Maine Department of Corrections

Correctional Programming Division

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Correctional Programming

Correctional programming intersects with many aspects of an offender's life during their incarceration. With a goal of ensuring an offender successfully reintegrates back into the community, the Maine Department of Corrections is committed to ensuring they leave with the education, life skills, and treatment to succeed despite previous obstacles.

Areas that fall under Correction Programming include:

- Classification and Assessment
- Unit Management and Case Management
- CQI (Continuous Quality Improvement) and Data
- Mental Health, Substance Abuse and Sex Offender Treatment Services
- Non-treatment Programming
- Recreation, Religion, and Activities
- Educational Services
- Vocational Services
- Reentry Services
- Restrictive Housing
- Victim Services

Cover photo: Southern Maine Women's Reentry Center.



Deputy Commissioner Ryan Thornell, Ph.D.

A Message

from the Deputy Commissioner

This handbook is intended to provide the reader with a comprehensive overview of Correctional Programming available across the Maine Department of Corrections (MDOC), including the areas that comprise the programming division, the key initiatives underway, and the services offered.

The average sentence of an offender in the custody of the MDOC is 15 months (excluding sentences greater than 40 years). That means regardless of how that individual spends their time in custody, they will ultimately be back in our communities, on average, in less than two years. Providing them with educational, vocational, and behavioral programming targeting and reducing criminogenic risk (those risks which contributed to their incarceration) is our focus.

Correctional Programming in MDOC has undergone significant transformation, expansion, and enhancement in recent years. As you will see in the pages that follow, programming staff provide evidence-based, 21st century risk reduction services to offenders beginning upon an offender's admission into the MDOC all the way through their reintegration into the community. Day to day, staff focus on utilization of the Principles of Effective Intervention – focusing on risk, needs, responsivity, and fidelity of services which combined help mitigate the rate of returns to MDOC custody.

We take our Department's mission seriously, focusing on behavioral change and rehabilitation in an effort to improve offender reintegration and reduce reoffending. Targeted programming is provided based upon objective assessments and sound case management strategies. Additionally, offenders are provided opportunities to be trained by Maine-based employers and hired into Maine-based jobs during work release or upon reentry. These opportunities reduce reoffending and support stronger families and communities.

As you learn more about the Correctional Programming provided in Maine, you will notice our commitment to continuous quality improvement and the roadmap provided by our Strategic Plan. We pride ourselves on our efforts to adhere to fidelity in our practices, challenge status quo provisions, and think outside-the-box. As we expand professional development and implement new technologies across our Department, we look forward to the future initiatives that build upon the tremendous work of our staff.

I hope you find this handbook informative and useful, and encourage you to explore other informational resources available on the MDOC website @ www.maine.gov/corrections/home/quality.shtml

The Correctional Programming Division

The Correctional Programming Division is committed to serving the State of Maine by ensuring offenders—from the recently incarcerated to the long-term committed—leave our facilities with the skills, treatment, and education needed to succeed after their period of incarceration. To ensure effectiveness, we monitor the Division by:

- Reporting regularly on key performance measure outcomes
- Monitoring programs and program delivery for fidelity
- Ensuring programming and treatment services are evidence-based and adhere to national best practices
- Making quality treatment and programming accessible to offenders
- Training, coaching, and mentoring staff to enhance their proficiency in delivering programs and services
- Using current technology for program delivery

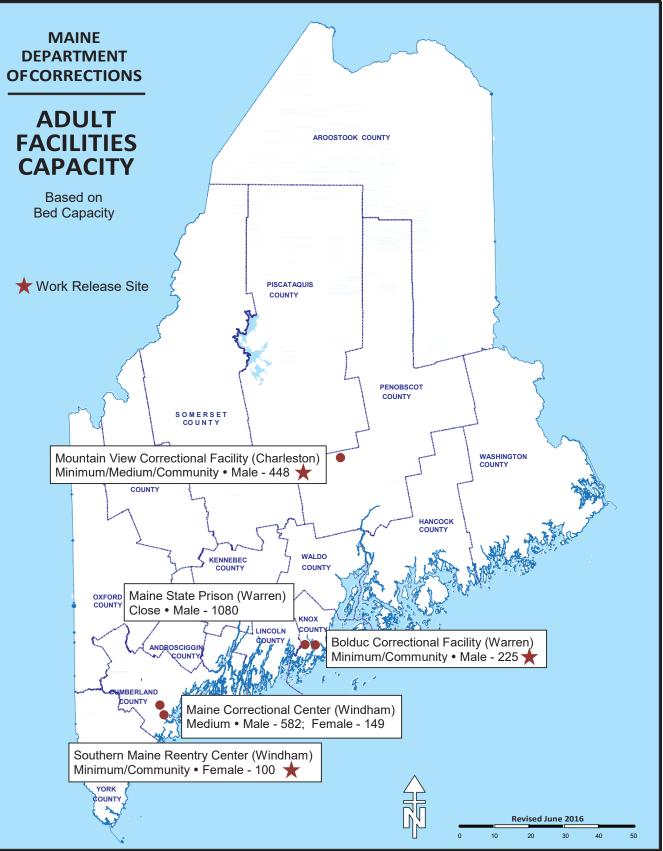
The purpose of this publication is to inform the reader on the Maine Department of Corrections (MDOC) Correctional Programming Division offender rehabilitation efforts through targeted programming and treatment services provided during incarceration. It also offers a broad overview of processes and practices employed by MDOC from initial offender intake, to discharge and community reentry.

In the State of Maine, offenders whose sentence is equal to or greater than nine months and one day are sentenced to the care and custody of Maine Department of Corrections. All lesser sentencing is served in the jurisdiction in which the crime was committed.

The following sections will provide a look at the inner workings of Adult Correctional Facilities at Maine Department of Corrections and our efforts to rehabilitate offenders. These concerted efforts contribute to fulfilling our Department's mission (see box on right).



The mission of the Department of Corrections is to reduce the likelihood that juvenile and adult offenders will re-offend, by providing practices, programs and services which are evidencebased and which hold the offenders accountable.



Overview of MDOC Adult Facilities

The Maine Department of Corrections (MDOC) has five adult correctional facilities spanning from Southern Maine through Central and Western Maine, with a total average daily population of 2,450 in 2018.

Maine Correctional Center and Women's Center

Maine Correctional Center (MCC) is Maine's primary adult reception facility for both male and female offenders and is located in Windham. At any time, this medium security facility has an average census of 582 male and 149 female offenders. All offenders sentenced to less than five years are directly admitted to this facility.

Mountain View Correctional Facility

Mountain View Correctional Facility (MVCF) has a split population and functions as both a medium and minimum security facility for male offenders and is located in Charleston. It has a capacity of 448 Minimum/ Community beds. Both Medium and Minimum beds are located on the same campus, however they are different buildings with appropriate security/ accommodations for their respective custody levels. Medium custody provides treatment beds for residential substance abuse/sex offenders and the Young Adult Offender Program (YAOP). Community Custody provides reentry beds where offenders qualify for work release community job opportunities.

Maine State Prison

Maine State Prison (MSP) is Maine's maximum security facility and is located in Warren. This facility houses an average of 1,080 male offenders. The offenders are classified as close and medium custody. MSP, like MCC, is a receiving facility but for specific offenders, those who sentence exceeds five years, have escape convictions or known escape attempts from a medium or higher security facility, have special needs such as severe mental or emotional health or physical disabilities which pose a threat to themselves or other offenders, and those who have been released within the last three years and at the time of release were classified as close custody. MSP also houses the Department's Intensive Mental House Unit.

Maine Department of Corrections Adult Facilities

Maine Correctional Center (MCC) and Women's Center 17 Mallison Falls Road Windham, ME 04062 (207) 893-7000 Medium Custody Male and Female Population

Mountain View Correctional Facility (MVCF) 1182 Dover Road Charleston, ME 04422 (207) 285-0880 Medium/Minimum/Community Custody Male Population

Maine State Prison (MSP) 807 Cushing Road Warren, ME 04864 (207) 273-5300 Close Custody Male Population

Southern Maine Women's Reentry Center (SMWRC) 230 River Road Windham, ME 04002 (207) 893-7132 Minimum/Community Custody Female Population

Bolduc Correctional Facility (BCF) 516 Cushing Road Warren ME 04864 (207) 273-2036 Minimum/Community Custody Male Population

Overview of MDOC Adult Facilities continued

Work Release Facilities

The Department operates three facilities that participate in work release:

- Bolduc Correctional Facility
- Mountain View Correctional Facility
- Southern Maine Women's Reentry Center

The work release program in the minimum facilities provides offenders who meet specific criteria the opportunity to gain employment in the community.

The program allows for offenders to earn wages which are used for room and board, restitution, personal expenses and savings.

The Average Length of Stay for adult MDOC offenders is 1.71 years (or, 20.52 months)

Southern Maine Women's Reentry Center

Southern Maine Women's Reentry Center (SMWRC) is Maine's only female reentry center and is located in Windham. This is a 100-bed capacity minimum-security work release facility. Offenders residing here are minimum or community classification level and can work in the community while still being incarcerated. Female offenders can qualify for SMWRC when they have four years or less remaining on their sentence and are classified as minimum security.

Bolduc Correctional Facility

Bolduc Correctional Facility (BCF) is a minimum and community custody facility with a capacity of 225 male offenders, located in Warren. Offenders residing here have four years or less left on their sentence. Programming and services include educational and vocational training, substance abuse treatment and the ability to participate in a community work release program.

MDOC Strategic Initiatives

Restrictive Housing Reform

The Maine Department of Corrections has taken a proactive approach in reforming the use of restrictive housing. The outcomes of these efforts includes decreased placements, shortened duration of placements, decreased facility incidents, and improved case plan and program compliance.

On average, 1% of the Department's adult prison population is housed in a restrictive housing setting at any given time. A few aspects of the new approach to restrictive housing include:

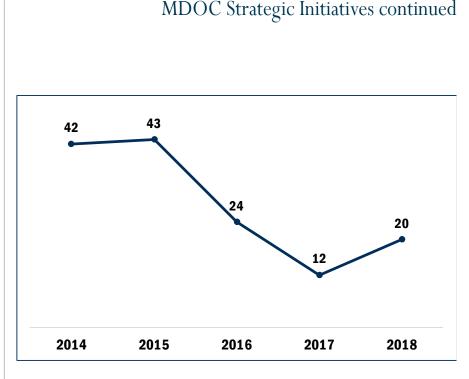
- Offenders spend two to four hours out of their cell each day, seven days per week, for programming and education, recreation, on-unit work, and structured activity.
- The new physical environment provides considerably more daylight, access to improved outdoor recreation space, modern exercise equipment, and secured programming space.
- Use of a revised level system allows offenders to earn additional privileges, property, and commissary, as well as paid work opportunities and gradual decreased use of restraints.

• High level of accountability in the placement and review process.

Restrictive Housing (also known as solitary confinement) is defined as "the inability (for an offender) to leave the room or cell for the majority of the day, typically 22 hours or more."



The Restrictive Housing Unit at the Maine State Prison.



Average Daily Population (Maine State Prison) Segregation Unit. Review and then reforms were implemented in September 2015.

Every offender placed in restrictive housing is reviewed within the first 72 hours of placement, and if retained, provided an appropriate case plan. Behavioral expectations, regular and meaningful reviews, and individual case plan progress are utilized to progress offenders back into general population in the most safe and efficient manner.

Intensive Mental Health Unit (IMHU)

The Maine Department of Corrections provides intensive treatment and care of incarcerated individuals with serious mental health challenges. Maine State Prison houses the Intensive Mental Health Unit (IMHU), for acute or severe mental health needs. The IMHU is a 32-bed unit and was opened in February 2014. Since that time, the IMHU has continuously housed an average of 25 residents referred from within the Department of Corrections, Riverview Psychiatric Center, and Maine's County Jails. Since the IMHU opened, it has housed the most behaviorally challenging offenders suffering from acute, severe, and persistent mental health issues. The IMHU special needs population has received intensive, focused treatment, not available in general population at this or other DOC facilities.

Intensive Mental Health Unit

- Provides mental health patients with a structured daily routine with intensive clinical treatment and care.
- Delivers educational and enrichment programming, along with agricultural activities.
- Ensures regular and adequate security and safety for staff and residents.

MDOC Strategic Initiatives continued

Release and Reentry

The Maine Department of Corrections releases approximately 1,200 offenders annually. Reentry planning is initiated at the time of admission and is a focus throughout an offender's time, most notably during the last nine months of incarceration. A high percentage of these offenders release directly from a treatment program or pre-release setting to the community. In order to adequately address an offender's reentry needs, the Department provides a variety of services including:

- Dedicated intensive reentry Case Managers who work with offenders up to 30 days prior to their release and 90 days after release.
- Enrollment in the WorkReady vocational education program.
- Enrollment in the Planning Your Release (or similar) release planning program.
- Individualized release planning with case management staff, beginning at the time of admission and becoming a primary focus nine months before release.
- Referral to Department of Health and Human Services (DHHS) Intensive Case Management Services (if appropriate).
- Partnerships with DHHS, Social Security, Bureau of Motor Vehicles, and Department of Labor Career Centers for direct referrals and provisions of services.
- Placement onto the Supervised Community Confinement Program.

Gender-Responsive Practices

To achieve successful outcomes for female offenders, the Maine Department of Corrections uses evidence-based, gender-responsive, and trauma-informed assessments and programming. Challenges faced by women involved in the criminal justice system differ from their male counterparts. These issues and challenges, such as domestic/sexual violence, substance abuse, trauma and motherhood, are circumstances taken into account by the Department when designing effective programming and services for female offenders.

Initial Incarceration

Intake and Assessment

Upon admission, offenders receive an orientation by security staff to review rules, policies, and general information prior to being placed on the Intake Housing Unit. Offenders placed here can remain on observation status for up to 72 hours. During this time the offender's conduct is observed closely by security staff before being allowed to have contact with other offenders in the Intake Housing Unit.

While in the unit, offenders undergo a wide array of assessments. Conducted by a multidisciplinary team of professionals, assessments consist of medical, security, mental health, and case management. All assessments and screenings are completed within a 14-day period from time of initial incarceration.

Validated Assessment Tools Used Level of Service Inventory-Revised (LSI-R)

Administered by the Intake Housing Unit Case Manager, the LSI-R is an actuarial assessment tool designed to identify offender's risks and needs with regard to recividism. The LSI-R seeks to classify an offender's risk of re-offending as well as to identify their criminogenic needs. This assessment is used in combination with other assessment tools to determine appropriate treatment and programming an offender receives while incarcerated.

The Service Planning Instrument for Women (SPIn-W)

The SPIN-W is a gender-responsive assessment and case planning tool for female offenders. This assessment tool is administered by a Case Manager within 14 days of admission and is used in combination with other assessments to determine appropriate treatment and programming an offender receives while incarcerated.

SPIn-W Risk Domains

- Criminal History
- Response to Supervision
- Family and Children
- Social Network
- Substance Use
- Vocational/Employment
- Attitudes
- Social/Cognitive Skills
- Mental Health
- Violence
- Community Living

SPIn-W reviews about one hundred areas to assess risk, needs and protective factors that are relevant for increasing responsiveness in case work with female offenders.

Domains include attitudes, aggression, interpersonal skills, and cognitive skills and take into account how these risk factors are manifested in female populations.

Assessment Tools

The Maine Department of Corrections uses a variety of screening and assessment tools to place offenders in appropriate treatment services.

Current assessment tools include:

- LSI-R
- SPIn-W
- PREA screening
- TCUDS II
- ODARA

LSI-R Risk Domain Areas

- Criminal History
- Education/Employment
- Financial
- Family/Martial
- Accommodation
- Leisure/Recreation
- Companions
- Substance (Alcohol/Drug) Problems
- Emotional
- Attitudes/Orientation

Prison Rape Elimination Act (PREA)

PREA, a Federal Act passed in 2003:

- provides for the analysis of the incidents and effects of prison rape in Federal, State, and local institutions
- provides information, resources, recommendations and funding to protect individuals from prison rape
- · states all jails and prisons must comply with aspects of this mandate

MDOC includes a PREA screening for potential sexual violence, prevention, detecting, and ultimately eliminating of sexual abuse of offenders at intake. MDOC has PREA compliance staff who monitors and follow-up on all allegations of offender sexual abuse. Appropriate actions are taken for victims and perpetrators if sexual violence has taken place at an MDOC facility. The PREA compliance staff is also responsible for mandatory reporting to the Federal Government agency.

Comprehensive Medical, Behavioral Health, Substance Abuse, and Sex Offender Assessments

Upon admission, Wellpath, MDOC's comprehensive medical care contracted provider administers formal and informal screenings and assessments. Within 14 days of admission, offenders are assessed by a mental health clinician for needs which may require a referral to psychiatry or follow up treatment. Offenders also receive a full medical exam to identify medical needs requiring ongoing care and/or follow-up care. The medical department will document restricted activities that could impact housing and work assignments. Substance abuse screenings are conducted in conjunction with the mental health assessment. Offenders with assessed need of substance abuse, mental health and other medical care are referred to appropriate services by the MDOC medical vendor.

Texas Christian University Drug Screen II (TCUDS II)

TCUDS II is a standardized 15-item screening tool that helps identify individuals with a history of heavy drug use or dependency. The instrument is widely used in adult criminal justice and correctional settings. Items on the TCUDS II represent key clinical and diagnostic criteria for substance abuse dependence as specified in the Diagnostic and Statistical Manual (DSM-IV) and the NIMH Diagnostic Interview Schedule (NIMH DISC).

MDOC Security Custody Levels

- Close Custody: Offender has demonstrated irresponsible behavior (assaultive/dangerous behavior/threats, serious institutional misconduct, history of escape or escape attempt, etc.)
- Medium Custody: Offender has demonstrated limited responsible behavior.
- Minimum Custody: Offender has demonstrated responsible behavior.
- Community Custody: Offender has demonstrated sustained responsible behavior and is case plan compliant.

Types of Housing Units

- Reception/Intake
- General Population
- Long-Timers
- Close Custody
- Pre-Release
- Veteran's Pod
- Restrictive Housing (RH)
- IMHU (Intensive Mental Health Unit)
- Residential Sex Offender (SO) Program
- Young Adult Offenders
- Assisted Living
- Residential Substance Abuse (SA)
 Program

Ontario Domestic Assault Risk Assessment (ODARA)

The ODARA is an assessment tool used to identify the risk of future assaults against intimate partners, and was developed by the Ontario Provincial Police and the Ontario Ministry of Health and Long Term Care. It was the first empirically developed and validated domestic violence risk assessment tool to assess risk of future intimate partner violence as well as the frequency and severity of these assaults.

Classification

Offender classification is a procedure by which each offender is rated per his/her institutional risk to determine an appropriate housing unit. An initial classification is performed upon admission to a correctional facility after completion of the various intake assessments. An offender's classification board is made up of a Unit Manager, a Case Manager, and a Correctional Sergeant or Officer from the reception unit. Taken into consideration for the initial classification are: crime(s) committed, risk assessments, the Case Manager's intake summary, any other intake assessments, and current and/or past behaviors during incarceration.

Offenders then meet with the board and are given their projected custody level (there are four security classifications custody levels, see box on left) as well as their recommended housing assignment. This provides the offender the opportunity to ask questions or provide additional input; they can also appeal their classification decision once it has been finalized. All scores are sent electronically to the Director of Classification for review and approval.

Re-Classification Review Meetings

Re-classification review meetings are completed to highlight progress, behavior, programming, and ultimately—custody level. Like initial classification, the re-classification process includes a scoring instrument that takes several factors into consideration. Appropriate behavior, being discipline free, case plan compliant, and having adapted well to their living situation may result in a lower classification custody level. Individuals who struggle behaviorally, and are not compliant may also increase their custody level.

Frequency Of Scheduled Classification Reviews

Offenders are scheduled to be reviewed as follows:

• Annually - Offender has more than 4 years (by current custody release date) remaining on their sentence.

- Every Six Months Offender has less than 4 years, and/or are transgender/ intersex.
- Interim Classifications Interim classifications can be held at any time if situations change significantly and/or suddenly.

Offender Privilege Level System

The MDOC's offender Privilege Level System provides an objective system of incentives to offenders in response to their engagement in rehabilitative, responsible and pro-social behavior during their period of incarceration. The Privilege Level System applies to all secure facilities. All newly admitted offenders start as Level 1, the most restrictive level and progress from there.

As offenders meet time frames and behavioral expectation criteria, they can apply to advance in the level system through written request to their assigned Case Manager. The application is reviewed by their housing unit staff team. If denied, the Unit Team will provide meaningful feedback to the offender identifying specific areas of needed improvement.

The Privilege Level System provides case managers an opportunity to reinforce positive offender behavior while bringing awareness and intervention strategies to negative behaviors. The system promotes offenders for positive behavior and choices.

Unit Management

Within Maine's correctional facilities, offender housing areas are divided into housing units, usually defined by custody levels. These units are governed by the Unit Management Team. Unit management is an approach to managing a diverse population of offenders and each uses a multi-disciplinary team approach in overseeing all aspects of an offender's day to day life. The team includes a Unit Manager, Correctional Officer, Case Manager, Sergeant, as well as administrative and clinical staff. This team has authority to make decisions and recommendations regarding security, classification, services, and programming for offenders.

Unit management provides consistency and routine on the unit to help maintain safety for offenders and staff, as well as providing opportunities for offenders to engage in pro-social interactions with staff.

Unit Management Approach

- Provide an environment emphasizing safety and security for staff and offenders
- Ensure efficient allocation of staff and fiscal resources
- Promote staff teamwork and cooperation
- Encourage staff/offender contact and interaction
- Hold weekly meetings with Unit Team

Unit Team Members:

- Unit Manager
- Sergeant
- Case Managers
- Correctional Officer(s)
- Unit Clerk
- Others may include mental health, educational, and medical staff

Unit Manager's Responsibilities

- Offender's orientation to the unit
- Housing assignments (within and between pods)
- Case management
- On-unit programming (individual/group counseling, educational groups, stress/anger management, drug/alcohol education groups, etc.)
- Reclassification (custody level and programming)
- Transfer recommendations (interunit or inter-facility)

Correctional Case Management is present within All MDOC Facilities

Every offender—regardless of gender or security classification is assigned a Case Manager upon reception to the MDOC.

Case Management Services for Offenders

From initial incarceration to release, MDOC Case Managers (CM) provide critical services for all offenders. Case Managers complete several assessments to gather information on offenders. This includes a comprehensive psychosocial assessment, risk assessment (Level of Service Inventory Revised-LSI-R), Prison Rape Elimination Act (PREA) assessment, and an intake summary report.

CMs use the information gathered during these assessments to inform the offender's initial classification. Once the risk assessment is completed, the CM will review results with the offender and begin the development of their case plan to address the higher-risk domains. CMs are responsible for referring offenders to appropriate programming, based on risk and other assessments.

An example of a case plan goal area may be around antisocial attitudes and beliefs that contributed directly to an offender's incarceration. In this case, the Case Manager would likely refer the offender to the "Thinking for a Change" program. This evidence-based program addresses offender antisocial attitudes and beliefs and equips them with strategies to make positive change. Offender case plans are dynamic and are continually reviewed to ensure the highest risk areas are targeted. At a minimum case plans are formally updated twice annually.



Case Managers also facilitate offender rehabilitation groups. Groups typically are held bi-weekly and may run 90 minutes in duration. The focus of these groups is to promote healthy, pro-social interaction and thought processes. Cognitive behavioral therapy theory is woven into these groups.

When an offender has nine months remaining until release, the CM coordinates with community service providers, Probation and Parole (if released to probation status), and family members to ensure the best possible success in transition back to the community. It is important to encourage an offender to maintain pro-social relationships as these provide a support system necessary for the successful reintegration into the community.

Foundations of Case Management in Maine DOC

In early spring 2018, the Department finalized a training and orientation manual for existing and new hire Case Managers. The manual is comprehensive, covering the expansive role of case management. To effectively manage offender caseloads, MDOC trains its CMs in several key evidence-based approaches, techniques, and intervention styles:

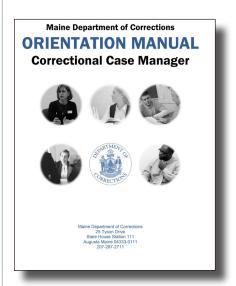
• Principles for Effective Offender Intervention

The MDOC employs Principles for Effective Offender Intervention as developed by The National Institute of Corrections (NIC) in all case management practices. The NIC highlights eight well researched, proven principles to effectively manage offender caseloads. These principles are:

- Assess Actuarial Risks and Needs
- Enhance Intrinsic Motivation
- Target Intervention
- Skill Train with Directed Practice
- Increase Positive Reinforcement
- Engage Natural Support in Natural Communities
- Measure Relevant Processes/Practices
- Provide Measurement Feedback

• Core Correctional Practices

In addition to Principles of Effective Offender Intervention, MDOC staff are trained in Core Correctional Practices. This approach of interaction with offenders was developed to support cognitive behavioral programming. Used in this approach are relationships skills, effective use of reinforcement, effective use of disapproval, effective use of authority, pro-social modeling, cognitive restructuring, social skills training and problem solving skills.



In early spring 2018, the Department finalized a training and orientation manual for existing and new hire Case Managers. The manual is comprehensive, covering the expansive role of case management in MDOC.

Programming for Offenders Continues Throughout Their Stay with MDOC

Offender enters MDOC system and is assessed by

- Medical Staff
- Security Staff
- Case Manager

Offender is assessed by medical staff for:

- Medical needs
- Behavioral Health needs
- Substance Abuse/Use Needs
- Sex Offender treatment needs

Case Manager assessments consists of:

- Psychosocial Assessment
- Prison Rape Elimination Assessment (PREA)
- Intake Summary Report
- Risks/Needs Assessment (using LSI-RTM or SPInWTM)

Offender meets with Case Manager and a case plan is developed using assessments results.

Offender participates in appropriate programming which may include:

- Education
- Vocational
- Behavioral Health Treatment (e.g. Substance Abuse and Sex Offender)

90 days before release offender's reentry plan is reviewed and adjusted (if needed) for:

- Housing
- Employment
- Continuation of needed treatment

• Creating Regulation & Resilience (CR/2)

CR/2 is a communication model designed to foster productive interactions with incarcerated offenders. All Case Managers, Correctional Officers, and facility staff are required to attend this two-day training. Grounded in research on the neuro-physiology of trauma and resilience, CR/2 translates research on trauma-informed care, evidence-based, and promising interventions into an integrated approach that can enhance outcomes. CR/2 was jointly developed by Orbis Partners and Core Associates, LLC. (http://orbispartners.com/programs/cr2/)

The CR/2 model introduces skills and strategies that have demonstrated positive results in:

- Enhancing motivation
- Supporting growth and behavior change
- Reducing recidivism

Training materials include exercises, case examples, and reflective activities that demonstrate how CR/2 can be used to work more effectively with offenders in the moment and across a variety of professional roles, functions and tasks, including:

- Crisis management and de-escalation
- Maintaining professional boundaries
- Conducting assessments, building case plans, facilitating groups
- Fulfilling operational procedures

• Risk, Needs, Responsivity and Fidelity

The Risk, Needs, Responsivity, and Fidelity (RNR-F) model provides a programmatic approach to principles of effective intervention. Programs that adhere to these four principles have a greater likelihood of reducing an offender's return to custody. Assessing who we target, what and how we target, as well as focusing on how well we deliver the programs, are essential in effective correctional intervention.

Treatment and Rehabilitation Services

The Maine Department of Corrections (MDOC) provides comprehensive treatment and rehabilitation services to offenders. These evidence-based programs and services target criminogenic needs identified at admission through a validated risk assessment tool (see pages 10-11).

Behavioral Health Treatment Services

Structured, evidence informed and evidence-based behavioral health services are available to all offenders in our adult corrections facilities through a contract with Wellpath. Wellpath strives to ensure all programming and treatment is trauma informed, gender responsive, and individualized. Offenders are screened and assessed for behavioral health needs during intake and reassessed regularly throughout their incarceration on an as needed basis.

Intensive Mental Health Unit (IMHU)

In 2014, MDOC received legislative approval to develop and open the state's first and only Intensive Mental Health Unit (IMHU), located within the secure perimeter of Maine State Prison (MSP). The IMHU houses up to 32 MDOC and county jail offenders who suffer from an acute, sub-acute, or chronic mental illness and/or are violent. The IMHU provides modern, comprehensive mental health and medical care to those corrections clients most in need, in a setting separate from the general prison population. Since opening, programming in the IMHU has helped decreased the frequency of self-injurious behavior; reduced violence; increased medication compliance; and improved the transition and transfer process of mentally ill clients back to county jails, communities, or state hospitals.

The IMHU has received nearly 200 referrals for placement from MDOC facilities and county jails. For those acute and sub-acute cases in which stabilization is possible, the average length-of-stay in the IMHU is approximately 120 days. This excludes the chronic cases which may remain in the IMHU indefinitely.

Behavioral Health Treatment Services are Available to All MDOC Offenders

Wellpath is an independent contractor that provides medical and behavioral health services for offenders in all Maine DOC facilities.

Day One (subcontracted with Wellpath) provides substance abuse treatment to males at Mountain View Correctional Facility.

IMHU Evaluation

Through a 2016-17 evaluation and corrective action plan, the Intensive Mental Health Unit (IMHU) has seen a shift in Departmental oversight, unit management, staff training and professional development, revised policy and procedure, enhanced communications and reviews, and heightened programming and treatment.

The results include:

- Increased staff satisfaction.
- Improved medication compliance and stabilization.
- Decrease in fights, assaults, suicide behavior, self-abuse, use of force, use of restraints, use of weapons, grievances and disciplines.

Treatment and Rehabilitation Services continued



Recent additions to the IMHU include rocking chairs and exercise equipment.

These positive results have all been obtained while continuing to house the state's most dangerous, mental health patients for the prison system and the county jails – offenders for which there is no other suitable placement.

Sex Offender Assessment and Treatment

All sex offenders are screened upon intake to identify static and dynamic factors (see box on left) relevant to their treatment and management, and are reassessed on a regular basis during the course of programming. Those offenders identified as needing treatment and being appropriate for services receive intensive, evidence-based treatment at Maine Correctional Center or Mountain View Correctional Facility. Those offenders qualifying for a pre-release placement participate in Sex Offender Aftercare Programming Recovery Model (e.g., check-ins, process groups, self-guided assignments, relapse prevention planning, building support networks, etc.).

Substance Abuse Treatment and Recovery

The Maine Department of Corrections offers substance abuse treatment programs at all its secure adult facilities. The Department partners with Wellpath and Day One to provide these services.

The Department has two residential substance abuse treatment programs for male offenders, the Correctional Recovery Center at the Maine Correctional Center (MCC) and the Substance Abuse Unit at Mountain View Correctional Facility (MVCF). Additional treatment programs are offered across MDOC facilities on an outpatient basis.

Both internal and external risk factors contribute to criminal behavior and recidivism. These factors are split into two categories:

Static Risk Factors are related to recidivism but cannot be altered through the delivery of services.

- criminal history
- family criminality
- age first admitted to a correctional facility
- number of prior incarcerations
- commitment offense

Dynamic Risk Factors are

changeable and in flux throughout an individual's lifetime:

- company kept (family/martial status/peers)
- beliefs/attitudes/core values
- substance use
- employment/school status
- leisure activities/recreation

Treatment and Rehabilitation Services continued

Cognitive Behavioral Treatment (CBT) Programs

Cognitive Behavioral Treatment programs such as "Thinking for a Change" are designed to enable a participant to recognize risky, inaccurate, or negative thoughts and thought patterns and replace them with positive, healthy thoughts. Participants develop the ability to apply specific coping strategies when encountering difficult situations. CBT programs emphasize skill training with directed practice, in which participants practice real life situations and scenarios. They learn and practice new, pro-social skills and behaviors. The Department offers CBT programs at all its facilities.

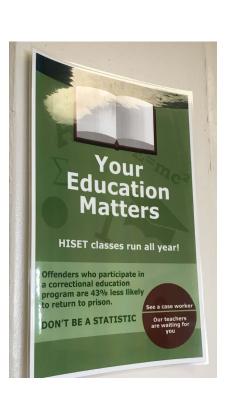
Family Violence Education Program (FVEP)

FVEP is a diversionary program and cognitive intervention focused on educating offenders regarding the impact of violence on relationships. FVEP provides offenders with the building blocks of interpersonal skills to develop violence-free relationships and an understanding of power and control dynamics.

Recovery Coach Program

The offender/peer led Recovery Coach Program is designed to help offenders who have experienced problems with their use of alcohol and drugs. Offenders who have been trained as Recovery Coaches in the Connecticut Community for Addiction Recovery (CCAR) model help program participants plan and make positive changes in their lives, including preparing for life after release. The Recovery Coach Program is person-centered and strengths-based. The Deputy Chief Administrative Officer and facility staff provide support for the program at each facility where the program is offered.

The MDOC Recovery Coach Program honors all pathways of recovery, including faith-based and 12-step-based recovery paths. The program recognizes that trained peers–Recovery Coaches–are especially important in helping offenders initiate and maintain their recovery.



Library Services

The library offers a large selection of reading materials (novels, autobiographies, documentaries, newspapers, magazines, etc.), including books available through inter-library loan.

Computers are also available for individuals cleared for usage.

The library offers West Law for legal research.

Educational Opportunities for Offenders

The Maine Department of Corrections has 16 teachers throughout our adult facilities. In addition to adult basic education and high school equivalency classes, college classes are offered and offenders have opportunity to earn associate or bachelor's degree while incarcerated.

Education Programs Offered in MDOC Facilities Adult Basis Education (A B E)

Adult Basic Education (A.B.E.)

This course works towards increasing offenders literacy while helping individuals gain the knowledge and skills necessary to be successful in life and work towards a high school diploma or equivalency.

High School Equivalency Test (HiSET)

HiSET courses are designed to prepare offenders to pass the High School Equivalency Tests. The HiSET consists of five components and when all five tests are passed the student will receive a High School Equivalency Diploma (HSED) from the Maine Department of Education. This rigorous program will also help students to gain lifelong skills and establishes the foundation for attending college classes.

College Courses

A variety of college programming is provided to offenders, from correspondence courses to Master's Degree level courses. Most of the college programming is offered through the Second Chance Pell Program and the Sunshine Lady Foundation, in partnership with the University of Maine and Southern Maine Community College. Students can enroll in college programming part-time or full-time with the option to pursue an Associate or a Bachelor of Arts Degree, primarily in Liberal Studies. Graduations are held every semester, with the most recent graduation including 8 Associate Degrees and 8 Bachelor Degrees. In addition, some DOC teachers provide college-level courses for credit, including Personal Finance and Business Law.

Vocational Opportunities for Offenders

MDOC offers vocational training opportunities throughout our adult facilities. Vocational programming is taught by teachers and Vocational Trades Instructors (VTI). Offenders are equipped with gainful employment skills in trades and vocations. These programs combine classroom time with hands on, and on the job training. For individuals not ready to enter one of the vocational programs offered, MDOC provides WorkReady training, a Department of Education manualized certificate program. This 60-hour course teaches offenders the soft skills needed to seek out and obtain a job. These soft skills include preparing for the workforce, effective communication, how to work successfully with others, problem solving, diversity, resume and cover letter writing, employer forms, wages/benefits, and mock interviews.

Vocational Programs

Automotive Repair Program

This instruction includes basic maintenance, inspection, brakes, steering and suspension, basic electrical, computer controls, engine mechanical, transmission, drive train, emissions controls, heating and air conditioning, and basic diesel engine work. Classes prepare students for the Maine State inspection exam and for Automotive Service Excellence (ASE) testing.

Building Trades

Students learn materials estimating, basic wood construction and assembly skills, along with finishing techniques. This course provides students the job skills necessary to enter a carpentry field at the apprentice level.

Business Basics / Financing

Students learn the basics of starting and operating a small business. Classes cover market strategies, necessary legal forms, estimating expenses, working capital requirements, obtaining financing, and performance monitoring.

Computer Literacy & Computer Technology

Students learn computing basics, Internet, email, operating systems, and software applications. Students have the opportunity to earn a nationallyrecognized Digital Literacy certificate.

Enrichment and Self-Help Groups

In addition to diverse education and vocational opportunities, many varied self-help and enrichment classes are also offered to offenders. These are taught by facility staff, offender peers, and community volunteers. These groups include:

- Native American Studies
- Yoga & Meditation
- Religious Education & Services
- Musical Enrichment
- Poetry Club
- New Readers Club
- Theater Group
- Stress Management
- Biology of Exercise

Vocational Opportunities for Offenders continued



The culinary arts program gives offenders the opportunity to become certified in ServeSafe.



Through a partnership with local animal shelters, offenders socialize and train dogs optimizing the animal's chances for adoption.

Partnering With DOL

The Maine Department of Corrections initiated a partnership with the Maine Department of Labor (DOL) to enhance corrections vocational programming, targeting Maine's job outlook and community needs.

Computer Coding Program

The computer coding program is offered for female offenders. It provides an overview of several computer languages and helps students learn to code through completing challenges and building projects.

Culinary Arts

This program teaches introductory skills that can be applied in a professional capacity. Students also have the opportunity to earn ServSafe certification which is recognized throughout the restaurant industry.

National Center for Construction Education and Research (NCCER)

NCCER is a standardized training and credentialing program for the construction industry. Utilizing the NCCER curricula, students gain portable credentials in a wide array of skills related the construction industry. The Department routinely invites guest employers from Maine's construction field to meet students enrolled in the NCCER program.

Small Engine Repair

Students learn maintenance and repair of small engines including lawnmowers, snow blowers, motorcycles, four wheelers, and outboard motors.

Welding

Using state of the art equipment, students learn how to: stick, MIG, and TIG weld. On-the-job training consists of community projects brought into the facility (e.g. fire trucks and State and municipal equipment).

Wood Harvesting

This program is competency based and follows a Certified Logging Professional (CLP) curriculum. The program teaches students to safely use wood harvest techniques in anticipation of using these skills for employment.

MDOC is partnering with the Maine Department of Education and Labor to connect coding students to federal grant opportunities through TechHire. This is intended to provide technology training and increase skills required to be employable in the IT field.

Life Skills

MDOC Life Skills programming which aids offenders in preparing for return to the community addresses four components:

• Personal Missions

Helps offenders identify realistic goals that they may begin working on to prepare for re-entry.

• Relationships

Helps offenders identify appropriate boundaries within their families as well as social interactions with friends and colleagues.

Work Resources

Helps offenders identify appropriate work and career goals, including: gaining competency in filling out job applications; creating resumes, cover letters, and thank you notes; attending job interviews; appropriate computer/e-mail communication; understanding American's with Disabilities Act (ADA); appropriate social behavior at work as well as current laws observed within a work environment, including sexual harassment and hostile work environments.

Community Resources

Helps offenders identify resources within their communities. Guest speakers participate and cover: renewing damaged credit; probation and parole; taxes; and vocational rehabilitation. Other topics include volunteering, self-help groups, spiritual guidance, transportation, smart shopping, speaking with authorities, and opening/maintaining bank accounts.

Life Skills Courses

Your Money Your Life This class gives offenders opportunities to plan for financial stability. Topics covered are savings, earnings, banking, credit, debt, loans, mortgages, investing, taxes, and insurance.

Problem Solving Using Mathematical Thinking

This class gives offenders many opportunities to solve problems in various topics including logic, algebra, geometry, and measurement.

Long Distance Dads

A 12-week program based on a nationally recognized curriculum which focuses on group discussion addressing issues such as the frustration and discouragements of being in prison, healthy relationships, parenting issues, and anger issues. Certificates are given to individuals who complete the program.

Inside-Out Dads

Incarcerated fathers get the tools they need to become more involved, responsible, and committed in the lives of their children -- providing increased motivation for them to get out and stay out.

Meeting Brook Conversations

These conversations encourage "the practice of listening, speaking, and thinking with others." Topics range from literary, ethical, artistic, as well as ordinary everyday issues. This is an open group and may be facilitated by volunteers.

Core Programming for Offenders by Facility (not all inclusive)

Maine State Prison

- Adult Education and HiSET
- Alternatives to Violence Program
- Cognitive Behavioral Therapy/Program
- College
- Criminal Addictive Thinking
- Domestic Violence Programming
- Impact of Crime
- Inside-Out Dads / Parenting Program
- Intensive Mental Health Unit
- Outpatient Substance Abuse Treatment
- Reentry Programming
- Restrictive Housing Program
- Veteran's Program
- Vocational Programming
- WorkReady

Maine Correctional Center

- Adult Education and HiSET
- Anger Management
- Cognitive Behavioral Therapy/Program
- College
- Criminal Addictive Thinking
- Domestic Violence Programming
- Impact of Crime
- Inside-OutDads / Parenting Program
- Non-Violent Communications
- Outpatient Substance Abuse Treatment
- Reentry Programming
- Residential Sex Offender Treatment
- Residential Substance Abuse Treatment
- Vocational Programming
- WorkReady

Mountain View Correctional Facility

- Adult Education and HiSET
- Anger Management
- Cognitive Behavioral Therapy/Program
- College (correspondence)
- Domestic Violence Programming
- Inside-Out Dads / Parenting Program
- Outpatient Substance Abuse Treatment
- Reentry Programming
- Residential Sex Offender Treatment
- Residential Substance Abuse Treatment
- Vocational Programming
- WorkReady
- Young Adult Offender Program

Bolduc Correctional Facility

- Adult Education and HiSET
- Cognitive Behavioral Therapy/Program
- Domestic Violence Programming
- Outpatient Substance Abuse Treatment
- Reentry Programming
- Vocational Programming
- WorkReady

Women's Center and Southern Maine Women's Reentry Center

- Adult Education and HiSET
- Anger Management
- Co-Dependent No More
- Cognitive Behavioral Therapy/Program
- College
- Domestic Violence Programming
- Gender Responsive Programming
- Outpatient Substance Abuse Treatment
- Reentry Programming
- Trauma-based Programming
- Vocational Programming
- WorkReady

Continuous Quality Improvement

Treatment Programming

MDOC employs a continuous quality improvement (CQI) model to measure fidelity of treatment programming we deliver. Evidence-based, manualized programming has been well researched and shown to produce positive results with incarcerated offenders, however, the research also points out that those results are only likely if the program being delivered at high fidelity to the program model.

MDOC has partnered with University of Cincinnati Corrections Institute (UCCI) and adopted their program observation and fidelity rating process. The tool is designed to use two observers who observe program delivery and then discuss outcomes. Once discussed and findings are corroborated, they share the results with the program staff. This process examines adherence to the program model based on several domains, and provides an overall fidelity rating score for the staff delivering the program. Strengths as well as areas of needed improvement are discussed. When improvement is needed, strategies are discussed and this feedback is incorporated into future program delivery.

MDOC currently follows this process for core evidence-based programs, including substance abuse treatment, sex offender treatment, and other cognitive behavioral based manualized programs. All scoring for these observations is tracked and reported to DOC leadership on a monthly basis as part of the CQI plan.

Contracted Comprehensive Medical Care Vendor

Wellpath provides their own CQI processes in addition to MDOC's. They monitor all aspects of medical, substance abuse, and sex offender treatment they administer. Some of the areas continually reviewed include:

- Timeliness and quality of services delivered
- Site audits of records and medications administration
- Staff competency

Education Classrooms

MDOC has developed an observation process for educational program classrooms. This process is the same as used for our core treatment programs, but the observation tool items have been appropriately replaced with

Continuous Quality Improvement continued

commonly recognized educational best practices. The CQI process was piloted early 2018 in offender high school equivalency classrooms. The pilot was a success and will continue moving forward ensuring quality education opportunities for offenders.

Case Management Practices

During 2018, a comprehensive Case Management CQI process was initiated. Case Managers (CM) are observed while working with offenders one-onone, as well as, reviews/audits of records. During the observation session, the supervisor is looking for the CM to demonstrate skills in the areas of:

- Interpersonal skills
- Communication/engagement/motivational interviewing skills
- Core Correctional Practices
- Risk reduction case planning
- Offender records review

Each of these areas has several items to rate. Items that need improvement are included in a coaching and development plan. This improvement plan may include trainings and/or resources to aid staff in reaching a more proficient level.

This process is done monthly with new CMs for six months to ensure they receive all the coaching, feedback and support they need to be successful in their role. CMs who have been with the MDOC longer are also observed, at least annually as part of the CQI process.

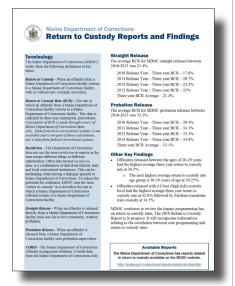
Data Driven Decision Making

MDOC Correctional Programming Division regularly incorporates the use of its own data in making key decisions. Leadership routinely relies on available reports on key statistics and metrics to monitor change and identify if improvement planning is necessary. Reports that are regularly relied upon include:

- Financial and staffing matrix regarding contracted comprehensive medical services vendor
- Offender population (current demographics and trending)
- Program CQI and fidelity
- Treatment, education, and vocational program statistics
- Offender custody ratings—current and trending
- Offender transfers to higher and lower security facilities, bed reports, level changes

Return to Custody Reports

For the first time, MDOC published Return to Custody Reports in 2017 highlighting one-year and three-year return to custody rates. These reports can be found on the Department's website: <u>https://www.maine.</u> <u>gov/corrections/reports-statistical-data.</u> <u>htm</u>



In 2018, the Maine Department of Corrections developed a sentencing calculation manual to ensure accuracy and consistency across the Department.

Continuous Quality Improvement continued

- Use of restrictive housing and related specialty in cell treatment programming
- Division Management weekly/monthly reports on respective areas of operation
- Staff development, trainings accomplished and perceived needs
- IMHU admissions and discharges, patient progress updates, and treatment programming
- All policies annually reviewed for relevance, revision, and ensuring they are carried out as written

Strategic Planning

Mid 2016, MDOC started to develop a strategic plan for the Correctional Programming Division. It began with questionnaires sent to leadership and staff representatives from each area covered under the Division (see page 2). The request asked participants to identify strengths, weaknesses, opportunities, and threats of their specific area of oversight.

Specific areas addressed in the plan include:

- Education and Vocational Services
- Women's Services
- Data and CQI
- Case Management and Reentry
- Behavioral Health
- Facility Treatment and Programming
- Classification

The multidisciplinary strategic planning member's efforts resulted in the identification of three overarching priority areas:

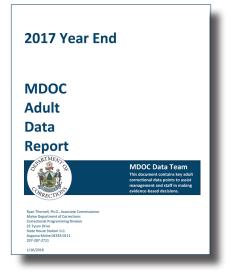
Staff Development

- Provide continuing essential job skills training for all Division staff to enhance skills for current positions
- Provide continuing essential supervisory skills training programs
- Provide a continuing DOC mentoring program for staff interested in learning about more DOC areas for career advancement; provide for cross divisional mentoring relationships
- Provide topic specific training programs to all program staff, topics focus on supporting longevity within corrections

Reporting the Numbers

The Department's Continuous Quality Improvement (CQI) staff are responsible for the collection, analysis, and reporting of key Departmental performance measures.

Beginning in Spring 2016, the Department began a new initiative to enhance its CQI efforts in order to ensure it continues making data-driven decisions. These reports can be found on the Department's website: <u>https://www.maine.gov/corrections/</u> reports-statistical-data.htm



Continuous Quality Improvement continued

Program Expansion

- Comprehensive review of all core and non-core programming
- Creation and use of program manuals
- · Recruit and expand use of volunteers

Utilization of Technology

- Increase the use of technology in education programming
- Increase the use of technology in vocational programming
- Support the increased use of technology with contracted providers

Each area was broken down into strategies and includes methods to measure achievement toward success. The action steps are specific, measurable, attainable, name responsible parties, and give timelines for accomplishments to be achieved. The duration of the current plan spans from 2018-2021. The plan is dynamic, and updated regularly with noted accomplishments to date.

Victim Services

MDOC has a dedicated division regarding services provided to victims of crime. These services include:

- Sentencing information
- · Anticipated date of release
- Place of confinement
- Restitution status

The victim notification law applies to victims of murder or of a Class A-D crime. A victim who wishes to receive notification *must* file a request with the office of the prosecuting attorney or online at <u>www.maine.gov/corrections/</u><u>Victim Services/index.htm</u>. A victim's request is kept confidential. The victim will be notified prior to work release, furlough, or release from confinement.

Victim services can provide assistance in cases of harassment. If an offender in custody of, or under the supervision of the Maine Department of Corrections engages in any conduct with intent to harass, torment, or threaten another person, Victim Services may be contacted for assistance.

To contact Victim Services, Call 1-800-968-6909

Afterword

The Maine Department of Corrections (MDOC) Correctional Programming Division puts ongoing effort into the rehabilitation of offenders, thus reducing the likelihood of offenders returning to custody. From initial needs assessments, to comprehensive behavioral, medical, sex offender and substance abuse treatment, and educational and vocational training opportunities, MDOC makes offender rehabilitation a priority.

In addition, MDOC has seen many measurable improvements in the way it conducts day to day business, provides quality services, and rehabilitative opportunities.

Our observation and CQI processes of treatment and education programs have brought positive change, ensuring they are delivered with high fidelity and strict adherence to a treatment model or best practice. Immediate feedback and coaching post observations have become expected and embraced by clinicians, teachers, and other staff delivering programming. Ongoing monthly programming CQI reporting allows MDOC leadership to track progress in this area.

Other CQI processes continue to spread throughout MDOC. Newly initiated Case Manager CQI process will ensure staff have the necessary skills to do effective case management, and get the training and coaching they need to continue to grow and flourish in this role.

In 2016, the creation of a dedicated data team enabled MDOC leadership to use and rely on data to guide decisions. MDOC's data team produces reports monthly, quarterly, and annually that help those in management make the best-informed decisions possible.

The creation of a Strategic Initiatives Plan continued MDOC's momentum in staff development, delivery of quality programming, and use of new technology.

MDOC's use of CQI processes, regular reporting on key metrics, data driven decisions making, and following our strategic plan continues to move us forward in fulfilling our mission:

To reduce the likelihood offenders will re-offend, by providing practices, programs and services which are evidence-based and which hold the offenders accountable.

Correctional Programming Core Principles

Always meet the staff members and facility where they're at in terms of skills/abilities and the change process – we will find staff with varying levels of skills and desire to change, it is our job to help them advance from where they're at, regardless of the level, to where we all are going;

Remain focused on the strengths and abilities of the staff and facility, and work to build upon these strengths — we are here to train, coach, and support the staff and facility, in order to build skills and capacity for long-term implementation, effectiveness and sustainability;

Stay positive and committed—the implementation, training, and change processes are long and often filled with obstacles, but our job is not to catch staff or facilities out of compliance or in a negative light, but to build motivation, influence commitment, and establish focus on the end goal;

Become a coach and champion do not tell them what they have to do; instead, lead and coach them in a way that makes them want to buy-into our efforts and initiatives.

Appendix A Terminology and Acronyms

BCF - Bolduc Correctional Facility

BH - Behavioral Health

CAO - Chief Administrative Officer

CASAS - Comprehensive Adult Student Assessment Systems. Assessment tool of basic skills to target instruction.

CBT - Cognitive Behavioral Therapy

Close Custody - Prisoners who have demonstrated irresponsible behaviors such as assault or other dangerous behavior or threats, serious institutional misconduct, have a history of escape (or attempted escape) or may constitute an escape risk due to the time remaining to be served. All Close Custody prisoners are housed at a secure (fenced) facility.

CM - Case Manager

CO - Correctional Officer

Community Custody - Prisoners who have demonstrated sustained responsible behavior and are permitted to access programs, services and activities not under direct correctional supervision. A Community Custody prisoner is eligible to apply for furloughs, community transition programs, and supervised community confinement.

CQI - Continuous Quality Improvement

Criminogenic - (of a system, situation, or place) causing or likely to cause criminal behavior.

DHHS - Department of Health and Human Services

FVEP - Family Violence Education Program. A 26-week-long program designed using the DULUTH model which places accountability for abuse on the offender (<u>http://www.</u> theduluthmodel.org/).

HiSET - High School Equivalency Test

IMHU - Intensive Mental Health Unit

LSI-R - Level of Service Inventory– Revised. A quantitative survey of offender attributes and their situations relevant to level of supervision and treatment decisions. Helps predict parole outcome, success in correctional halfway houses, institutional misconducts, and recidivism.

MCC - Maine Correctional Center

Medium Custody - Prisoners who have demonstrated limited responsibility and are housed in a secure (fenced) facility. Medium Custody prisoners must be escorted when outside the secure facility and are subject to controlling equipment (restraints).

MDOC - Maine Department of Corrections

Minimum Custody - Prisoners who have demonstrated responsible behavior and less than four years remaining on their sentence. Minimum Custody prisoners may be permitted access to programs, services and activities not under direct correctional supervision; may be permitted outside the perimeter of the facility for work assignments.

MSP - Maine State Prison

PREA - Prison Rape Elimination Act. The act provides for the analysis of the incidence and effects of prison rape in Federal, State, and local institutions.

Recidivism - the tendency of a convicted criminal to reoffend.

Return to Custody - an offender is returned to a MDOC facility.

SMWRC - Southern Maine Women's Reentry Center

SO - Sex Offender. A person convicted of crimes involving sex, including rape, molestation, sexual harassment and/or pornography production/distribution.

SPIn-W - Service Planning Instrument for Women. A gender-responsive assessment and case planning tool for female offenders.

TCUDS-II - Texas Christian University Drug Screen II. Screens for mild to severe substance use disorder; useful when determining placement and level of care in treatment.

UCCI - University of Cincinnati Corrections Institute

UM - Unit Manager

WellPath - provides medical and behavioral health services to offenders in care of the Department.

Appendix B

A comprehensive listing of programming offered at Maine Department of Corrections. These programs include those taught by DOC & contracted staff, as well as offenders and community volunteers.

Treatment

Aggression Replacement Training Alternatives To Violence Anger Management Beyond Anger & Violence **Beyond Trauma** Cage Your Rage Challenge Program Co-Dependent No More Cognitive-Behavioral Interventions for Substance Abuse (CBI-SA) Commitment To Change Criminal Addictive Thinking Epictecus Club Family Violence Prevention Grief And Loss Healthy Relationships Houses Of Healing How to be a Responsible Father Inside-Out Dads Intensive Reentry Services Life Skills Group Living in Balance Long Distance Dads Moving On New Freedom Prime For Life **Prime Solutions** Psychology Of Incarceration R.U.L.E. Recovery Peer Support **Relapse** Prevention **Residential Substance** Abused Treatment

Safety Awareness Planning Healthy Education (SAPHE) Seeking Safety Sexual Behavior Treatment Mt. View Sober Life Treatment Series Stages of Change Start Now Substance Abuse - Aftercare Substance Abuse - Individual The Impact of Crime Thinking for a Change Young Adult Offender Program

Educational

Accounting Adult Basic Education College College Transition English As A Second Language High School Diploma Prep HiSET Prep Math HiSET Prep Reading HiSET Prep Reading HiSET Prep Science HiSET Prep Social Studies HiSET Prep Writing Money And Your Life Post-Secondary/College Prep

Vocational

Auto Body Auto Mechanics Bee Keeping **Building Trades Business Basics Business Law** Computer Coding Computer Technology Culinary Arts Electrical Flagger Certification Graphic Arts Master Gardener NCCER **OSHA** Certification Servsafe Certification Small Engines Welding Wood Harvesting Work Ready

Additional Programming (offender & volunteer lead) AA Alanon Art Education AVP **Biology of Exercise** Celebrate Recovery Code of the Warrior Creative Problem Solving Dog Porgrams Dungeons and Dragons Failing Forward Family Crisis Book Group Getting it Right

Grief and Loss

Health Start Healthy Relationships Hope Writing Horticulture Master Gardner Hospice Houses of Healing Impact of Crime Intro to Recovery Leadership Circle Long Timers Wellness Group Mad Hatters Croche/ knitting Master Minds Meditation Meeting Brook Conversations Mom's Helping Mom's Musical Enrichment/Guitar doors/Band NA Native American Studies New Books for New Readers Poetry Evening Release Group Science of Willpower Smart Recovery Stress Management The ALU Group Theater Group Yoga 99 Days and a Get Up



Special Thanks

The great work exemplified in this manual and its creation was made possible by the dedicated staff of our Adult Correctional Facilities, and contracted service providers who have given themselves to the fulfillment of the mission of the Department of Corrections.

The mission of the Department of Corrections is to reduce the likelihood that juvenile and adult offenders will re-offend, by providing practices, programs and services which are evidence-based and which hold the offenders accountable.