

CREATING BEHAVIOR CHANGE AND TREATING THE SERIOUSLY MENTALLY ILL INMATE: CORRECTIONAL PROGRAM AT THE BERNALILLO COUNTY METROPOLITAN DETENTION CENTER ALBUQUERQUE, NEW MEXICO

A Preliminary Report

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Introduction

Treatment of drug offenders, especially those with serious mental health problems in a correctional setting, has been an ongoing struggle for the criminal justice system. Lessons learned during the 1970s and 1980s promoting comprehensive mental health services for the incarcerated population have produced practices which can enhance current services. Research on these modalities confirmed that treatment can make a difference. In the past year, the development of a program to provide these services to the correctional population by Correctional Healthcare Companies, Inc. (CHC) at the Bernalillo County Metropolitan Detention Center (MDC) was a result of these efforts. In 2013 an evaluation was contracted and designed by Glacier Consulting, Inc. to determine (1) if the MDC could expand its objectives in treating the seriously mentally ill inmates in acute care, RTU, and segregation Units with established therapeutic milieu; and (2) if a recent intervention to meet the needs of participants assessed with and likely concomitant drug abuse problems produces enhanced results for program retention and completion.

MCC began by establishing an implementation plan, including policies and procedures to direct initial efforts. Through a multi-method approach, CHC conducted assessments to determine eligibility of participants and characteristics of the different groups entering the program. All inmates in the program had multidisciplinary individual treatment plans for those entering the program. Preliminary results of this study explain accomplishments to date:

- The program is creating positive impacts on managing mental health issues, with increased compliance to medication treatment and counseling sessions.
- The program is seeing positive behavioral changes among the participants engaged in Moral Reconnection Therapy (MRT) sessions. MRT is creating an environment for inmates to handle mental health issues, and MRT participants are more compliant in taking prescribed medications.
- Inmates in segregation on a specialized mental health unit, many of whom had been on the acute unit and in residential treatment at the jail, demonstrated remarkable improvement in socialization and their capacity to participate in a therapeutic community after the initiation of MRT on that unit.
- The relationships between Psychiatric Services Unit (PSU) and program participants makes the inmates more successful when attending groups and progressing in their treatment plans.
- The program is effective for both female and male participants.
- Security staff buy in to specialty housing for the segregated inmate has improved tremendously since the initiation of MRT programming in addition to the other group therapies employed on that unit.

Bernalillo County Metropolitan Detention Center of Bernalillo County, in its attempts to meet the needs of a high risk, mentally ill with/or without substance use disorders, has witnessed improvements treating this population which has been impressive. Rehabilitating individuals that abuse drugs and commit criminal activities, along with managing their mental health problems, has resulted in producing more compliant and less oppositional inmates. The hope is they will continue and be useful citizens with increased positive results for public safety. The evaluation presents results from initial implementation of a correctional program, including MRT that is both efficient in its practices and effective in program delivery. We believe that it could be considered a model for other jurisdictions to improve other programs through the lessons learned by CHC efforts.

Program Success and Accomplishments

Glacier Consulting, Inc. focused on specific performance indicators to judge the effectiveness of a program, including:

- Units of Service Delivery
- Reduction in recidivism
- Management of mental health issues

For all of these measures, the MDC program exceeds its expectations for the objectives set for each of the critical indicators.

- Graduating clients – 110 graduates as of 9/1/2013.

- Integrated and consolidated approaches to treatment and recovery which substantially reduced the cost of individual service delivery to clients;
- Delivered 41,863 client days – including treatment, supervision, and ancillary services.

The issue of substance abuse is clearly a major problem whether a serious mental illness is diagnosed or not. In prior studies, the MRT intervention has shown to reduce drug dependency through behavior change and replacing it with developing purposeful lives.

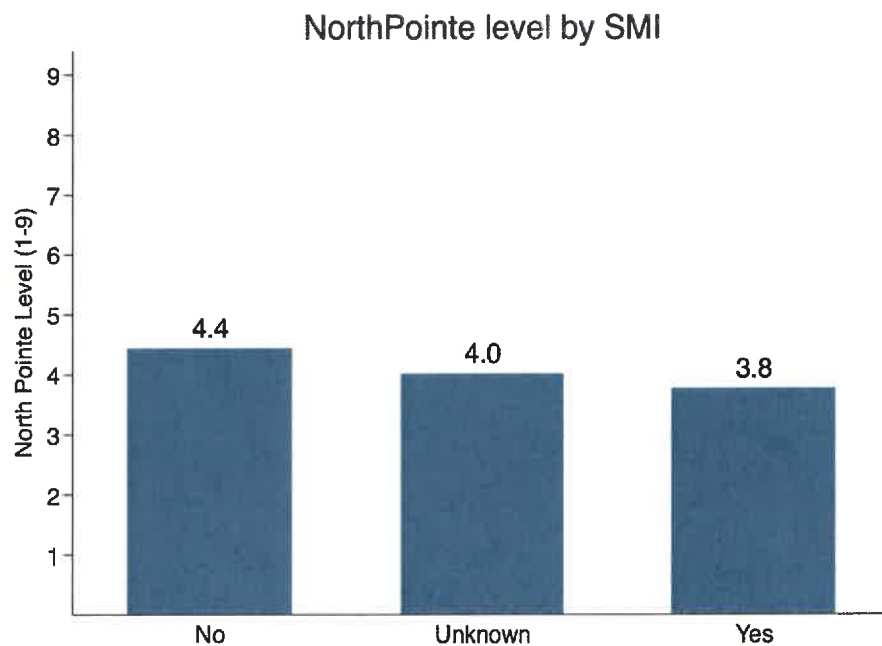


Figure 11: NorthPoint Level by SMI

NorthPoint assessment determines the risk level of those entering the program; level 1 are the highest security risks and level 9 is the lowest level of risk. The average risk level for those assessed with serious mental illness is

slightly lower than the rest of the participants. Only thirty-five clients have a risk level of 5 or higher out of 157. Those with risk levels of 4 and below account for the large majority of clients, including: Level 4 = 23; Level 3 = 65; Level 2 = 32; Level 1 = 2.

As outlined in the evaluation of the Moral Reconciliation Therapy (MRT) program at MDC (October 2013) by Glacier Consulting, Inc., the following questions regarding the effectiveness of the program were posed:

1. Has the MDC program been implemented as planned, and are services being delivered to program participants?
2. Does MDC reduce substance abuse and aid in the management of mental health problems?
3. Does MDC reduce recidivism compared to existing practices?

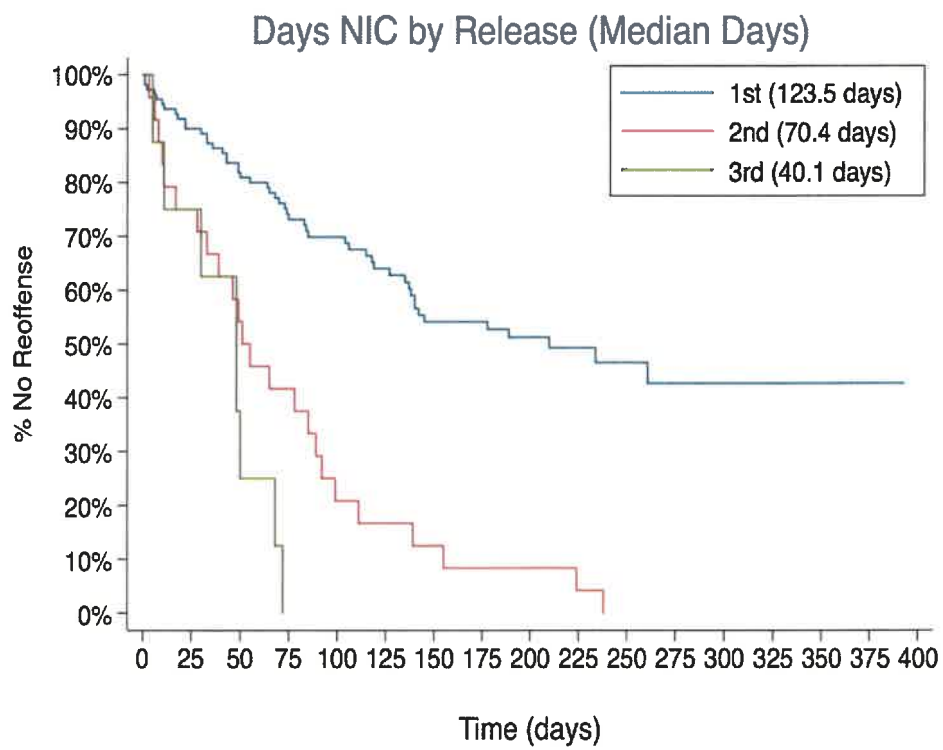
Following the completion of the evaluation and its enumeration of the successes of the MDC MRT program, MDC decided to look at the behavior of inmates participating (as defined by their attendance at a minimum of six group sessions) in the MRT program as measured by the number of reported incidents and posed the following questions:

1. Did the behavior of inmates participating in the MRT program change during and after their participation?
2. How did the behavior of inmates participating in the MRT program compare to a comparable group of inmates on the same units over a comparable period of time?

As indicated in the data below:

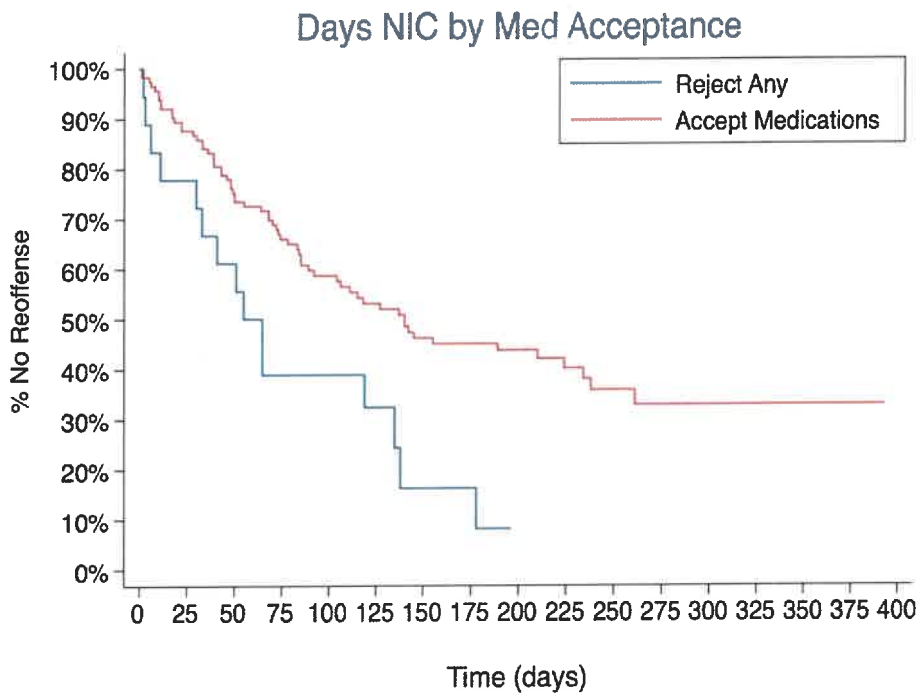
1. The average number of incident reports for inmates prior to their participation in the program (2.73) decreased to 0.66 (a 76% decrease) during and after their participation in MRT.
2. The average number of incident reports for inmates on the same units over a comparable period of time who did not participate in MRT was 3.06 or a 78% difference compared to inmates who participated in MRT.

Survival Analysis and NIC (Not in Custody)



Days NIC by Release (Median Days)

GCI conducted survival analyses to determine the sustained effects of participating in the program. It is important to note that at this early stage of implementation the results represent trends and patterns in the outcomes which should be confirmed over time. For the overall analysis, three distinct groups appear indicating that some recidivate early, but that over time participants sustain their success into the future.



Days NIC by Medication Acceptance

Then we identified the most important indicator of success among this population to date; whether or not they accept the prescribed medications for their illness. A dramatic difference appears between those who accept their medications and those that do not in terms of sustained success.

Conclusion

The commitment and the delivery of services at the Bernalillo Metropolitan Detention Center for participants in the Moral Reconciliation Therapy program is promising. This first independent study of the program being implemented has shown signs of major change in the delivery of services to inmates that could not only help them but improve public safety after inmates are released into the community.