



<u>ADMINISTRATIVE REGULATION</u>    COLORADO DEPARTMENT OF CORRECTIONS		REGULATION NUMBER	PAGE NUMBER
		650-04	1 OF 23
		CHAPTER: Offender Group Living	
		SUBJECT: Residential Treatment Programs for Offenders with Mental Illness and Intellectual and Developmental Disabilities	
RELATED STANDARDS: ACA Standards 4-4183		EFFECTIVE DATE: April 1, 2014	
		SUPERSESSION: 12/15/13	
OPR: OCS	REVIEW MONTH: JANUARY	 Rick Raemisch Executive Director	

#### I. POLICY

It is the policy of the Department of Corrections to offer specialized programs to offenders with mental illness and/or intellectual and developmental disabilities. These programs utilize planned incentive level systems to promote pro-social behavior and treatment progress and meeting behavioral goals to prepare offenders for successful community transition while ensuring the safety of employees and offenders.

#### II. PURPOSE

This Administrative Regulation (AR) describes the residential treatment program placement process and incentive level systems for offenders with mental illness and/or intellectual and developmental disabilities and criteria for movement/transition for residential treatment program offenders.

#### III. DEFINITIONS

- A. Animal-assisted Therapy: A form of therapeutic intervention that seeks to improve offenders social, emotional, and cognitive functioning by incorporating animals in behavioral health and educational programs. Treatment goals for RTP offenders at any level may include therapeutic activities with a dog that has been approved by CDOC for participation in an RTP.
- B. Behavior Treatment Plan (BTP): An individualized treatment plan which at a minimum will address goals, objectives and interventions.
- C. Continuity of Care: Clinical process of the transfer of care of an offender from the primary treatment responsibility of one provider and/or multi-disciplinary team to another. Direct communication between providers and transmission of documentation of symptoms, risk issues, and treatment recommendations is included.

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- D. Developmental Disabilities Needs Level: This (DD) code is a five point rating scale which designates that offenders with a score of DD3, DD4, or DD5 are to be assessed for their need for services and possible placement in a residential treatment program for offender with intellectual and developmental disabilities.
- E. Evidence-Based Practice: the body of research and replicable clinical knowledge that describes contemporary correctional behavioral health assessment, programming and supervision strategies that lead to improved correctional treatment outcomes such as the rehabilitation of offenders and increased public safety.
- F. Incentive Level System: A behavior driven, progressive, incentive based system to encourage treatment compliance and appropriate offender behavior.
- G. Intellectual and Developmental Disabilities: Refers to offenders who have a Culture Fair I.Q. of 80 and below and a reading level score on the Test of Adult Basic Education (TABE) of 5.9 or below. These offenders are coded as DD3, DD4, or DD5.
- H. Mental Health Transition Form: This is a form completed by the mental health clinician that documents the plan to facilitate the offender's successful transition into the community. The mental health transition form is completed before the offender is discharged from an RTP into the community.
- I. Multi-disciplinary Team: A group of representatives from multiple disciplines that include custody/control, mental health, medical, case management and other disciplines as needed on a case-by-case basis, that work together to contribute to the achievement of the offender's treatment plan and program success.
- J. Positive Behavior: Demonstration of pro-social, cooperative, and treatment compliant interactions and behaviors. Specific positive behaviors may be defined as treatment goals in the offender's treatment plan.
- K. Positive Development Program (PDP): Behavioral health and educational program curriculum within an RTP that provides services for intellectually and developmentally disabled offenders, to include those with traumatic brain injury and organic etiologies.
- L. Program Compliant: Offenders who are demonstrating active participation in their treatment plan, and/or offenders in an educational or work program who achieve satisfactory or higher progress reviews.
- M. Program Success: Program success is acknowledged when an offender demonstrates achievement of treatment goals and progresses to a general population facility or granted discretionary release from prison regardless of level completed within the Residential Treatment Unit Program.
- N. Pro-social Behavior: Positive social interaction with staff, family members, and other offenders that respects the rights and boundaries of other individuals.
- O. Recreational Therapy: Recreational activities, facilitated by clinical staff that are goal-oriented and are designed to improve functioning in life activities and to promote health and wellness.
- P. Recreational Activities: Out-of-cell time that promotes pro-social interactions such as gym activities, yard time, board games, art, music, and/or other leisure activities. Recreational activities are non-therapeutic contact.

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- Q. Residential Treatment Program (RTP): A program which provides offenders with mental illness and/or intellectual and developmental disabilities the individual and group therapy, educational programs, recreational therapy and recreational activities to promote their program success and successful transition into the community or into a general population setting.
- R. Residential Treatment Program Diagnostic Unit: A unit located at Centennial Correctional Facility (CCF) for the purpose of administration of psychological assessments and psychiatric evaluations of offenders in order to determine appropriate placement in the CCF-RTP or other facility placement by offender services.
- S. Residential Treatment Program (RTP) Status: A status for offenders that designates that serious mental illness is the primary treatment focus.
- T. RTP Referral Committee: Facility-based referring clinicians and mental health supervisors who have completed RTP referrals and participate in consultation and triage of RTP referrals. This committee is chaired by the Mental Health Administrator or designee. The Mental Health Administrator or designee then coordinates the movement of offenders to and from the residential treatment programs.
- U. Serious Mental Illness: The current diagnosis of any of the following DSM diagnoses accompanied by the P code qualifier of M, denoting the presence of a major mental disorder: schizophrenia, schizoaffective disorder, delusional disorder, schizophreniform disorder, brief psychotic disorder, substance-induced psychotic disorder (excluding intoxication and withdrawal), unspecified schizophrenia spectrum and other psychotic disorder (previously psychotic disorder not otherwise specified), major depressive disorders, and bipolar disorders. Offenders, regardless of diagnosis, indicating a high level of mental health needs based upon high symptom severity and/or high resource demands, which demonstrate significant impairment in their ability to function within the correctional environment.
- V. Significant Functional Impairment: The demonstration of difficulty functioning within the confines of the correctional environment as evidenced by engaging in deliberate self-harming behaviors, such as cutting, self-mutilation, ingestion or insertion of a foreign body, head banging, drug overdose, hanging, biting, or jumping from heights with intent to cause self-harm; demonstrating difficulty maintaining activities of daily living such as eating, maintaining personal hygiene, or participating in recreation; and/or a pervasive pattern of dysfunctional, bizarre, or disruptive social interaction as a consequence of an underlying mental disorder.
- W. Staffing: A formal comprehensive offender case planning review and/or treatment planning review by the multi-disciplinary team.
- X. Status: A housing and management assignment other than General Population.
- Y. Tether Table: A table designed to allow offender participation in programs, activities, and group therapy to which offenders are restrained.
- Z. Therapeutic Contact Hours: Individual and/or group services facilitated by behavioral health, psychiatry, nursing, and/or medical staff for the purpose of promoting achievement of the offenders treatment plan and program success. Therapeutic interventions such as animal-assisted therapy and recreational therapy are included.

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#### IV. PROCEDURES

##### A. GENERAL PROVISIONS

1. Each facility that provides a residential treatment program for offenders with mental illness and/or intellectual or developmental disabilities shall utilize a planned incentive system that encourages and reinforces program compliance and pro-social behavior while meeting goals.
2. Behavioral health and clinical staff working in residential treatment programs shall be provided training in trauma informed practice, annual refresher, and self injurious behavior treatment. Correctional employees shall be provided training in Mental Health First Aid, trauma informed practice, and self injurious behavior treatment. The training will allow employees to perform at a high level of professionalism and motivate offenders to succeed, while ensuring the safety and security of the facility. All staff working in an RTP are required to take annual refresher training in Mental Health First Aid, trauma informed practice, and self injurious behavior treatment.
3. Behavioral health staff shall provide evidence based treatment, from an approved list of treatment curriculums, which includes individual, group, or recreational therapies. Therapy booths and tether tables may be used to deliver residential treatment programs as required by the level system.
4. Residential treatment programs will offer offenders at all levels a minimum of ten out-of-cell therapeutic contact hours per week, and a minimum of ten out-of-cell non- therapeutic contact hours per week.
5. Offenders with special education needs will receive appropriate academic support within the program.
6. Mental Health staff and/or case managers, in collaboration with custody/control employees, will make treatment recommendations of level changes in the multi-disciplinary meeting. This meeting will convene weekly. If the multi-disciplinary team cannot reach a consensus regarding a level change, the Health Services Administrator in coordination with Mental Health Administrator will make the determination.

##### B. REFERRAL AND ASSIGNMENT

1. Mental Health staff in any CDOC facility may refer offenders with mental health treatment needs for RTP review. RTP referrals are reviewed on a weekly or more frequent basis by the RTP referral committee. Continuity of care will be implemented for offenders referred and assigned for placement in an RTP. Offenders with mental health treatment needs will be reviewed for placement according to diagnosis and treatment needs. Male offenders with mobility accommodations will be referred to San Carlos Correctional Facility (SCCF) for placement and will not be housed at CCF-RTP.
2. Offenders assigned to residential treatment programs shall receive an orientation to the facility as described in AR 850-07, "*Offender Reception and Orientation*."
3. Upon arrival at a residential treatment program, an incentive level that is consistent with the offender's behavior will be assigned by the multi-disciplinary team. An individualized treatment plan will be developed by the mental health staff.
4. The assigned primary mental health clinician/designee shall share relevant behavioral and clinical information with the multi-disciplinary team. The multi-disciplinary team shall convene within five

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working days of the offender's arrival to the RTP and document with a staffing note in DCIS. In instances of transfers of offenders between the RTP's, offenders will be placed in a unit with comparable privileges to the unit they left. CDOC offenders returning from CMHI-Pueblo will be placed in a unit with comparable privileges to the CMHI-P unit from which they were discharged.

5. A planned intervention with the multi-disciplinary team, consisting of a minimum of mental health staff, custody/control supervisor, and case manager or designees shall be held with an offender to address negative actions and/or treatment-interfering behaviors that could prevent an offender's ability to succeed in the residential treatment program. Offenders will be aware of expected behavior and expected treatment participation in order to progress in the program. A staffing note to document the intervention will be entered in the electronic record and the offender's treatment plan may be revised.
6. Continuity of care shall be provided when an RTP participant transfers to any other facility.
7. When an offender who is currently on COPD/LOP sanctions enters the residential treatment program, the multi-disciplinary team will suspend restrictions to further the offender's treatment goals. Offenders at San Carlos Correctional Facility (SCCF) will not be subject to COPD charges due to the acute level of treatment needs. Offenders at Centennial Correctional Facility RTP and the Denver Women's Correctional Facility RTP will be subject to a staffing to determine if COPD charges and sanctions are appropriate.
8. Offenders in an RTP will have access to faith services as defined in AR 800-01, "*Religious Programs.*"
9. In any instance that an offender housed in segregation in CDOC should be diagnosed with a serious mental illness accompanied by the designation of the M qualifier, the offender shall be referred for residential treatment program assessment to determine facility placement within 30 days.

#### C. TREATMENT NEEDS DELIVERY

1. **Centennial Correctional Facility Residential Treatment Program (CCF-RTP):** The CCF-RTP provides specialized programs to offenders with serious mental illness. The CCF-RTP uses a planned incentive level system to promote treatment progress and to prepare offenders for successful community transition while ensuring the safety of employees and offenders.
  - a. Residential Treatment Program Assignment: Male offenders are referred to CCF-RTP through the RTP Referral Committee.
    - 1) RTP Diagnostic Unit: Offenders assigned to the RTP diagnostic unit will be managed as level 2 offenders and will receive level 2 privileges. Offenders will be placed in the RTP Diagnostic Unit for up to ten days. Psychological assessment and psychiatric evaluation will be conducted to determine appropriate placement. If appropriate for CCF-RTP, the offender will be assigned a level and moved into the program housing. Offenders who are found not appropriate for RTP will be reviewed by Offender Services for facility placement.
    - 2) Considerations are made for RTP offenders who pose a serious danger to staff, other offenders, and/or the community. RTP offenders who have escaped from custody, seriously assaulted staff, seriously assaulted offenders, or who are deemed a serious threat to the public, staff, or offenders will be managed between levels 1-3. Progression past level 3 must be recommended by the RTP

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multidisciplinary team with final approval for progression given only by the Warden and Assistant Director of Clinical Services.

b. Level Descriptions: Within the CCF-RTP, there are eight progressive management levels:

- 1) LEVEL 1: Is the most restrictive level of the CCF-RTP. This is a regression level. Offenders are not admitted to the CCF-RTP at this level. Offenders who have displayed inappropriate behavior may be assigned at level 1. Offenders at this level will be evaluated for appropriate behavior. All offenders at this level will be provided with a weekly out-of-cell individual counseling session with the assigned primary clinician. All offenders at this level will be offered ten out-of-cell therapeutic contact hours and ten out-of-cell non-therapeutic contact hours per week.

a) PRIVILEGES: Offenders within this level shall be afforded the following:

- i. One telephone session per month, not to exceed 20 minutes
- ii. One non-contact visiting period per month
- iii. Ten dollars (\$10.00) per week of canteen, limited to purchase of hygiene items, stamps, and writing supplies, such as pens, paper, and envelopes
- v. Offenders at this level are not allowed special canteen items or catalog purchases
- vi. Offenders are allowed to possess two sets of personal thermals

b) PROGRESSION: In order to progress from level 1 to level 2 within the RTP level system, an offender must:

- i. Complete a minimum of seven consecutive days of positive behaviors while at level I.
- ii. Positive participation in a minimum of one individual therapy session with a mental health therapist.
- iii. Identify behaviors that led to regression and coping skills that can be used to effectively decrease the situation.

- 2) LEVEL 2: Is a restrictive level within CCF-RTP. Level 2 is a regression level. Offenders are not admitted at this level. Offenders who have displayed inappropriate behavior may be assigned at Level 2. Offenders placed at this level will be evaluated for appropriate behavior. All offenders at this level will be provided with a weekly out-of-cell individual counseling session with the assigned primary clinician. All offenders at this level will be offered ten out-of-cell therapeutic contact hours and ten out-of-cell non-therapeutic contact hours per week.

a) PRIVILEGES: Offenders within this level shall be afforded the following:

- i. Four telephone session per month, not to exceed 20 minutes
- ii. Two non-contact visiting periods per month
- iii. Twenty -five dollars (\$25.00) per week of canteen
- iv. Offenders at this level are allowed to order special canteen items but may not order catalog purchases
- v. One 12" or 13" television for access for program delivery and recreational interest. A loaner television may be allowed per agreement guidelines.

b) PROGRESSION: In order to progress from level 2 to level 3 within the RTP incentive level

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system, an offender must:

- i. Complete a minimum of seven consecutive days of positive behaviors while at level 2.
- ii. Positive participation in a minimum of one individual therapy session with a mental health therapist.

3) **LEVEL 3:** New admissions to the RTP will normally be assigned to this level. This is considered the transitional level. All offenders at this level will be provided with a weekly out-of-cell individual counseling session with the assigned primary clinician. All offenders at this level will be offered ten out-of-cell therapeutic contact hours and ten out-of-cell non-therapeutic contact hours per week.

a) **PRIVILEGES:** Offenders within this level shall be afforded the following:

- i. Six telephone session per month, not to exceed 20 minutes
- ii. Four non-contact visiting periods per month
- iii. Thirty dollars (\$30.00) per week of canteen
- iv. Work assignments when there are no offenders at level 4 or higher, a porter may be assigned from this level.

b) **PROGRESSION:** In order to progress from level 3 to level 4 within the RTP incentive level system, an offender must:

- i. Complete level 3 core curriculum (eight lessons) or equivalent with active participation
- ii. Demonstrate positive behavior for a minimum of ten consecutive days while at a level 3.
- iii. Describe skills they have learned and how they can apply them to their behaviors.
- iii. Mental health employees and/or case managers, in collaboration with custody/control employees, will submit offenders for consideration of level changes to the multi-disciplinary team.

4) **LEVEL 4:** At this level, an offender has demonstrated program participation and is deemed less risk and warrants increased privileges through the course of their treatment program. All offenders at this level will be provided with individual contact sessions every other week with the assigned primary clinician. All offenders at this level will be offered ten out-of-cell therapeutic contact hours and ten out-of-cell non-therapeutic contact hours per week.

a) **PRIVILEGES:** Offenders within this level shall be afforded the privileges from the previous level with the addition of the following: (visiting sessions are not in addition to the previous level)

- i. Thirty five dollars (\$35.00) per week of canteen
- ii. Offender will be assigned pod porter duties on a rotating monthly basis. Offenders will not be forced to participate as a porter. This is a non-paid position.
- iii. Based on facility need, porters may be assigned by the housing supervisor and job board.
- iv. Four non-contact visiting periods per month, maximum of two per week. May have visits on the same day.
- v. Offenders may walk to the exercise area and showers unrestrained and unescorted.

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- vi. Unrestrained day hall activities for a maximum of four offenders for one hour 5 days per week.
- b) PROGRESSION: In order to progress from level 4 to level 5 within the RTP incentive level system, an offender must:
  - i. Complete level four core curriculum (eight lessons) or equivalent with active participation.
  - ii. Offenders must demonstrate positive behavior for a minimum of 14 consecutive days while at a level 4.
  - iii. Mental health employees and/or case managers, in collaboration with custody/control employees, will submit offenders for consideration of level changes to the multi-disciplinary team meeting.
  - iv. Describe examples of how the cognitive model applies to their personal high risk situations in an interview with mental health staff.
- 5) LEVEL 5: By this level, an offender has demonstrated program participation and is deemed less risk. All offenders at this level will be provided with individual contact sessions every other week with the assigned primary clinician. Level 5 specialty curriculum or the equivalent will be offered.
  - a) PRIVILEGES: Offenders within this level shall be afforded the privileges from the previous level with the addition of the following: (visiting sessions are not in addition to the previous level)
    - i. Thirty five dollars (\$35.00) per week of canteen.
    - ii. Unrestrained day hall activities for a maximum of eight offenders, 1.5 hours, 7 days per week
    - iii. Offenders may be escorted within the facility unrestrained, maximum of eight offenders
    - iv. Offenders may participate in a structured unrestrained gym/recreation for eight offenders
    - v. Eight unrestrained offenders may participate in group therapy in the programs area
    - vi. Four contact visiting periods per month, maximum of two per week. May have visits on the same day.
  - b) PROGRESSION: In order to progress from level 5 to level 6 within the RTP incentive level system, an offender must:
    - i. Complete level 5 specialty curriculum or equivalent with active participation.
    - ii. Demonstrate positive behavior for a minimum of 14 consecutive days while at a level 5.
    - iii. Demonstrate an ability to identify antisocial thinking and behavior that contributed to their restricted classification in an interview with mental health staff.
    - iv. Mental health employees and/or case managers, in collaboration with custody/control employees, will submit offenders for consideration of level changes to the multi-disciplinary team meeting.
- 6) LEVEL 6: All offenders at this level will be provided with individual contact sessions every other week with the assigned primary clinician. Level 6 specialty curriculum or the equivalent



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will be offered. Level 6 offenders will initiate a WRAP plan or a relapse prevention plan.

- a) **PRIVILEGES:** Offenders within this level shall be afforded the privileges from the previous level with the addition of the following: (visiting sessions are not in addition to the previous level)

- i. Unrestrained day hall activities for a maximum of eight offenders, 1.5 hours, 7 days per week
- iii. Forty dollars (\$40.00) per week of canteen.
- iv. An offender may participate in a structured unrestrained gym/recreation for eight offenders at a time.
- v. Eight unrestrained offenders may participate in group therapy in the programs area.
- vi. Four contact visiting periods per month, maximum of two per week. May have visits on the same day.
- vii. An additional two phone sessions for a total of eight phone sessions per month, not to exceed 20 minutes each.
- viii. An offender may participate in unrestrained library access with no more than four offenders at a time.

- b) **PROGRESSION:** In order to progress from level 6 to level 7 within the RTP incentive level system, an offender must:

- 1) Complete level 6 specialty curriculum or equivalent with active participation.
- 2) Demonstrate positive behavior for a minimum of 21 consecutive days while at a level 6.
- 1) Begin a Wellness Recovery Action Plan (WRAP) or relapse prevention plan that describes risks and plans for successful progression.
- 2) Mental health employees and/or case managers, in collaboration with custody/control employees, will submit offenders for consideration of level changes to the multi-disciplinary team meeting.

- 7) **LEVEL 7:** All offenders at this level will be provided with one out-of-cell individual counseling session per month with the assigned primary clinician. Level 7 specialty curriculum or the equivalent will be provided. Level 7 offenders will complete the WRAP plan or the relapse prevention plan.

- a) **PRIVILEGES:** Offenders within this level shall be afforded the privileges from the previous level with the addition of the following: (visiting sessions are not in addition to the previous level)

- i. Open day hall activities for a maximum of 16 offenders
- iii. Fifty dollars (\$50.00) per week of canteen purchases.
- iv. Eight phone sessions per month, not to exceed 20 minutes each.
- v. Six contact visiting periods per month, may have two of the visits on the same day, maximum of three per week.
- vi. Offenders will be allowed to participate in offender photo opportunities when offered through recreation. Offenders must have funds in their banking account in order to participate. Recreation staff will provide information/guidelines to offenders that meet the criteria.

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- vii. An offender may participate in unrestrained library access with no more than eight offenders at a time.
  - viii. Maximum of 16 unrestrained offenders may be out in the day hall at one time for recreational activities such as board games, and meals. Offenders will receive one recreation period in the gym once per week as scheduled in groups of 16 offenders at a time.
  - ix. Offenders will be reviewed for placement in available job assignments.
- b) **PROGRESSION:** In order to progress from level 7 to level 8 within the RTP incentive level system, an offender must:
- i. Complete level 7 specialty curriculum or equivalent with active participation.
  - ii. Offenders must demonstrate positive behavior for a minimum of 28 consecutive days while at a level 7.
  - iii. Complete and present a Wellness Recovery Action Plan (WRAP) or Relapse Prevention Plan to their therapist and/or group which is approved by the therapist.
  - iii. Mental health employees and/or case managers, in collaboration with custody/control employees, will submit offenders for consideration of level changes to the multi-disciplinary team meeting.
- 8) **LEVEL 8:** All offenders at this level will be provided with one out-of-cell individual counseling session per month with the assigned primary clinician. Level 8 specialty curriculum or the equivalent will be provided.
- a) **PRIVILEGES:** Offenders within this level shall be afforded the privileges from the previous level with the addition of the following: (visiting sessions are not in addition to the previous level)
- i. Open day hall activities for a maximum of 16 offenders
  - ii. One hour per day five days per week in the exercise yard, maximum of 16 offenders.
  - iii. \$60.00 per week of canteen purchases.
  - iv. Unlimited phone sessions during all day halls and/or in cell.
  - v. Maximum of 16 unrestrained offenders may be out in the day hall at one time for recreational activities such as board games, and meals.
  - vi. Offenders are eligible for eight contact visits a month, maximum of two per week.
  - vii. Offenders will receive one recreation period in the gym once per week as scheduled in groups of 16 offenders at a time.
  - viii. Offenders will be allowed to participate in offender photo opportunities when offered through recreation. Offenders must have funds in their banking account in order to participate.
  - ix. Offenders are eligible to be escorted to the library one time per week in groups of up to eight offenders at a time.
  - x. Offenders are eligible to participate in scheduled religious programming in groups of up to eight offenders at a time in accordance with AR 800-001.
  - xi. Offenders will be reviewed for placement in available job assignments.
- b) **Progression:** In order to progress from level 8 to program completion from the residential treatment program incentive level system, an offender must:

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- i. Complete level 8 specialty curriculum or equivalent with active participation.
- ii. Demonstrate positive behavior while at a Level 8.
- iii. Complete and present a transition plan to their therapist and/or group which is approved by the mental health therapist.
- iv. Mental health employees and/or case managers, in collaboration with custody/control employees, will submit offenders for consideration of level changes to the multi-disciplinary team meeting.

c. **CRITERIA FOR MOVEMENT/TRANSITION TO PROGRESS OUT OF THE CCF-RTP:**

- 1) Completion of an approved safety and relapse prevention plan and the ability to describe this safety plan in an interview setting with mental health staff.
- 2) Completion of an approved transition plan and describe it in an interview with mental health staff.
- 3) Adequately address antisocial thinking and behavior that contributed to their classification assignment. Must be able to describe the cognitive change model and give examples of how they apply the model
- 4) Adequate level of psychiatric stability:
  - a) Brief Psychiatric Rating Scale (BPRS) score of 45 or below
  - b) Resource Consumption Scale (RCS) of eight or below
- 7) Offenders successfully completing the requirements of the residential treatment program are eligible for return to general population or transitional programs at a designated facility.
- 8) The multi-disciplinary team will meet upon recommendation from the treating mental health clinician to determine successful completion and refer for transitional program or general population.
- 9) For all offenders who are paroling from the CCF-RTP program at any level or status, or who are discharging their sentence from the CCF-RTP program at any level or status, the mental health transition form must be completed prior to their departure in order to promote community success, continuity of care and community safety.

2. **San Carlos Correctional Facility:** The San Carlos Correctional Facility (SCCF) is a residential treatment program (RTP) designed to assess and treat offenders with acute serious mental illness and intellectual and developmental disabilities. SCCF uses a planned incentive level system and a multi-disciplinary team approach to assist offenders in reaching treatment goals and preparing them for successful community transition.

- a. Offenders are referred to SCCF through the RTP Referral Committee. All offenders arriving at SCCF will be housed at an incentive level that is consistent with their behavior.
- b. The Positive Development Program (PDP) is a direct admission and direct discharge program located on 2-left for offenders with intellectual and developmental disabilities.
- c. SCCF offers a specialized program which includes group therapy, psychiatric care, recreational therapy, recreational activities, and appropriate educational activities as needed for offenders to meet individualized treatment goals.
- d. Within SCCF, there may be level descriptions for some living units.

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- 1) Level reductions on all living units, with the exception of 3-Left, will not occur without the consultation and approval of the multi-disciplinary team. Level reviews will be conducted weekly or more often if necessary. Any DOC employee may request a special review based on treatment needs. A COIII or above may order a temporary level reduction pending a full review with Mental Health consultation. All level reductions will be documented through a PCDCIS report. Level reductions may be considered for the following reasons:

- (a) Program non-compliance, demonstration of treatment-interfering behaviors.
- (b) Non-compliance with medical or mental health treatment plans or medication regimen.

2) **1-Left–Assessment and Orientation Unit**

- a) Offenders arriving for placement at SCCF will be initially housed on 1-Left on a five day Assessment/Orientation (A & O) status. Exception to the intake process is authorized for offenders who are sent to the unit for the intellectually and developmentally disabled , 2-Left. The SCCF classification committee (mental health supervisor, case manager III, housing supervisor) can approve placement of new arrival offenders to any unit based on clinical need. Unless otherwise recommended by the SCCF multi-disciplinary team. Offenders will receive property per A&O property allowable list.
- b) During A& O assignment to 1-Left each offender will be evaluated by mental health to determine their clinical treatment/program needs.
- c) The results of the assessment process conducted by mental health staff on 1-Left will determine the offender's permanent placement at SCCF or transfer to another facility. For offenders who are appropriate for treatment in SCCF, an individualized treatment plan will be completed upon completion of the intake process. For offenders who are not appropriate for treatment in SCCF and who will be transferred to another facility, continuity of care will be provided to the receiving facility. All offenders at this level will be offered ten out-of-cell therapeutic contact hours and ten out-of-cell non-therapeutic contact hours per week

When there is a need to maintain an offender on 1-Left for more than seven days due to bed space or assessment needs, the following privileges will be provided:

- (1) 1 phone call per week
- (2) One non contact visit during scheduled visiting times
- (3) Fifteen (\$15.00) dollars a week for canteen
- (4) Law library and library access through the library request form
- (5) Personal/loaner TV program
- (6) Assigned work within the unit

- 3) **1-Right - Chronic Stabilization Unit** will house offenders who have been determined to have a serious mental illness from the Assessment and Orientation unit. Treatment plan development and medication management will be the primary functions of this unit. Mental health individual and group therapy will be provided. Petitioning and administration of involuntary medications may occur. Offenders in need of stabilization due to their mental illness may also be regressed to

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this unit.

- a) Offenders housed on 1-Right will be offered all privileges allowed on 1-Left plus those privileges as defined on 1-Right Chronic Stabilization incentive level system.
- b) Chronic Stabilization Level 1  
All offenders on initial assignment to 1-Right will be assigned as a Level 1 for the initial seven days. All offenders at this level will be offered ten out-of-cell therapeutic contact hours and ten out-of-cell non-therapeutic contact hours per week. During the initial seven days while assigned to Level 1, the offenders will have the following privileges:

- (1) Open access to unit telephones during scheduled day hall
- (2) Open access to showers during scheduled day hall
- (3) Non-contact visits during scheduled visiting times
- (4) Twenty dollars (\$20.00) per week of allowable canteen purchases
- (5) Law library and library access through the library request form

- c) Chronic Stabilization Level 2  
After completing the seven-day review and multi-disciplinary team approval, the offender will progress to Level 2. All offenders at this level will be offered ten out-of-cell therapeutic contact and ten out-of-cell non-therapeutic contact hours per week. Offenders will be afforded all of the following privileges:

- (1) Open access to unit telephones during scheduled day hall
- (2) Open access to showers during scheduled day hall
- (3) Non-contact visits during scheduled visiting times
- (4) Twenty-five dollars (\$25.00) per week of allowable canteen purchases
- (5) Law library and library access through the library request form

- d) The multi-disciplinary team will conduct level reviews once a week. Any DOC employee may request a special review based on possible treatment or facility needs. A COIII or above may order a temporary level reduction pending a full review with Mental Health consultation. The following criteria will be used to progress to Level 2:

- (1) Program compliance including maintaining hygiene of self and cell.
- (2) Treatment and medication compliance.

Once level 2 has been achieved and maintained for 14 days, the offender will be reviewed for movement to Unit 2- Right, the progressive stabilization unit. Exceptions to these criteria may be approved by the multi-disciplinary team based on treatment need or facility need.

- 4) **2-Left – Intellectually and Developmentally Disabled Unit** will house offenders with deficits in developmental, learning, and intellectual functioning. The unit will assist offenders to develop social, vocational, behavioral, and daily living skills. The CDOC Developmental Disabilities Coordinator will consult with the RTP referral committee and coordinate admissions and discharges from the unit for the intellectually and developmentally disabled. All offenders at this level will be offered ten out-of-cell therapeutic contact hours and ten out-of-cell non-therapeutic

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contact hours per week

- a) Offenders assigned to the Intellectually and Developmentally Disabled Unit will participate in the Positive Development Program (PDP). The offenders will receive intake orientation and assessments in 2-Left upon their arrival.
- b) The Positive Development Program (PDP) uses the Behavior Risk Assessment, Intervention and Incentive Level System (BRAILS) to control and monitor the behavior of the offenders on the unit. BRAILS consist of three (3) incentive levels. Offenders housed on this unit will have privileges (BRAILS) determined by an in-house group living team which consists of three or more DOC employees assigned to 2- Left. BRAILS provides for increasing or decreasing levels (Level A, Level B and Level C) of privileges based on meeting established standards of behavior. Level A is the least restrictive with Level C being the most restrictive. BRAILS Data Collection Form (attachment 0650- 107B) is used.
- c) All offenders assigned to 2- Left with hearing disabilities will have access to a TTY phone from the 2- Left control center to use any time they have day hall privileges to make phone calls.
- d) Upon initial arrival to SCCF offenders will not receive any property until cleared by mental health staff. Unit staff will search all property before issuing it to the offender. Offenders housed on 2-Left will be afforded the following privileges.

(1) Level C

- (a) Fifteen dollars (\$15) allowable weekly canteen purchases
- (b) Law library and library access through the library request form

(2) Level B

- (a) Twenty dollars (\$20) allowable weekly canteen purchases
- (b) Law library and library access through the library request form
- (c) Personal/loaner TV program
- (d) Program access outside the unit

(3) Level A

- (a) Thirty dollars (\$30) allowable weekly canteen purchases
- (b) Library two hours per week with a maximum of eight offenders per visit
- (c) Personal/loaner TV program
- (d) Program access outside the unit
- (e) Access to offender jobs, on or off of the unit if approved by the classification committee.

- 5) **2-Right – Progressive Stabilization Unit** will house offenders who have demonstrated symptom improvement. Treatment participation, appropriate socialization, improved hygiene, medication management, and the ability to follow directions are demonstrations of the progress in treatment goals for the offenders in the unit. All offenders at this level will be offered ten out-of-

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cell therapeutic contact hours and ten out-of-cell non-therapeutic contact hours per week

- a) All offenders on initial assignment to 2- Right will be assigned as level 2 for seven days.
  - b) Progressive Stabilization Level 2. During these seven days while assigned to level 2, the offenders will have the following privileges:
    - (1) Open access to unit telephones during scheduled day hall
    - (2) Open access to showers during scheduled day hall
    - (3) Non-contact visits during scheduled visiting times
    - (4) Twenty five dollars (\$25.00) per week of allowable canteen purchases
    - (5) Law library and library access through the library request form
    - (6) Up to eight offenders will be allowed to attend recreation in the gym or yard for one hour five days a week. If more than eight offenders are requesting to participate, a rotating scheduled will be used.
  - c) Progressive Stabilization Level 3
    - (1) Open access to unit telephones during scheduled day hall
    - (2) Open access to showers during scheduled day hall
    - (3) Up to eight offenders will be allowed in the day hall for meals. If more than eight offenders are on level 3, a rotating schedule will be used
    - (4) Non-contact visits during scheduled visiting times
    - (5) Twenty five dollars (\$25.00) per week of allowable canteen purchases
    - (6) Law library and library access through the library request form.
    - (7) Up to eight offenders will be allowed to attend recreation in the gym/yard for one hour four days a week. If more than eight offenders are requesting to participate, a rotating scheduled will be used
    - (10) Once level 3 has been achieved and maintained for 14 days, offender will be reviewed for movement to Unit 4-Left – Treatment Unit.
  - d) Offenders on level 2 that require a level reduction may be moved to another unit based on the multi-disciplinary team recommendations.
  - e) Offenders placed on mental health watch and offenders on level 1 may remain on 2--Right with approval from the multi-disciplinary team.
- 6) **2 West Unit** Offenders who arrive at SCCF that are too dangerous, violent or disruptive to participate in the progressive tier program, may be housed in 2-West unit. 2-West is also a regressive unit for SCCF offenders who demonstrate psychiatric instability that includes behaviors that are dangerous, disruptive, violent, and/or place their own safety at risk. The multi-disciplinary team will review/approve all offenders going in and progressing out of 2-West unit.
- a) All offenders on 2-West unit will be managed through a behavior treatment plan which will include 10 hours of therapeutic out-of-cell time and 10 hours of non-therapeutic out-of-cell time per week.

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- b) Behavior treatment plans will be developed by mental health staff in consultation with the multidisciplinary team
  - c) Reviews will be conducted weekly by the multidisciplinary team.
- 7) Offenders who arrive at SCCF that are a substantial risk of serious harm due to protective custody as described in AR650-02 will be managed as follows:
  - a) Offenders on protective custody status will be immediately placed in 2-West.
  - b) Mental health staff will conduct an assessment of offenders on protective custody status within one working day of arrival to determine the treatment needs of the offender.
  - c) Further assessments by case management, custody/control, medical, intel, and programs will be completed.
  - d) Offenders on protective custody status will be interviewed and assessed by the SCCF intelligence officer a minimum of once every 30 days.
  - e) Offenders on protective custody status will be managed through a behavior treatment plan.
  - f) Offenders on protective custody status will not have direct contact with other offenders housed in 2-West unless the other offenders are on protective custody status.
  - g) Offenders on protective custody status who are participating in treatment, recreational, and program groups will be restrained at the tether table in the multi-purpose room.
  - h) SCCF staff is prohibited from discussing any information or circumstances regarding an offender's protective custody status with other offenders.
- 8) **3-Left– Behavioral Treatment Unit** will house offenders with treatment-interfering behaviors and personality disorders who are in need of treatment to decrease self-harming behaviors and improve coping skills. All offenders in this unit will be offered ten out-of-cell therapeutic contact hours and ten out-of-cell non-therapeutic contact hours per week
  - a) Offenders will be assigned to this unit based on assessment to meet criteria related primarily to personality disorders. Treatment will be provided through intensive group therapy, individual therapy and assignments in an incentive level based program.
  - b) 18 offenders can be out in day hall, recreation time and/or participating in group within the multi-purpose room.
  - c) Unit 3-Left Incentive Level System
    - (1) Level 1 – Offenders assigned to this unit will be assigned level 1 for a minimum of seven days. Offenders assigned to Level 1 will have the following privileges:
      - (a) Up to 12 offenders out at a time during scheduled day hall.
      - (b) Open access to unit telephones during scheduled day hall
      - (c) Open access to showers during scheduled day hall
      - (d) Non-contact visits during scheduled visiting times
      - (e) Twenty five dollars (\$25.00) per week for allowable canteen purchases
      - (f) Law library and library access through the library request form
      - (g) Program access in the unit only with a maximum of five offenders.



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- (2) Level 2 – After completing the seven day review and multi-disciplinary team approval, offender will progress to level 2. Offenders will be afforded all of the following privileges:
- (a) Up to 12 offenders out at a time during scheduled day hall.
  - (b) Open access to unit telephones during scheduled day hall
  - (c) Open access to showers during scheduled day hall
  - (d) Contact visits during scheduled visiting times
  - (e) Thirty dollars (\$30.00) per week for allowable canteen purchases
  - (f) Law library and library access through the library request form
  - (g) Program access available on and off the unit
  - (k) Access to offender jobs on or off of the unit if approved by the classification committee.
- (3) Level 3 – After completing 120 days on level 2, the multi-disciplinary team will review for progression to level 3. Level 3 will have all level 2 privileges plus the following privileges:
- (a) Thirty-five dollars (\$35.00) per week of allowable canteen purchases
  - (b) Access to library two days a week with a maximum number of eight offenders
  - (c) Access to multi-purpose room (game room) as scheduled by unit staff
  - (d) Access to art supplies that have been approved by mental health staff and housing supervisor.
- 9) **3-Right- Treatment Unit** will house offenders who have progressed with their stabilization and are ready for additional mental health groups, individual treatment and off unit activities in vocation, recreation and education. Mental health treatment groups will include both education and process groups. Offenders will receive increased socialization time on the unit with up to 18 offenders. All offenders in this unit will be offered ten out-of-cell therapeutic contact hours and ten out-of-cell non-therapeutic contact hours per week
- a) Offenders on 3-Right are allowed the following privileges:
- (1) 18 offenders may be out together for scheduled day hall time.
  - (2) Thirty dollars (\$30.00) allowable weekly canteen.
  - (3) Library two hours per week with a maximum of eight offenders per visit.
  - (4) Program access outside of the unit.
- 10) **4 Left Unit - Observation and Transition Unit** will house the majority of offenders who will not remain at SCCF for an extended period of time. Unit 4-Left houses offenders who have been evaluated and determined not to need placement at SCCF. This unit will also be used for offenders who are regressed for non-mental health concerns, non-compliance with treatment and/or offenders who have been removed from population (RFP). This unit can also house offenders who need more mental health evaluation for proper placement within SCCF. All offenders in this unit will be offered ten out-of-cell therapeutic contact hours and ten out-of-cell non-therapeutic contact hours per week
- a) Offenders housed on 4-Left may be afforded the following privileges:

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- (1) Open access to unit telephones during scheduled day hall
- (2) Open access to showers during scheduled day hall
- (3) Two non-contact visits per month during scheduled visiting times
- (4) Twenty dollars (\$20.00) per week for allowable canteen purchases
- (5) Law library and library access through the library request form
- (6) Personal/loaner TV program after 14 days of program compliance
- (7) Assigned work within the unit

11) **4-Right - Reintegration Unit** will house offenders who are the most stable with respect to their psychiatric symptoms and behaviors. The primary function of this unit will be to prepare and transition offenders to transition back to other CDOC facilities or to the community. The offenders will be afforded more privileges and off the unit activities (vocation, recreation and education) than those on other units. Mental health groups, educational groups, unit meetings and individual therapy will be provided. Activities will be specifically geared towards transition and may include interviews and outside contacts with receiving facilities and agencies. All offenders in this unit will be offered ten out-of-cell therapeutic contact hours and ten out-of-cell non-therapeutic contact hours per week.

a) Offenders housed on 4-Right will be afforded the following privileges:

- (1) Open access to day hall
- (2) Thirty-five (\$35) dollars allowable weekly canteen purchases
- (3) Library three hours per week with a maximum of eight offenders per visit
- (5) Program access outside of the unit.
- (6) Access to offender jobs if approved by the classification committee.

12) Requests for additional offenders out of their cell for day hall, recreation, education, or groups that exceed the quotas outlined in AR650-04 must be approved by the custody/control manager or designee. Additional staff will be required to supervise the additional offenders.

13) A behavioral treatment plan (BTP) may be utilized as a tool to manage offender behavior. All BTP's will be approved by the multidisciplinary team.

- d. With the exception of Unit 4-Right, a minimum of two CDOC staff members will be present on all treatment units when offenders are out of their cells.
- e. Allowable property is defined in IA850-06, Offender Property.
- f. New arrivals will be issued one flex pen and one short toothbrush by the intake officer or, in their absence, by the housing officers within 24 hours of arrival unless the offender has these items in their property.
- g. For all offenders who are paroling from SCCF at any level or status, or who are discharging their sentence from SCCF at any level or status, the mental health transition form must be completed prior to their departure in order to promote community success, continuity of care and community safety.

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3. **Denver Women's Correctional Facility Residential Treatment Program (DWCF-RTP):** The Denver Women's Correctional Facility (DWCF) has a 48-bed residential treatment program (RTP) designed to assess and treat female offenders with a serious mental illness and/or intellectual and developmental disabilities. DWCF-RTP uses a planned incentive level system and a multi-disciplinary team approach to assist offenders in obtaining treatment goals and prepares them for a successful transition into general population or transition into the community. DWCF-RTP offers a behavior driven program which includes group therapy, psychiatric care, recreational therapy, recreational activities, and educational programs. The DWCF-RTP offers a minimum of ten hours of out-of-cell therapeutic contact and ten hours of out-of-cell non-therapeutic contact per week for offenders on all levels.
  - a. Intake/Orientation: Offenders arriving on the residential treatment program will be placed on the intake incentive level for no more than 10 days. Offenders will be evaluated for mental health needs through psychological testing, clinical interviews, psychiatric evaluation, and behavior observation in order to determine pod placement, and course of treatment. Offenders will have an orientation to the RTP. All offenders in this unit will be offered ten out-of-cell therapeutic contact hours and ten out-of-cell non-therapeutic contact hours per week. The intake incentive level will have Level 1 privileges.
    - 1) Level 1: Is the most restrictive level of the treatment program and is also a regression level. Offenders who have displayed inappropriate behavior may be assigned or regressed to Level 1. Offenders who were regressed to this level will be evaluated for progression for a minimum seven day period.
      - a) Level 1 Privileges:
        - (1) One phone call per week
        - (2) One non- contact visit a week during scheduled visiting times
        - (3) Twenty (\$20.00) Dollars a week for canteen
        - (4) Law library and library access through the library request form
        - (5) Personal/loaner radio and TV program
      - b) Level 1 Progression: In order to progress from Level 1 to Level 2 within the residential treatment program incentive level system an offender must:
        - (1) Complete a three day intake and orientation.
        - (2) Positive participation in a minimum of two individual therapy sessions with a mental health therapist.
    - 2) Level 2: At this level, an offender has demonstrated some program participation and is deemed to be at a lower risk level, as evidenced by pro-social behaviors and positive interactions with staff and peers. This warrants increased privileges through the course of their treatment program.
      - a) Level 2 Privileges: Offenders within this level shall be afforded the following privileges:
        - (1) Open access to unit telephones during scheduled day hall
        - (2) Open access to showers during scheduled day hall
        - (3) Two non- contact visits a week during scheduled visiting times
        - (4) Sixty (\$60.00) Dollars a week for canteen

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- (5) Law library and library access through the library request form
- (6) Personal/loaner radio and TV program
- (7) May have a job assignment on the unit

b) Level 2 Progression:

- (1) Complete a minimum of eight core curriculum group sessions with active participation in group.
- (2) Demonstrate treatment and medication compliance and positive behavior for a minimum of 14 consecutive days while at Level 2.

c) Level 2 Regression:

- (1) Any DOC employee may recommend the reassignment of offenders to a lower level based on negative behavior.
- (2) This behavior will be documented in the electronic chronological system.
- (3) The housing supervisor (CO III or CO IV) and mental health staff, will be notified of the recommendation and approve or deny the reduction in level prior to a weekly scheduled multi-disciplinary team review meeting.

3) Level 3: At this level, an offender continues to demonstrate on-going treatment compliance, program participation, attends activities on and off the unit and is deemed to present the least level of risk.

- (1) Open access to unit telephones during scheduled day hall
- (2) Open access to showers during scheduled day hall
- (3) Open access to contact visits each week during scheduled visiting times
- (4) Seventy-Five (\$75.00) Dollars a week for canteen
- (5) Law library and library access through the library request form
- (6) Personal/loaner radio and TV program
- (7) May have a job assignment on or off the unit
- (8) May participate in the K-9 Companion program during scheduled day hall.
- (9) Access to unit washer and dryer
- (10) Access to unit irons
- (11) May purchase an additional two catalog blankets and retain one hobby blanket for a total of five blankets
- (12) May have special cosmetology privileges

a) Level 3 Progression: In order to progress from Level 3 to general population an offender must:

- (1) Complete a minimum of four core curriculum groups with active participation in group.
- (2) Demonstrate treatment and medication compliance, positive behaviors, and meet target behaviors for a minimum of 21 consecutive days while at Level 3.
- (3) Complete and present a Wellness Recovery Action Plan (WRAP) or Relapse Prevention Plan for their primary therapist and group members.

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b) Level 3 Regression:

- (1) Any DOC employee has the authority to recommend the reassignment of offenders to a lower level based on negative behavior.
- (2) This behavior will be documented in the electronic chronological system.
- (3) The housing supervisor (CO III or CO IV) and mental health staff, will be notified of the recommendation and approve or deny the reduction in level prior to a weekly scheduled multi-disciplinary team review meeting.

- b. For all offenders who are paroling from DWCF at any level or status, leaving on probation, or who are discharging their sentence from DWCF at any level or status, the mental health transition form must be completed prior to their departure in order to promote community success, continuity of care and community safety.

V. RESPONSIBILITY

- A. It will be the responsibility of the Chief of Behavioral Health Services and the Assistant Director of Clinical Services, to enforce and maintain this administrative regulation.
- B. It will be the responsibility of administrative, program, and correctional DOC employees and contract workers to be familiar with this administrative regulation.

VI. AUTHORITY

C.R.S. 17-1-103(a.5), Duties of the Executive Director

VII. HISTORY

December 15, 2013  
September 15, 2013  
NEW

- ATTACHMENTS:
- A. AR Form 650-04B, BRAILS Data Collection Form
  - B. AR Form 650-04C, RTP Program Level Review
  - C. AR Form 100-01A, Administrative Regulation Implementation/Adjustments

## BRAILS DATA COLLECTION FORM

## 2 LEFT/DD UNIT

**Key:**      **1. Treatment Plan Non-Compliance**  
              **2. Class II**  
              **3. Class I**

[illegible]

**RTP PROGRAM  
LEVEL REVIEW**

Offender Name (Print First and Last Name)	DOC Number	Cell Assignment	Date
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Current Program Level:      Level: 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐

Level Review:                      Progress ☐                      Regress ☐                      No Change ☐

Level Assigned:                      Level: 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐

Shift Commander Initiated Change: Yes ☐ No ☐      Incident Report #: \_\_\_\_\_

Date/Time Entered into DCIS: \_\_\_\_\_

Level Review Committee: Approved ☐ Overridden ☐

Effective Date: \_\_\_\_\_

Next Scheduled Review Date: \_\_\_\_\_

Comments/Reason Why Level Changed or Denied:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Team Members:

Health Services Administrator/Behavioral Health Supv/Designee	Date
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Case Manager III/Designee signature	Date
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Housing Captain Signature	Date
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ADMINISTRATIVE REGULATION  
IMPLEMENTATION/ADJUSTMENTS

AR Form 100-01C (04/15/08)

CHAPTER	SUBJECT	AR #	EFFECTIVE
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(FACILITY/WORK UNIT NAME) \_\_\_\_\_  
WILL ACCEPT AND IMPLEMENT THE PROVISIONS OF THE ABOVE ADMINISTRATIVE REGULATION:

☐ AS WRITTEN   ☐ NOT APPLICABLE   ☐ WITH THE FOLLOWING PROCEDURES TO ACCOMPLISH THE INTENT  
OF THE AR

(SIGNED) \_\_\_\_\_ (DATE) \_\_\_\_\_  
Administrative Head