. In order to align the DRC with corresponding Probation efforts, we are working to enhance participant awareness and education on the impact, outcomes, and effects of ACEs. In January 2019, we implemented this initiative by providing the ACE Questionnaire to participants. The questionnaire asks participants to self-report on past experiences such as neglect, household substance abuse, verbal abuse, parental separation or divorce, household mental illness, and physical abuse. We utilize ACE scores to better understand and respond to participants. This includes using our GEOtrack software system to track and report on participant ACE scores.

Our DRC team attended an ACEs presentation and received supplemental ACEs and trauma informed care training from our Continuum of Care Training Institute. This training included methodologies for assisting participants in ending patterns of abuse, neglect, and household dysfunction and creating stronger family bonds. In addition, June 2019, the DRC team will receive a refresher ACEs presentation.

The initial results of the ACE questionnaires demonstrate that the DRC population has a much higher prevalence of ACEs when compared to the California statewide data – although the rate of ACEs is lower than reported by the 2012 Shasta County survey of 271 households. Our purpose in bringing ACEs awareness, education, assessment, and reporting into the Shasta DRC program is to help reduce the negative impacts of specific life elements. GEO Reentry staff use assessment results—and any agency-administered evaluations and supervision information—to help determine each participant’s programming assignments. Our staff members are trained to match specialized services and activities to the protective factors, risk level, and needs identified by the assessments—with the goal of reducing participant risk in each identified area. During the participant’s time in the DRC program, GEO Reentry staff also use assessment results to talk with participants about progress, explore changes, and to make plans for Aftercare and continued support.

**ACE Assessment Shasta (n=52)
January 1, 2019 - April 7, 2019**

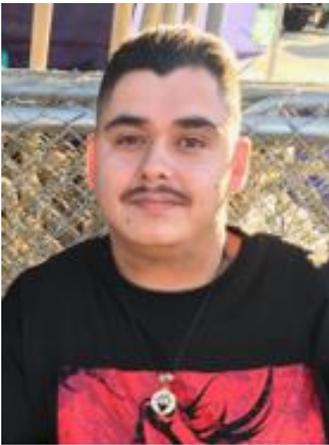


29 percent of participants scored 4 or higher on the ACE assessment

Successful Transitions on Probation and Parole (S.T.O.P.P.) Event

The Shasta DRC recently increased our participation in the monthly Successful Transitions on Probation and Parole (STOPP) event held by the Shasta County Probation Department, in partnership with the California Department of Corrections, Adult Division of Parole. S.T.O.P.P. is intended to help offenders successfully transition from custody to living as productive members within our community. The goal is to connect services to offenders released to our community on supervision as quickly as possible upon their release from custody. Through attending this event the DRC can proactively meet and engage with newly released probationers in hopes of identifying potential program participants who could be referred to the DRC program. Being able to share with probationers in advance what resources and tools the DRC can offer and support them with as they transition enables us to establish a rapport, create buy-in, lower resistance, and enable the potential participant to make the choice to attend the program increases their chances of success.

The Program Will Help You Better Yourself



Alex G. came to the Shasta DRC in August 2018 after being referred by his probation officer and is now celebrating his recent graduation from the program on March 7. "I really liked the program," Alex said. "The staff at the DRC were very helpful and supportive. I'd especially like to thank Mr. Brown for his support." Of all his classes at the DRC, Alex said he found Moral Reconciliation Therapy (MRT) to be particularly helpful. "It helped facilitate a lot of personal growth and change for me," he said. One thing Alex particularly appreciated about the DRC's program is that it helped connect him with resources to find housing, and the staff was instrumental in helping him put together his resume so he could begin applying to jobs. He is proud to now be employed in a management position. When asked what advice he has for other participants who are just starting the program, Alex had this to offer: "Stay focused and motivated. If you truly want to better yourself and are motivated to make a change, this program will help you get there."

DID YOU KNOW?

The Shasta DRC strives to provide participants with the necessary social skills they need upon release. One way the DRC accomplishes this is through social programming. In our cognitive behavioral groups, participants are encouraged to share their stories and learn from one another. They also have the opportunity to role play and act out risky situations together. Through these interactions, participants learn to feel more comfortable in the program and can feel more at ease being surrounded by those who are in similar situations. In addition to our CBT groups, the DRC holds monthly pro-social events that allow participants to put their skills into practice alongside their loved ones.

SECTION 4:

MEETING ACTIVITIES, IDENTIFIED ISSUES & RESPONSES, DEVELOPING ISSUES & OPPORTUNITIES

Probation Collaboration, Community Events & Partnerships

GEO Reentry Services is proud to partner with Shasta County Probation, criminal justice stakeholders, county agencies, and the community. We value the collaborative effort to reduce recidivism, impact public safety and change lives.

Medication Assisted Treatment in Criminal Justice

In November 2018, Amanda Owens, Area Manager, and Danielle Gehrung, Program Manager attended a community presentation and collaborative group discussion regarding how medication assisted treatment (MAT) could be effectively utilized in the criminal justice system and Shasta County community. Ms. Owens also delivered a presentation to the group on community-based offender treatment and changing criminal thinking.

California Prison to Employment Initiative

In November 2018, our DRC staff participated in a Shasta County meeting to discuss California's Prison to Employment Initiative grant program. This included consideration of the Corrections Workforce Partnership Agreement, which seeks to strengthen the connection between the workforce and the corrections system. The primary goal is to improve how individuals involved in the criminal justice system reenter society and the labor force.

CalWORKS Employment Services

The Shasta DRC and CalWORKS Employment Services have been partnering together to provide collaborative services to our shared program participants. The Shasta DRC gave a presentation to CalWORKS employees to provide an in-depth overview of our program and offered services. Through our partnership we are able to collaboratively track dosage and services provided to ensure participants are able to obtain needed resources while removing the duplication of required program activities.

Shasta College Partnership – Program Manager and Participant Guest Speakers

Danielle Gehrung, our Program Manager for the Shasta County DRC, is a regular guest speaker in the Criminal Justice courses offered by Shasta College. This presents a unique opportunity for the DRC to connect with college students currently pursuing a career in criminal justice. Each semester, Ms. Gehrung discusses the DRC's collaborative work with Probation and our mutual goal to reduce recidivism and improve public safety through the provision of evidence-based practices, cognitive restructuring, and pro-social behavior change. A participant joins Ms. Gehrung during her presentations to share their personal journey of rehabilitation and their current experiences at the DRC. These participant testimonials provide students with a valuable perspective.

Carr Fire

In July 2018, Shasta County experienced unexpected devastation during the Carr Fire, which burned over 200,000 acres. During this time the Shasta DRC kept its doors open for a period of time every single day. The Shasta DRC team wanted to provide the program participants a place to feel as safe as possible through the fire. We provided hygiene kits, food, and water to help with resources. Not long after the fire had been contained participants assisted DRC staff in giving back to the community. Some of those giving back were ones who actually lost their belongings or homes in the fire and were just as much in need. On behalf of GEO Reentry Services and the Shasta DRC team, we would like to thank our community and all first responders, from all over

the state to those within our community, for rallying together and demonstrating what it means to be “Shasta Strong.” We are grateful to be a part of such an amazing community.

Value Added Partnership

The Shasta DRC believes in providing ongoing training and opportunities for growth to both staff and the customer. In February 2019, Probation Department staff joined our Core Correctional Practices and Motivational Interviewing trainings held at the Shasta DRC facility. This adds value to our partnership as well as reduces training costs for the customer.

Weekly Case Staffings

A key component of our multidisciplinary approach is conducting weekly meetings to collaboratively evaluate participant progress within the program. These case meetings involve all DRC program staff, the Probation DRC liaison and the participant’s probation officers as available to attend. Prior to the meeting, DRC Case Managers complete a specific case form to indicate any participants who are being considered for phase promotion; participants who may be in a program phase for longer than designed; and participants with program violations.

During the meeting, our Case Managers present these cases for team discussion. The DRC Program Manager moderates the discussion to ensure that evidence-based principles are accurately used when addressing identified issues. This discussion includes identifying the participant’s stage of change and catering our approach effectively, as reinforced in our motivational interviewing and BriefCASE case staffing resources. This time is also used to identify participants who have achieved prosocial behavior change and program milestones and goals on their BCP to be considered for phase promotion. During a phase promotion the team discusses the participants progress, identifies continued action items for the participant and staff to address in the next phase, and opportunities for recognition and rewards. The team then votes and must unanimously agree on the phase promotion. This structured process helps ensure that DRC staff work together to promote participant success.

Identified Issues & Responses

Identified Issue: Refreshing the Program Model

After five years in operation, the Shasta DRC was seeing many of the same issues year after year, including low completion rates and high abscond rates.

Response:

In 2018, we engaged national expert Dr. Natalie Pearl Ilarraza on a technical assistance project to analyze the DRC program, develop solutions to chronic issues, and begin piloting new approaches to improve outcomes. The DRC implemented the first of the changes starting in February 2019 and will roll out all changes from the technical assistance project in July 2019. The DRC model enhancements developed as a result of this project are outlined below.

SUMMARY OF SHASTA COUNTY DRC ENHANCEMENTS
1. Conducting program orientation prior to program intake to improve participant engagement (implemented February 2019)
2. Implemented an Engagement Specialist role to engage participants entering the DRC and provide targeted services (implemented February 2019)
3. Strengthening Evidence-Based Practices fidelity with enhanced staff coaching and mentoring (CCP / MI training conducted March 2019)
4. Revising Starting Point packet to incorporate more Motivational Interviewing language and stabilization factors (July 2019 implementation)
5. Creating a Phase 1 Behavior Change Plan with a particular focus on program engagement and success (July 2019 implementation)

6. Moving MRT Step 3 to Phase 2—to better focus Phase 1 on orientation, assessment, and stabilization (July 2019 implementation)

7. Revising the program's rewards and sanctions system for better alignment with behavioral principles (July 2019 implementation)

Identified Issue: Early Engagement of Participants

The Shasta DRC was experiencing low attendance rates for new program participants, which was resulting in a high number of program absconds.

Response:

The Shasta DRC began piloting a new approach to the Starting Point and Orientation process in February 2019 based on feedback that the Starting Point process was overwhelming. Upon receipt of referral, the DRC now starts by scheduling the referred participant for orientation. If the participant attends orientation, they are then scheduled for an appointment to complete the Starting Point process and be enrolled in the program. Initial results of the pilot are very promising – 96% of participants who attended Orientation came back the following week to complete the Starting Point process. In addition, attendance rates for Orientation have increased from 31% to 72%.

Identified Issue: High Rates of Adverse Childhood Experiences (ACEs)

The newly implemented ACEs assessments showed that a majority of the DRC participants have at least some history with childhood trauma – and for 29% of the population with 4 or more adverse childhood experiences, that trauma was significant.

Response:

To address the prevalence of a history of traumatic experiences, the Shasta DRC is adopting a trauma-based curriculum in our women's group and training our staff to deliver one-on-one interventions for the male population. After last year's report, we explored the research around trauma-informed care. Research shows that using an evidence-based intervention to address trauma in the lives of participants can help them navigate and heal from the trauma, which in turn can help break the cycle of trauma. As participants work through their trauma, they get to the bottom of their instinctual action and reaction to anger and develop an understanding of how they were victimized – and how they are now perpetuating that behavior as victimizers. Addressing trauma has been shown to reduce PTSD symptomology and increase participants' resilience and empathy.

Healing Trauma for Women

We currently facilitate a Women's Group and will be utilizing a new curriculum in this group starting in July from Dr. Stephanie S. Covington, called Healing Trauma. The curriculum includes specific lessons on topics such as the process of trauma, power and abuse, grounding skills, self-soothing, and healthy relationships. The curriculum also includes a component on the ACE Questionnaire, allowing us to further incorporate the County's ACEs initiatives within the DRC. Healing Trauma is an evidence-based curriculum for women's services and is on the National Registry of Evidence-based Programs and Practices (NREPP). During the group, female participants discuss very personal issues that they may not feel comfortable opening up about in front of men. We have received very positive feedback from female participants within our Women's Groups. These participants have reported decreased depression, improved self-esteem, and feeling that the group would help them overcome future obstacles.

Exploring Trauma for Men

In accordance with population needs, we will be implementing use of the Exploring Trauma curriculum from Dr. Covington during ICBT sessions with male participants. These ICBT sessions will be designed to provide targeted gender specific and trauma informed interventions that can assist male participants in working through issues that

they might otherwise not be able to address in a group setting. The Exploring Trauma curriculum explores topics such as silence surrounding abuse, male socialization, the risk of victims becoming abusers, understanding shame and fear, the impact of trauma on the inner and outer self, and coping and calming strategies.

Identified Issue: Responsive Programming for Participants with High Anxiety and Severe Substance Abuse

The Technical EBP audit conducted of the Shasta DRC program noted that there was a significant population of participants with either high anxiety or severe substance abuse issues that were struggling in group treatment.

Response:

The Shasta DRC began piloting in April 2019, an MRT group for those with high anxiety and/or severe substance abuse issues. This group will be limited to a maximum of six participants and will maintain strict fidelity to the MRT curriculum. Group attendance will be tracked and measured to evaluate impact and provide ongoing outcomes of this pilot.

What part of the program has caused the most positive change in your life?

*“Interaction with Staff. Unlike so many other programs, this place and the staff really care about you and want you to make a change in your life.”
– Anonymous Participant*

Opportunities

Enhancement of DRC Program Phases

Starting in July, we will make strategic phase changes in order to further inspire, empower, and motivate participants in the change process.

We plan to focus Phase 1 on program orientation, assessment administration, and stabilizing assessed participant needs. One of the primary objectives of this phase is to assist participants in moving out of the Precontemplation stage of change, through Contemplation, and into the Preparation stage.

During our remodeled Phase 1, participants will become acclimated to the DRC program, complete various assessments with DRC staff, and will begin to participate in programming groups and individual sessions. Overall, Phase 1 will maintain a strong focus on addressing the stabilization factors that may hinder DRC participants from continued attendance within the program.

In Phase 2, the participants should have developed a stronger rapport with their Behavior Change Manager and will be more familiar with program requirements. This level of understanding will allow the participant to better engage in programming sessions and provides a more solid foundation for development of a detailed and long-term Program BCP.

Ongoing activities such as refinement of our service delivery and continuous staff training and development are key components to continually improving program outcomes.

Enhancement of Behavior Change Planning Process

We understand the Stages of Change Model and provide DRC programming and services that are tailored to addressing each participant’s resistance to change and movement through the stages of change. When participants enter the DRC program, the majority are assessed as high-risk, struggle to maintain sobriety, and are in the Pre-contemplation stage of change. These participants are often highly resistant to the program and see no reason for, or benefit to, engaging with the DRC. Accordingly, the DRC must be designed to welcome, serve, support, and encourage participants who are initially resistant to change. Our new Phase 1 changes are designed to strengthen our ability to meet these objectives.

Beginning in July, the Shasta DRC will work to create two distinct BCPs in accordance with the participant’s current phase assignment.

In Phase 1, the Starting Point BCP is focused on helping the participant achieve success within the initial phase of the program. This includes assisting the participant in moving to the next stage of change and creating a

Stabilization Action Plan to help participants obtain resources that address pertinent issues such as homelessness, mental health, and medical health needs. The Phase 1 BCP is designed to increase participant engagement prior to the participant transitioning into more intensive programming.

The Program BCP created in Phase 2 includes behavioral goals, responsivity factors, and action items that are prioritized and customized for the individual—supporting the participant’s investment in achieving the stated goals. Based on individually assessed risk and needs and the Program BCP, DRC participants receive appropriate and targeted programming and services that are designed to change underlying thoughts and behaviors. This is an essential strategy for reducing criminogenic risk and recidivism—and for increasing public safety through effective community integration.

Enhancement to EBP Fidelity: Core Correctional Practices Coaching

Core Correctional Practices (CCPs) are structured, research-driven approaches to individual interactions that have been proven to enhance the efficacy of cognitive behavioral programming. Examples include effective use of approval, disapproval, and role clarification. To the DRC staff’s mastery and application of CCP’s, the Shasta DRC is implementing a coaching program that will include observation of the DRC’s current use of CCP techniques, refresher staff training as needed, the creation of visual guides for staff use of CCP skills within specific situations, and ensuring that our DRC management has the ongoing ability to coach their staff in the continuous use of these skills.

Enhancement to Rewards and Sanctions Process

The Shasta DRC is working on implementing a new system of rewards and sanctions. This includes ensuring that all DRC staff fully understand the applicable policies and procedures, have a working knowledge of the behavioral principles that the system is based upon, and tracking actual rewards and sanctions administered to ensure staff achievement of four rewards for every one sanction.

Formalized Cycle of Program Innovations

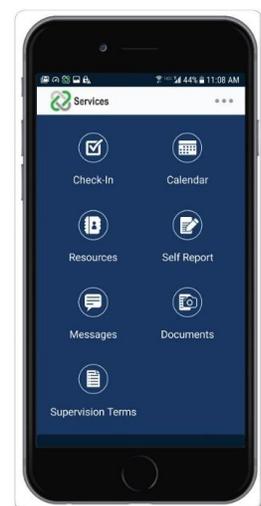
In 2018, the Shasta County DRC embarked on a technical assistance project to analyze program outcomes, develop solutions to issues and begin piloting changes to identified areas of need. This process resulted in multiple innovations the DRC is currently working to pilot. Moving into the next year, our challenge will be to ensure this becomes a cyclical process. The implemented pilots will be reviewed in December. At that time, we will re-engage with technical assistance resources to review data on orientation engagement, phase completion rates, and participant success metrics. This review of data will result in decisions on whether 2019 piloted changes should be kept or discarded as well as develop a new list of innovations to pilot in 2020.

SmartLINK

As a way to engage with participants and encourage attendance at the DRC, we plan to use the BI SmartLINK mobile application as a way to encourage program participation, increase communication and engagement with participants, provide participants with automated reminders of upcoming appointments, and recognize and reward participants for sustained compliance with the program. SmartLINK will also support stabilization within the community by providing participants with information about local community resources.

Electronic Monitoring

Over the years, one of the identified challenges has been ensuring that participants are receiving a formalized sanction for non-compliance with the DRC. The Shasta DRC staff is open to utilizing electronic monitoring as a part of contingency management when all other sanctions have been tried, and a participant is still non-compliant. The Shasta DRC staff would install the equipment, and the equipment would be removed once the participant has demonstrated progress towards pro-social behavior. This would be part of



the DRC's sanction process and not part of the participant's terms and conditions.

Computer-Based Cognitive Behavioral Therapy and Life Skills

Beginning July 1st, we will add a computer-based eLearning curriculum from the ACCI Cognitive Life Skills courses. ACCI develops and provides a variety of self-directed content and curriculum that places a strong focus on cognitive restructuring and is supported by published outcomes and research.



It's Been a Benefit to my Overall Well-Being.

After failing to complete a previous reentry program, Charles was referred by his probation officer to the Shasta DRC. When he first arrived at the DRC, Charles said he didn't want to be in the program because he'd already been in recovery for 14 months. However, he's happy that he finally buckled down and decided to put in the effort. "If I'd blown it off, it would have potentially ended badly for me," Charles said. "I'm grateful that I did it. It's been a benefit to my overall well-being." Charles said his Cognitive Self-Change group is engaging and that in his Moral Reconciliation Therapy group he's learned that following a structured plan can sometimes be useful. "Even though I didn't want to do it, it's made me realize things about myself," he said.

Charles said that though he failed to complete the first program, opening himself up to learning about his thoughts and behaviors at the DRC made what he learned in the previous program click. "The combination of the two made me realize a lot of things about my actions and how I feel," he said. Charles said the DRC has contributed to positive growth in his life. He knows he can always go to the staff with any need and they will help. "I connected with the staff and started building relationships that were beneficial to me."