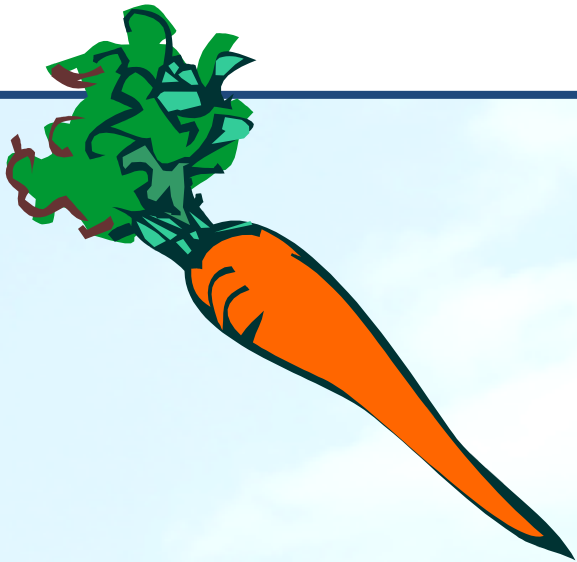


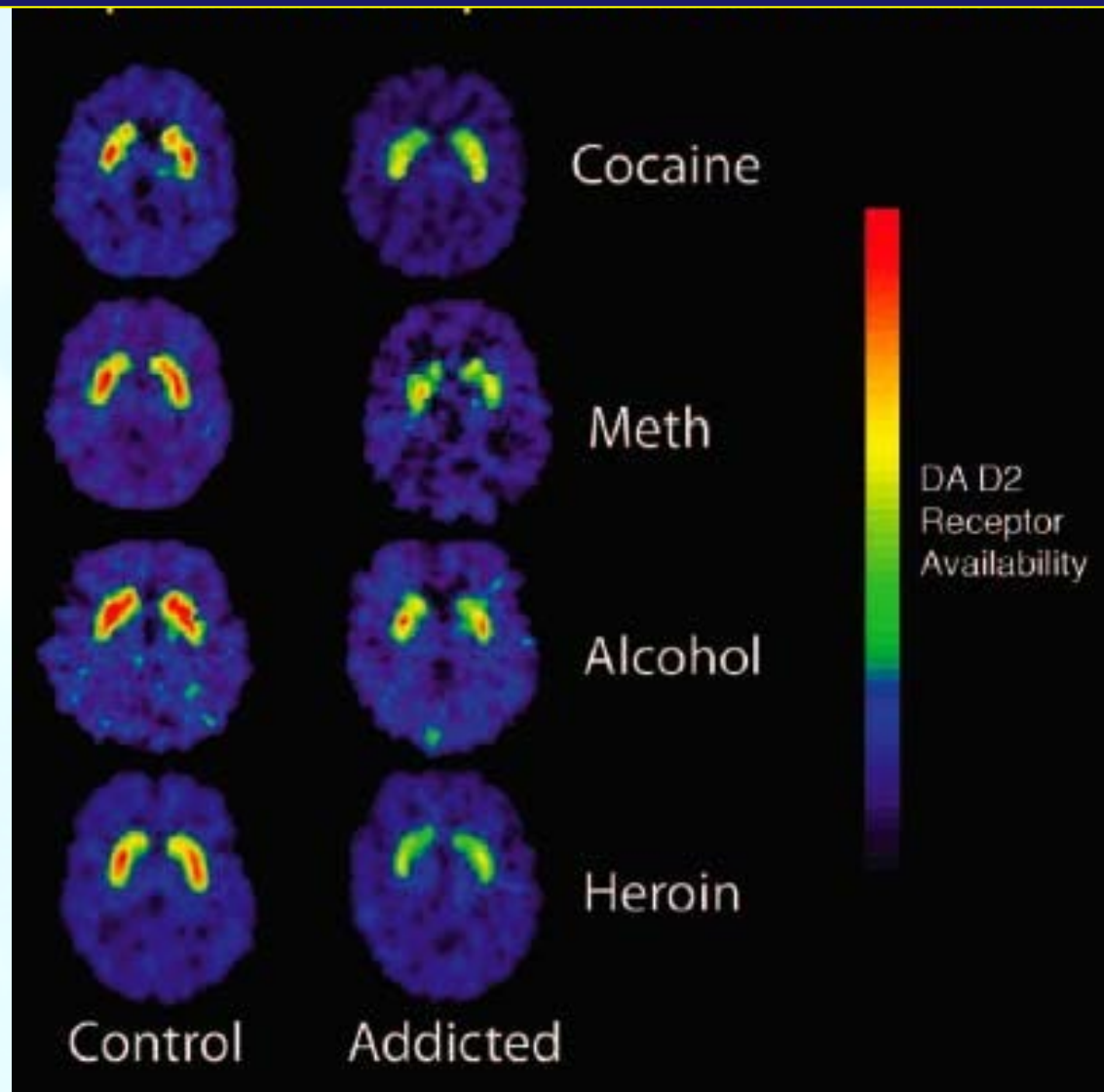
# The Practical Application of Incentives and Sanctions

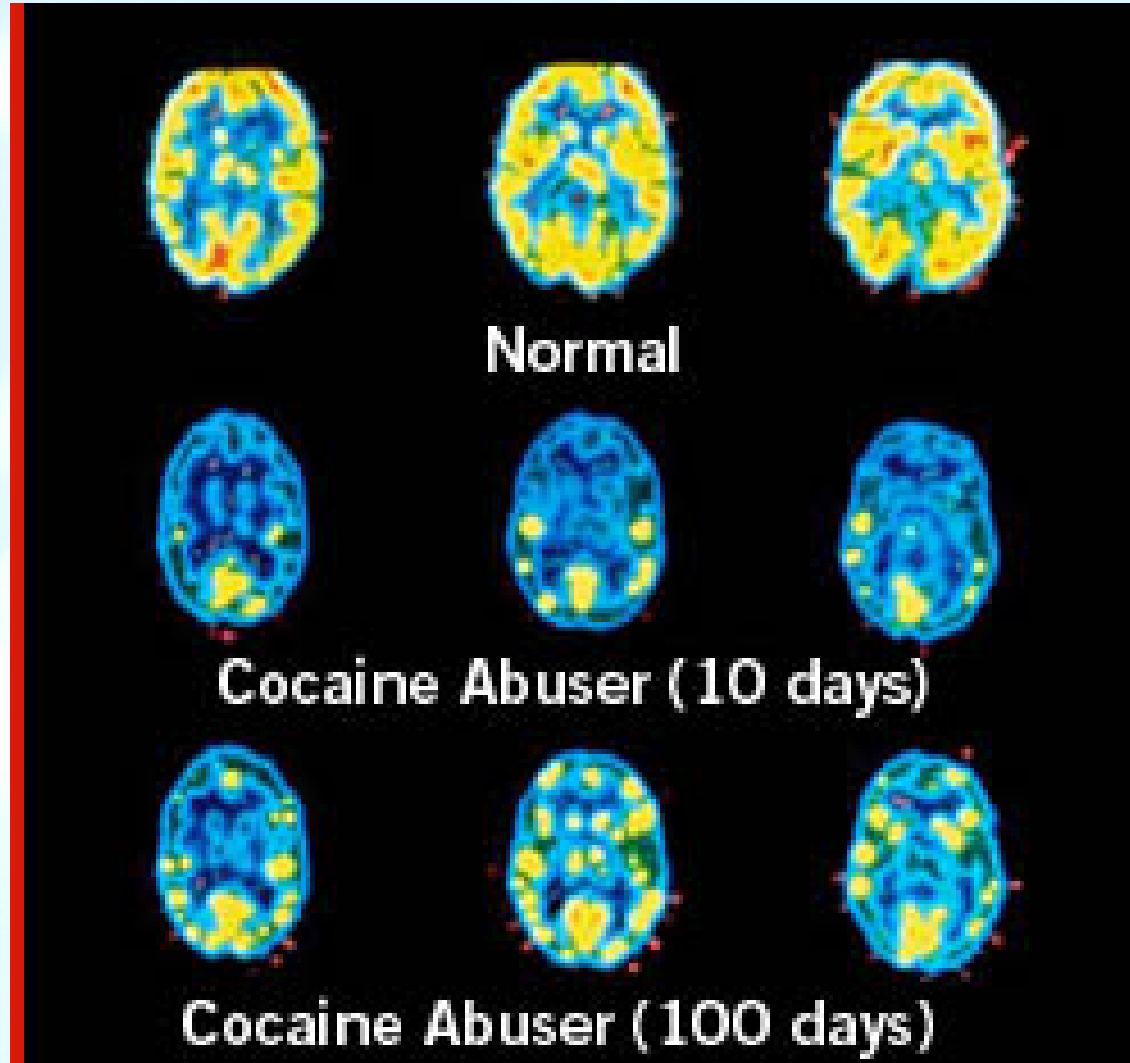
## *Part 1 - Staffing*



*Helen Harberts, J.D*  
*Shannon Carey, Ph.D.*

# First: Remember what we're dealing with





The enemy (addiction) is a difficult opponent. Brains take time to heal. Change is hard.

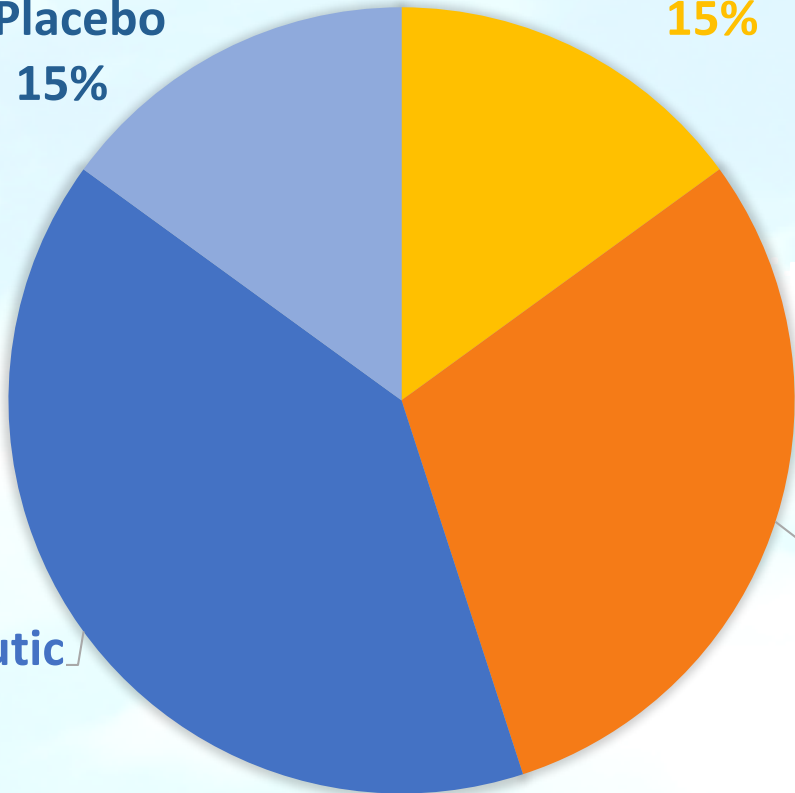
# What leads to behavior change?

Belief that the intervention will (or will not) work

**Expectations / Placebo**  
**15%**

**Technique**  
**15%**

- Specific model used
- CBT
- DBT
- Seeking Safety



Reinforcement

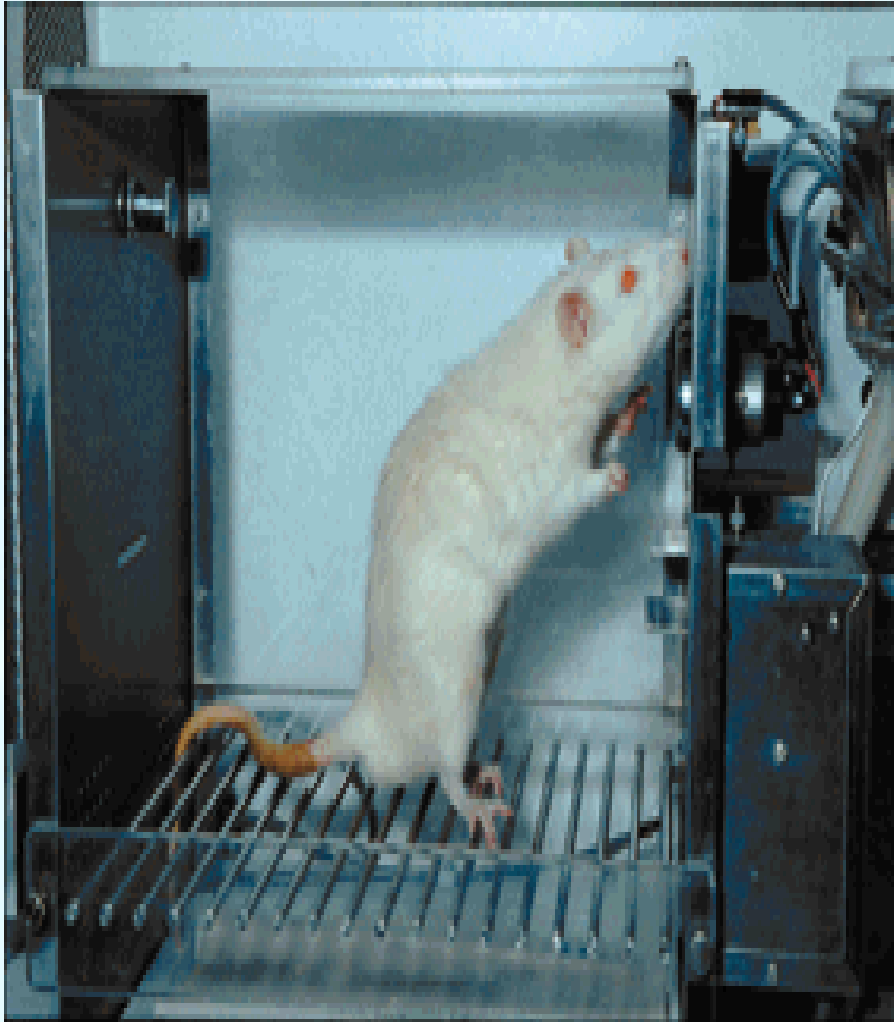
**Therapist/Client Relationship**  
**30%**

- Criminogenic Factors
- Family
- Peers
- Housing
- Health

**Extratherapeutic Change**  
**40%**

- Alliance
- Empathy
- Positive Regard

# The Beginning



**“All Behavior is followed by a consequence, and the nature of that consequence modifies the organisms tendency to repeat the behavior in the future”**

- *B.F. Skinner*

*(Applies to humans as well as rats! But people need a sense of fairness)*

# Certainty

Consistent Detection  
(Behavior and Immediate  
Consequence)

Reliable detection

(Detection allows the gathering  
of information needed by judge  
and team to determine  
appropriate response)

Speeding ex.

Supervision

Form 1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return 2002 (99) IRS Use Only—Do not write or staple in this space.

For the year Jan. 1-Dec. 31, 2002, or other tax year beginning , 2002, ending , 2002. OMB No. 1545-0074

**Label** (See instructions on page 21.) Use the IRS label. Otherwise, please print or type.

**Presidential Election Campaign** (See page 21.) Note: Checking "Yes" will not change your tax or reduce your refund. Do you, or your spouse if filing a joint return, want \$3 to go to this fund?  Yes  No  Yes  No

**Filing Status** Check only one box.  
 1  Single  
 2  Married filing jointly (even if only one had income)  
 3  Married filing separately. Enter spouse's SSN above and full name here.  Head of household (with qualifying person). (See page 21.) If the qualifying person is a child but not your dependent, enter this child's name here.  Qualifying widow(er) with dependent child (year spouse died). (See page 21.)

**Exemptions**  
 6a  Yourself. If your parent (or someone else) can claim you as a dependent on his or her tax return, do not check box 6a.  
 b  Spouse.  
 c **Dependents:** (1) First name Last name (2) Dependent's social security number (3) Dependent's relationship to you (4)  If qualifying child for child tax credit (see page 22).  
 d Total number of exemptions claimed

**Income**  
 7 Wages, salaries, tips, etc. Attach Form(s) W-2  
 8a Taxable interest. Attach Schedule B if required  
 8b Tax-exempt interest. Do not include on line 8a  
 9 Ordinary dividends. Attach Schedule B if required  
 10 Taxable refunds, credits, or offsets of state and local income taxes (see page 24)  
 11 Alimony received  
 12 Business income or (loss). Attach Schedule C or C-EZ  
 13 Capital gain or (loss). Attach Schedule D if required. If not required, check here  
 14 Other gains or (losses). Attach Form 4797  
 15a IRA distributions  
 15b Taxable amount (see page 25)  
 16a Pensions and annuities  
 16b Taxable amount (see page 25)  
 17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E  
 18 Farm income or (loss). Attach Schedule F  
 19 Unemployment compensation  
 20a Social security benefits  
 20b Taxable amount (see page 27)  
 21 Other income. List type and amount (see page 29). This is your total income  
 22 This is your total income  
 23 Tax-exempt interest  
 24 Charitable deduction (see page 29)  
 25 Mortgage interest deduction (see page 31)  
 26 State and local taxes and fees deduction (see page 32)  
 27 Medical and dental expenses. Attach Form 8963  
 28 Charitable contributions. Attach Form 990  
 29 Self-employment tax. Attach Schedule SE  
 30 Self-employed health insurance deduction (see page 33)  
 31 Retirement savings deduction (see page 33)  
 32 Tax-exempt interest  
 33a Recipient's SSN  
 34 This is your adjusted gross income  
 35 This is your adjusted gross income

and Paperwork Reduction Act Notice, see page 76. Cat. No. 11320B Form 1040 (2002)



# Reliable Detection

- **Urine drug testing at least twice per week**
- **Random testing all 7 days**
- **Continuous detection methods (patches, bracelet)**
- **Electronic monitoring**
- **Home visits (Extend supervision into natural social environment - work, home, school, street, cell phones)**
- **Include law enforcement on the team**
- **Case manager, supervision, treatment**

# Proximal? Distal? What the heck is that?

Proximal = Proximate/Close



- Show up
- Try hard
- Tell the truth

## Proximal $\neq$ Easy

- Proximal should be based on what the individual participant is capable of, and has the tools available to do, at the time
- Proximal at program start is what we need them to do first
- Behaviors and thoughts that are distal should become proximal over time as the brain heals and the tools are learned if we provide appropriate treatment and interventions that help participants internalize their change



# Proximal? Distal? What the heck is that?

Proximal = Proximate/Close



- Show up
- Try hard
- Tell the truth

Distal = Distant



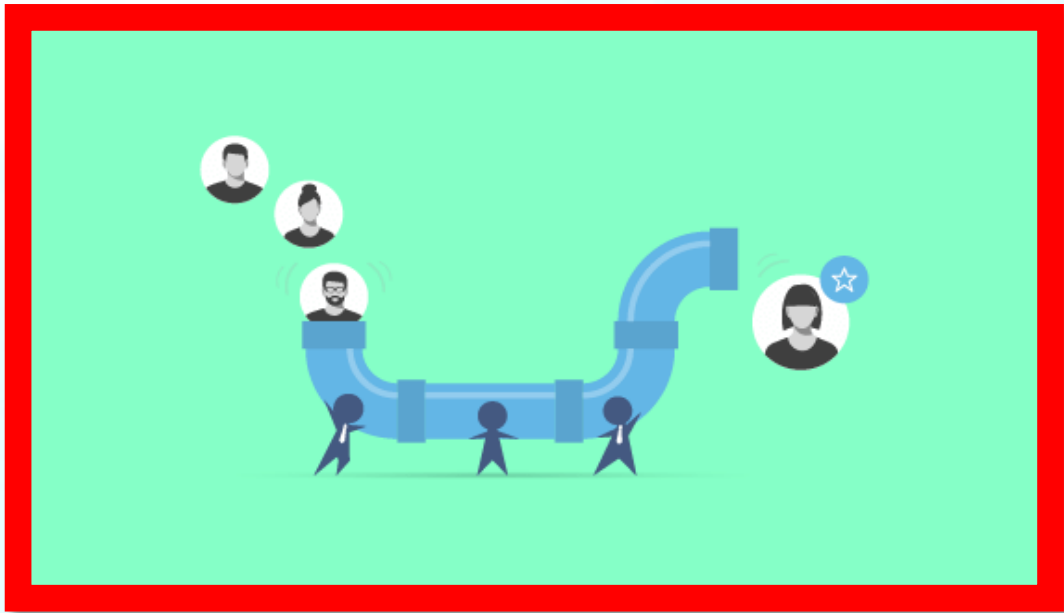
- Abstain from use
- Accept disease
- Work recovery

Video: Greenlick on honesty

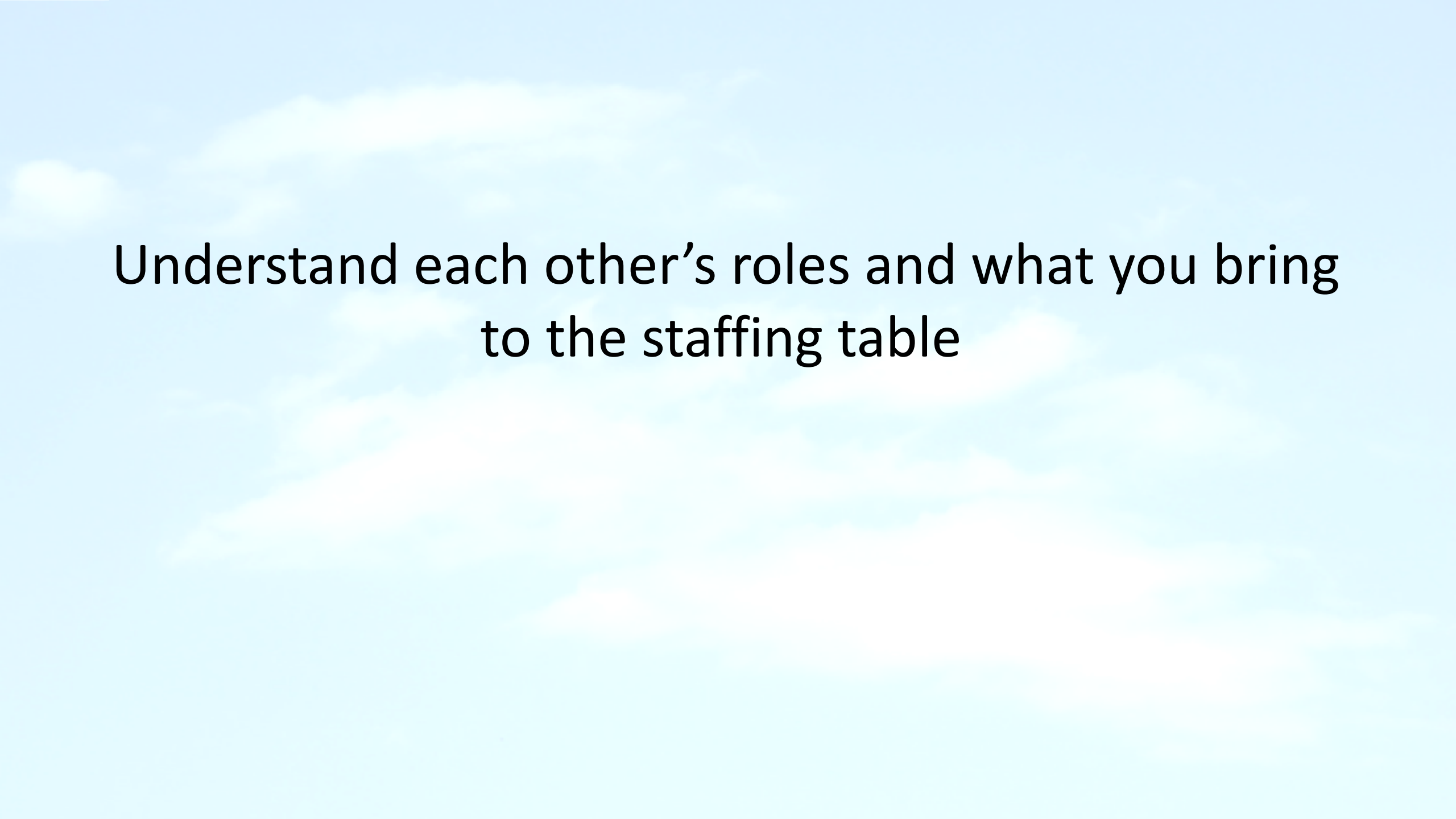
# WHAT THE TEAM BRINGS

## Changing Behavior Requires Information

S.O.B.E.R. COURT CASE STAFFING SUMMARY					
Client: [Redacted]	Date: 1/8/2018				
SPN/Case #: [Redacted]	Officer: Vincent				
Phase: 3	CSR Hours: 48/60	Events: 2/2	Sobriety Date: 12/14/2016		
Intake Date: 7/17/2017	Referral method: new case				
ODI/TDL Status: has ODL	Suspension dates:				
Current Risk: Moderate	Current Needs: Moderate	Rating: 2			
Blow Protocol	Removed for Phase IV				
Treatment progress	The Client successfully completed Treatment on 11/14/2017 with a total of 40/40 sessions completed.				
Stage of Change / Question	3. Maintenance; Displaying ongoing practice of new, healthier behaviors "Does the change seem permanent now? and What makes you believe this?"				
Benchmarks accomplished towards phase advancement	The Client has completed all required Phase I, II, and III Benchmarks.				
Barriers to services					
Interventions/Plan					
Infraction					
Recommended response	Phase IV Promotion Review. The Client continues to go above and beyond in this program as well as in her personal life. The Client is actively participating in 12 Step AA Groups and just recently celebrated 1 YEAR OF SOBRIETY!				
Incentives	12 Hour CSR Voucher for Phase Promotion and AA Attendance. Blow Protocol will be removed from interlock device as well. Sobriety Milestone & Wheel Spin				
Prior Court Reviews	12/04/2017: SOBER Court Graduation Attendance, Rating 2/2; 11/27/2017: No issues reported, Sobriety Milestone, Rating 2/2; 11/13/2017: Sobriety Milestone; almost 1 year!! 8 Hour CSR Voucher for Sobriety Milestone.				
Progress/Infractions to address with Client	The Client continually helps out other Clients within SOBER Court and also provided words of wisdom to New SOBER Court Clients during Orientation!				
Completion Date	Drug Test/Device				
Phase 1	10/16/17	Current Device	vehicle interlock	Date Ordered:	8/15/17
Phase 2	11/27/17	Current Device		Date Ordered:	
Phase 3		Positive UA's			
Phase 4		Dilute UA's			
Residential	NA	IOP/SOP	11/14/17	Boosters	NA DWI Edu/RO NA



S.O.B.E.R. COURT CASE STAFFING SUMMARY					
Client: [Redacted]	Date: 1/8/2018				
SPN/Case #: [Redacted]	Officer: Vincent				
Phase: 1	CSR Hours: 20/60	Events: 0/2	Sobriety Date: 5/15/2017		
Intake Date: 11/2/2017	Referral method: new case				
ODI/TDL Status: ODL eligible	Suspension dates:				
Current Risk: Moderate	Current Needs: Moderate	Rating: 2			
Blow Protocol	5-8am, 11-1pm, 3-5pm, 7-8pm, & 10-12am				
Treatment progress	The Client has successfully completed 18/17 Treatment Sessions. Ms. Mills continues to willingly participate and demonstrate pro-social thinking by the feedback given to Counselor and other groupmates.				
Stage of Change / Question	3. Preparation - Planning for Change "How will you know you have been successful in making this change?"				
Benchmarks accomplished towards phase advancement	The Client has successfully completed all Phase I Benchmarks				
Barriers to services					
Interventions/Plan					
Infraction					
Recommended response	Since SOBER Court Intake, the Client has never had a violation and has been a strong groupmate to others during treatment with her great feedback/input. The Client's sobriety is at the forefront of her priorities while in this program.				
Incentive(s)	Skype Review and 8 Hour CSR Voucher for being sanction free since starting the program.				
Prior Court Reviews:	12/18/2017: Phase II Promo, 12 Hour CSR Voucher, Rating 2/2; 12/04/2017: Sober Court Graduation Attendance, Rating 2/2; 11/27/2017: Helping Hand Award, Sobriety Milestone, 8 Hour CSR Voucher, Rating 2/2; 11/13/2017: No issues Reported, Rating 2/2.				
Additional items to address with Client	The Client has yet to attend a SOBER Event				
Completion Date	Drug Test/Device				
Phase 1	12/18/17	Current Device	at home device	Date Ordered:	11/20/17
Phase 2		Current Device		Date Ordered:	
Phase 3		Positive UA's			
Phase 4		Dilute UA's			
Residential	NA	IOP/SOP		Boosters	DWI Edu/RO



Understand each other's roles and what you bring  
to the staffing table

Video: Hernandez on the info his team  
brings

# The Bench

- Cannot delegate decisions
- Should be the predominant voice in the room in Court.
- Should spend three minutes with each person...good or bad.
- Should focus on teachable moments.
- **MUST HAVE GOOD INFORMATION**

# Attorneys

- Lawyers are there for legal reasons. Protect the record. Protect the Constitution. Motivate positively.
- Prosecutor's are there to assert public safety concerns (with probation, Court and LE)
  - ✓ Share new criminal activity, or old activity just coming in
  - ✓ Associates
  - ✓ Share public safety perspective
- Defense attorneys are there to monitor and ensure due process and may have the hardest job
  - ✓ Share any legal complications
  - ✓ Must negotiate difficult ethical issues
  - ✓ Has a duty to the client that is different than all others

# Attorneys

- Prep for the Staffing! Reports matter
- Work together to address legal issues up front

Counsel's job is to make the law meet the needs of the treatment team.



# Supervision and Case Management

- Is responsible for knowing what is happening outside the court and treatment arenas.
- Home visits are paramount
- Report to team on
  - ✓ Assessments,
  - ✓ Testing results, and working with treatment
  - ✓ Information from case management
- Is in constant communication with treatment

**Get your work done up front, meet with treatment, and form consensus, distribute information for rest of team in advance**

# Treatment

- At a minimum, the following data elements should be shared:
  - ✓ Assessment results pertaining to a participant's eligibility for Drug Court and treatment and supervision needs (Provide a diagnosis)
  - ✓ Attendance at scheduled appointments
  - ✓ Drug and alcohol test results, including efforts to defraud or invalidate said tests
  - ✓ Case management/treatment plan and attainment of goals, such as completion of a required counseling regimen
  - ✓ Homework assignments completed or currently working on
  - ✓ Current level in treatment (and what they need to do to move forward)
  - ✓ Any barriers to progress
  - ✓ Evidence of symptom resolution, such as reductions in drug cravings or withdrawal symptoms
  - ✓ Evidence of treatment-related attitudinal improvements, such as increased insight or motivation for change
  - ✓ Adherence to legally prescribed and authorized medically assisted treatments
  - ✓ Procurement of unauthorized prescriptions for addictive or intoxicating medications
  - ✓ Menacing, threatening, or disruptive behavior directed at staff members, participants or other persons
- Must follow confidentiality standards (see NADCP's BP standards for more info), but provide sufficient information to help with the message.

**Get your work done up front, meet with supervision and form consensus,  
distribute information for rest of team in advance**

- The people who are doing direct services are the ones who know what is going on. **Their recommendations are paramount.**

Unless public safety or due process is compromised, follow their lead.

- If you can live with the consensus, do so.
- Fighting **does not occur** in open court.
- The worst possible thing? The team is wrong and in two weeks, you can fix it.

*In a drug court model, rather than abandoning their roles, the involved disciplines expand them. The disciplines collaborate on a single mission to create a more effective and efficient system.*

*But you never abandon your role, or your ethics.*

# WWYD

## Information for the Team

- **Each team member has a specific role**
- **Disagreement is healthy and needed.**
- **We all share common goals:**
  - **Public safety**
  - **Program completion**
- **Many of our team members face ethical dilemmas**



***Activity Time!***  
***Pull out your cell phones***

*How to Vote:*

*Send Text to Phone Number: **22333***

*Text: **shannoncarey897***

# TEAM DEFENSE ATTORNEY: SANDRA

- One of her clients, Amy, has confessed to her that she smoked “K-2/ Spice,” a substance that Sandra knows is not routinely tested for.
- Amy deeply regrets the decision and wants to know if she should be honest and tell the judge.
- The team judge routinely sanctions this type of behavior with 3 days of jail.
- Without Amy’s confession, no one would ever know.



# What would you do?

D/ALL

- A. Encourage honesty. Warn her jail is likely. Don't mention the truth about K-2 testing. Seek permission to disclose to team/advocate.**
- B. Tell all to Amy: K-2 won't show up on a drug test. If she's silent, no one will know. Don't tell team.**
- C. Encourage honesty. Don't tell her about testing and the jail. Ask permission to disclose to team. Advocate hard for lesser sanction.**
- D. Disclose the K-2 use even if client objects. Advocate for sanction reduction.**



# COUNSELOR: CHERYL

- **Client, Rob, is in trouble yet again after many alcohol and drug violations.**
- **He has severe anxiety issues, along with a terrible attitude and resistance to treatment.**
- **Deputy Jones (Sheriff) saw Rob drinking a beer at the rodeo. Rob shot him the bird and chugged it.**
- **The team unanimously calls for termination.**



# Cheryl Gets Rob to Open Up

- Cheryl met with Rob. One of Rob's few redeeming factors is that he is an extremely proud, devoted father who shares custody of his 13-year-old son, Rob, Jr.
- Rob confided days before the incident, was served with papers, where his son's mother was seeking full custody.
- It gets worse...



# Rob's Bad Week

- After a quarrel, his son told him he was a “dope-head loser,” a “horrible father” and he wanted to live with mom.
- Rob's new girlfriend gave him gonorrhea.
- All of this happened a week after he had finally weaned himself off of his anxiety meds.
- Rob insisted she must not tell the judge and team.
- Rob expects termination and doesn't really want to fight it.

**PLEASE  
DON'T  
TELL.**

# Rob Gives Up. Cheryl Doesn't.

- Cheryl firmly believes Rob needs to remain in the program to get him through this rough patch.
- These troubling events could be the catalyst for a long-awaited breakthrough for Rob.
- Though clients sign confidentiality waivers, Cheryl is not sure how much she should share.



# What would you do?

- A. Tell the team everything; advocate for treatment.**
- B. Tell the team about everything except the STD. The team doesn't need to know that.**
- C. Don't disclose any confidential info. Say, "There are some big issues that I'm not at liberty to disclose, but please trust me on this one."**
- D. Urge the client to be honest with the team and not give up. Say little at staffing, but urge all to reconsider termination.**

# STAFFING CONSIDERATIONS

## BEHAVIOR RESPONSES:

- **WHO** are they in terms of risk and need?
- **WHERE** are they in the program (phase)?
- **WHY** did this happen (circumstances)?
- **WHICH** behaviors are we responding to?
  - Proximal or distal?
- **WHAT** is the response choice/ magnitude?
- **HOW** do we deliver and explain response?



TREATMENT / SUPERVISION CHANGES?

**New Video: NZ staffing**

**New Video: NZ court**



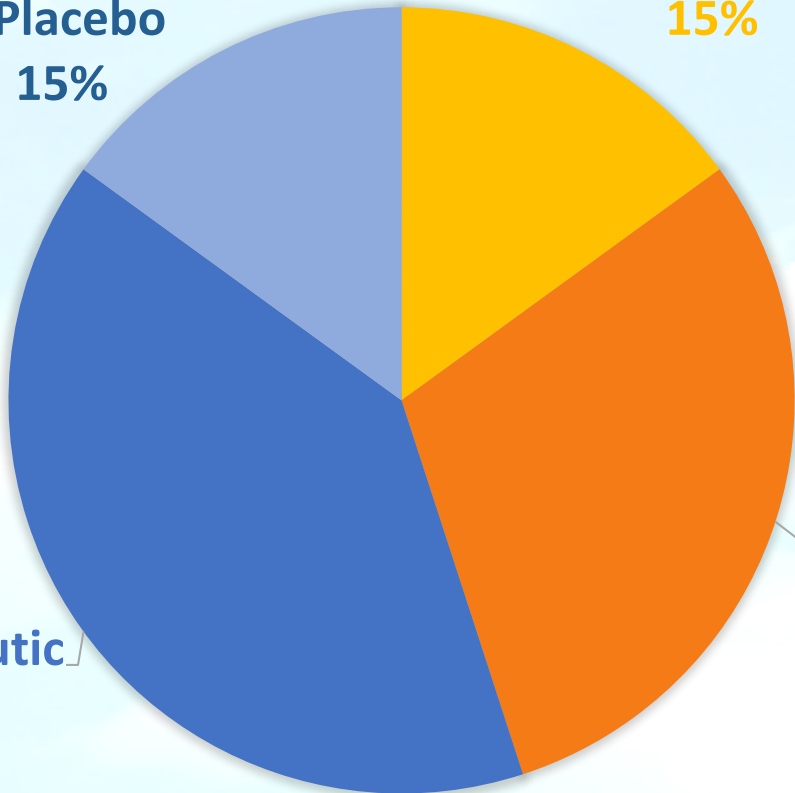
# What leads to behavior change?

Belief that the intervention will (or will not) work

**Expectations / Placebo**  
**15%**

**Technique**  
**15%**

- Specific model used**
- CBT
  - DBT
  - Seeking Safety



Reinforcement

**Therapist/Client Relationship**  
**30%**

- Criminogenic Factors**
- Family
  - Peers
  - Housing
  - Health

**Extratherapeutic Change**  
**40%**

- Alliance
- Empathy
- Positive Regard

# What to focus on

## Central 8 Risk Factors

1. History of antisocial behavior  
(Criminal History)

- 2. Antisocial Attitudes
- 3. Peer Associations
- 4. Antisocial Personality
- 5. School/Employment
- 6. Substance Abuse
- 7. Living Situation
- 8. Family/Marital

Important,  
but **STATIC**

**DYNAMIC**  
Criminogenic  
Needs

Clients have a variety  
of **Criminogenic needs**:

- Subset of risk factors
- Dynamic, live and changeable

# Addressing Risk Factors (Need) in staffing and court

Source: Andrews (2006)

**Dynamic risk factors are Criminogenic Needs that can change!**

Dynamic Risk Factor (Central 8)	Need/Case management/Services
History of antisocial behavior (Criminal History)	Build and practice positive/healthy behaviors by addressing the dynamic risk/needs below
Antisocial personality pattern (Check trauma history)	Learn problem solving skills, practice anger management
Antisocial cognition	Develop more pro-social thinking
Antisocial associates	Reduce association with criminal others (learn refusal skills)/increase association with positive peers
Family and/or marital discord	Reduce conflict, build positive relationships
Poor school and/or work performance	Work on good employee/study/performance skills
Poor living situation	Find appropriate housing
Substance abuse	Reduce use through integrated treatment

# Staffing Sheets

- Staffing takes time
- CM should have up to the minute info
- Should address Central 8 risk factors/criminogenic needs
- CM recommended responses based on response matrix
- CM/Treatment should have recommended questions/topics for the judge to ask participant





**TREATMENT COURT CASE STAFFING SUMMARY**

<b>Client:</b>	Doe, Jane	<b>DOB:</b> 08/31/1982	<b>Date:</b>	4/1/2019
<b>Phase:</b> 2	<b>CSR Hours:</b> 60/60		<b>Sobriety Date:</b>	9/15/2018 (last pos)
<b>Intake Date:</b>	8/17/2018	<b>Class</b> A/B Misd.	<b>Referral method:</b>	ACOCS- violations
<b>ODL/TDL Status:</b> TDL eligible		<b>Suspension dates:</b>		N/A
<b>Current Risk:</b> Moderate		<b>Current Needs:</b> Moderate		

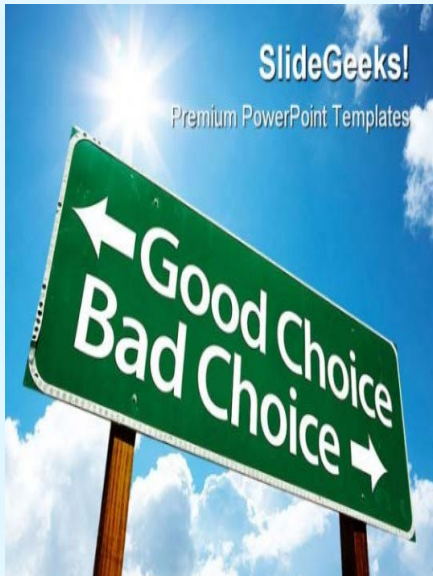
<b>Risk/Criminogenic Need</b>	<b>Status/Progress/Plan</b> <b>*Focus on Goals for Top 3</b>
<b>1. History of antisocial behavior (Criminal History)</b>	Presenting charge: Forgery, possession, paraphernalia
<b>2. Antisocial personality patterns</b>	No indication of anti-social personality
<b>3. Antisocial Cognition (Criminal Thinking)</b>	On Step 2 of MRT
<b>4. Antisocial Associates</b>	Jane has been spending time with some old associates from high school who are currently using and who live near mom. Jane has also participated with peer mentors at bowling night. <b>1. Current Goal - focus on more peer mentor activities.</b>
<b>5. Family/Marital Situation</b>	Accomplished goal! Jane moved out of her (using) boyfriend's house last weekend and is living with her mother who is supportive of treatment
<b>6. School/Work Performance</b>	Making progress on her GED <b>2. Current Goal: Schedule math test by 3/16/2019</b>
<b>7. Living Situation</b>	Accomplished sober housing goal! Jane moved out of her (using) boyfriend's house last weekend and is living with her mother who is supportive of Jane's treatment
<b>8. Substance Use Disorder/ Treatment progress</b>	Client has diagnosed severe substance use disorder (Heroin). Client is on Vivitrol and is tolerating it well. Client is in CBT and was late for last treatment session, but has attended all required sessions. <b>3. Current Goal: Client is engaged with treatment and is currently working through plans for responding to specific triggers.</b>

<b>Benchmarks accomplished towards phase</b>	The Client has completed all required Phase 2 Benchmarks and is filling out application for Phase 3
<b>Barriers to services and intervention/plan</b>	Client's mother is ill and may need to move into assisted living. If this happens, client will need new housing. Will monitor mother's condition. Continue with current treatment plan.
<b>Summary of Successes</b>	Jane moved away from unhealthy relationship with boyfriend and moved in with supportive mother. Accomplished sober housing goal! Completed all requirements since last court session.
<b>Summary of Infractions</b>	Client is doing very well. No issues with non-adherence.
<b>Recommended Court Responses</b>	<p><b>Incentive:</b>  Judge acknowledgment of completed goal - made good decision and important progress in moving out of boyfriend's house and in with mother - 12 Hour CSR Voucher, fish bowl for completing all requirements in last two weeks.  Acknowledge she is filling out application for Phase 3.</p>
	<p><b>Other responses:</b>  Reinforce message that Jane should avoid her high school friends and focus on more peer mentor activities. Ask Jane to talk about activities she could do instead of spending time with old high school friends. Ask Jane to list her other current goals and plan for completing (see goals above and prompt her if she does not remember).</p>

Completion Date		Drug Test/Device						
Phase 1	10/15/18	Current Device	drug patch			Date Ordered:		10/15/18
Phase 2	1/15/19	Current Device				Date Ordered:		
Phase 3		Positive UA's						
Phase 4		Dilute UA's						
Residential	NA	IOP/SOP	11/14/17	Boosters	NA	DWI Edu/RO	NA	
Prior Court Reviews								

Date	Incentive	Other response
8/18/2018	Acknowledgement (attaboy) of attendance	Behavior chain for use
12/15/2018	Sobriety milestone - 3 months	None

# Tools for Behavior Change: Basic Terminology



SANCTIONS

Decrease or STOP behavior

INCENTIVES

Increase or START behavior

Therapeutic  
Adjustments

Treat behavior due to illness

Supervision/Drug tests

Monitors behavior



# Focus on Incentives

Number one incentive is acknowledgment  
from the judge

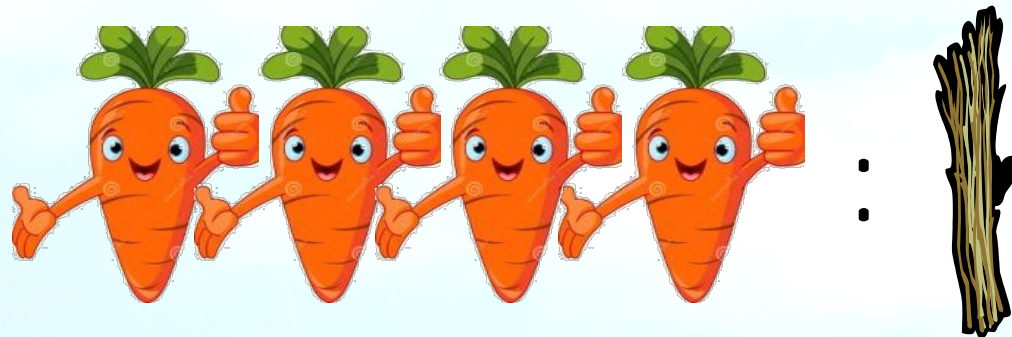




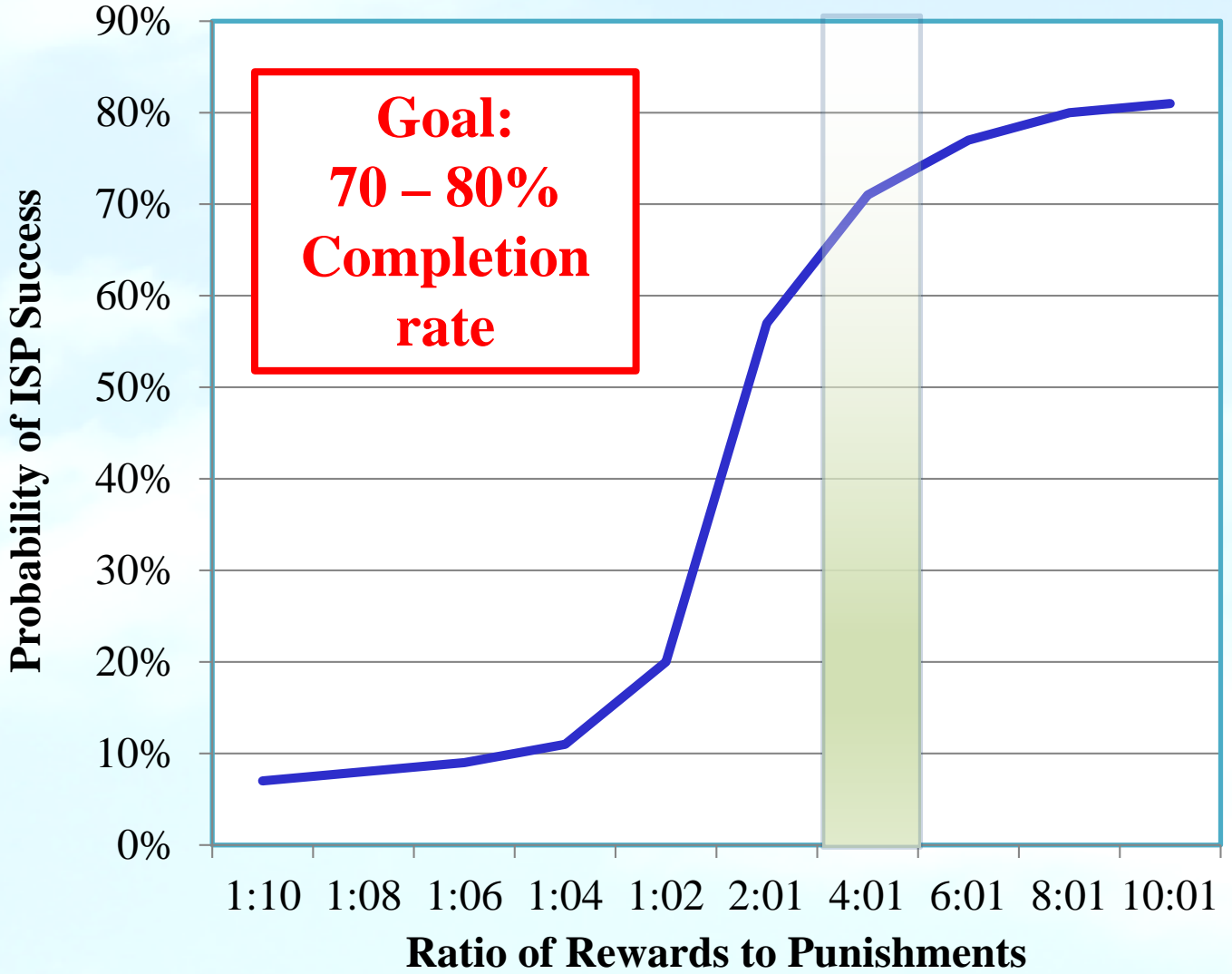
Video: Papack Dentist

# INCENTIVES

- Tracking incentives increases use.
- Reinforcers should far outnumber punishers.
- How many incentives is enough?



# Ratio of Rewards to Punishments and Probability of Success on Intensive Supervision



Widahl, E. J., Garland, B. Culhane, S. E., and McCarty, W.P. (2011). Utilizing Behavioral Interventions to Improve Supervision Outcomes in Community-Based Corrections. Criminal Justice and Behavior, 38 (4).

# What if we have no budget for incentives?

- You don't need gift cards! (See handouts!)
- Some of the most powerful are **free**.
- The best , most long-lasting incentives are "**natural**": paycheck from a job, diploma, regaining custody, repairing relationships, feeling better, etc.
- **Natural reinforcers** are the byproduct of good treatment, and will help clients long after probation ends.
- Our responses keep clients engaged until natural reinforcers kick in.



YOU'RE DOING  
GREAT!  
YOU EARNED A  
"LEAVE COURT  
EARLY" PASS!

**Congrats!**  
**You have**  
**earned a**  
**Report by**



**Pass!**

**SKIP TO**  
**THE HEAD**  
**OF THE**  
**LINE!**  
**GO FIRST**  
**AT YOUR**  
**NEXT UA**

YOU'RE #1 !  
GO 1<sup>ST</sup> AT COURT  
REVIEW !

You've got it made  
in the shade!!  
Subtract 8 HOURS of  
community service.

# How Do We Know What Rewards Work?

**ASK THEM!**

## **13. What are your favorite incentives? (Circle all that apply)**

Fish Bowl      Spin the Wheel      Praise, positive feedback  
Gift Card      Bus Passes      CSR Voucher  
Skype report      Candy, treats      Certificate (Sobriety, etc.)  
Praise, positive feedback      Other: (Specify) \_\_\_\_\_

## **14. What are some fun things you do that help you stay sober?** \_\_\_\_\_ \_\_\_\_\_

# Effective Punishment

"4:1" Only Works if  
the "1" is Occurring





Punishment is NOT the goal  
of imposing of Sanctions  
**CHANGING BEHAVIOR IS  
THE GOAL**

“What will they  
learn from the  
sanction?”

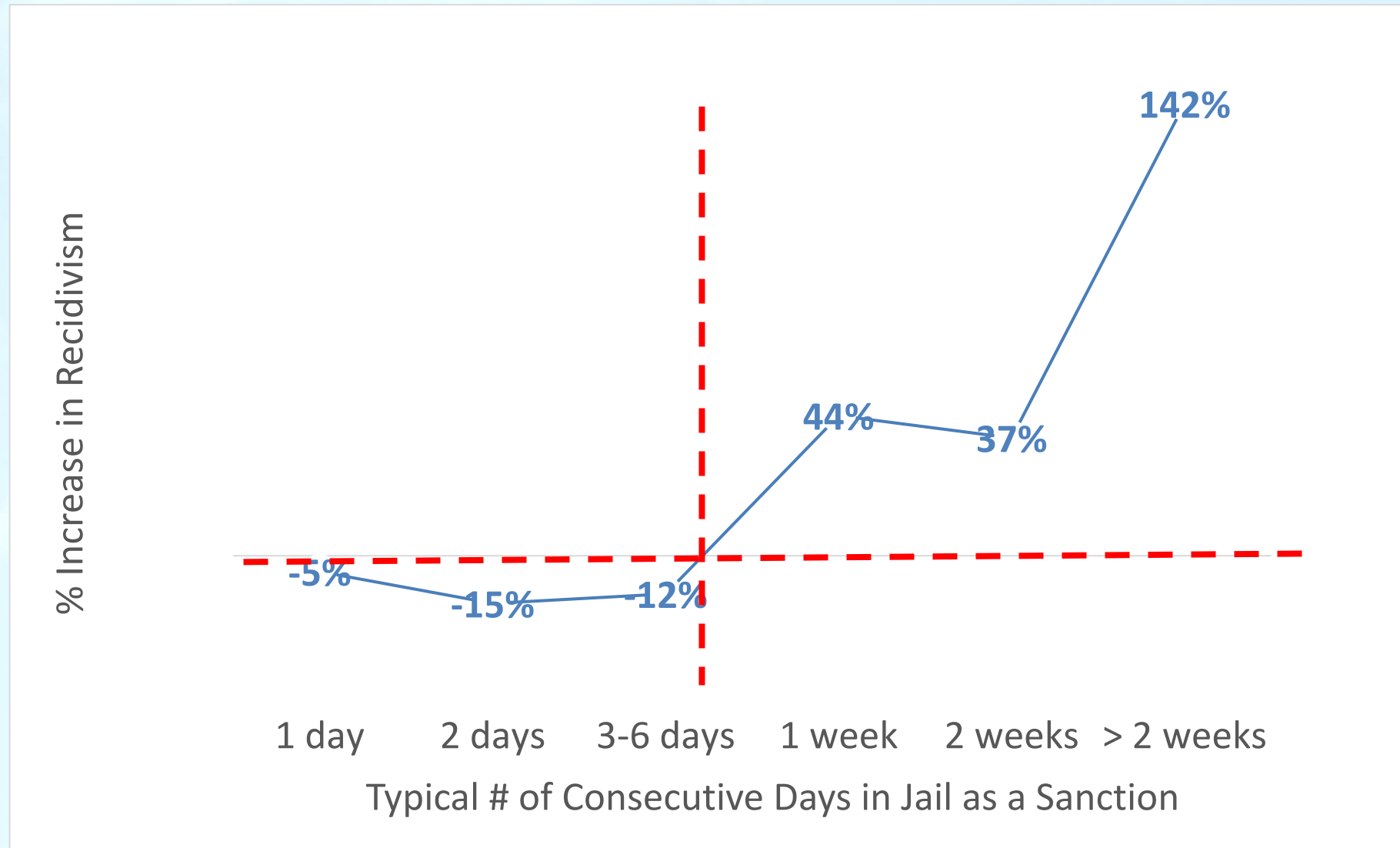


# Jail

- **Generally not teaching what you want them to learn**
- **Can make client's situation much worse**
- **Hang out with the wrong people**
- **Should be reserved for serious infractions**
  - Public Safety
  - Illegal activity



# Courts that typically impose jail longer than 6 days have higher recidivism

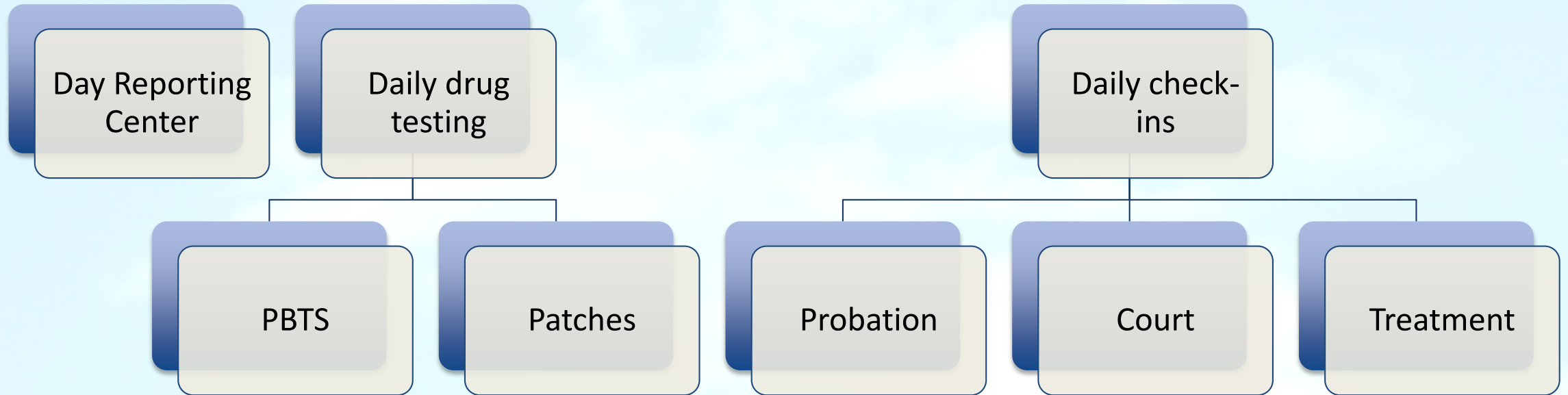


# Jail Considerations



- **Is the behavior dangerous to others? (Or impact the safety and integrity of the court?)**
- **What behavior do you want to stop? What is the intended impact of jail?**
- **What will the impact of jail be on others (employer, family, etc.)?**
- **What behavior do you want the participant to do instead?**
- **Are there other responses that might incentivize them to do the behavior you want them to do instead?**

# What else do you have?



# Alternatives to Jail

- **Increase supervision**

- House arrest/GPS
- Increase supervision appointments
- Increased home visits
- Increase court hearings
- Curfew

**May need to  
develop new  
resources for  
some  
alternatives**

- **Other options (Focus on Learning)**

- Community service
- Attend/watch court
- Thought papers
- Homework/Practice
- Volunteering
- Cost/Benefit
- Behavior Chain

# Alternatives to Jail

## Therapeutic perspective (Physical and Mental/SUD Health)

- Conduct a medical assessment (health issues) – Our participants are ill with a disease that often leads to criminal behavior
  - Include history of medication use
- Assess for medication assisted treatment (MAT)
  - Work with medical and treatment community
  - Prescribers
  - Treatment Providers
  - Know what's available in your community and state
  - Education for the team – take NDCI's online MAT course –
- Get them into pain management
  - Meditation, yoga, physical therapy, acupuncture

**May need to  
develop new  
resources for  
some  
alternatives**

# Alternatives to Jail

## Therapeutic perspective (Physical and Mental/SUD Health)

- Review level of SUD/MH care
- Enhance alliance with treatment and case manager/supervision
- Work with participant to discuss what treatment they will follow through with
- Work with participant on integrated case plan
- Spend more time with peer support (peer mentor, peer specialist)

**May need to develop new resources for some alternatives**



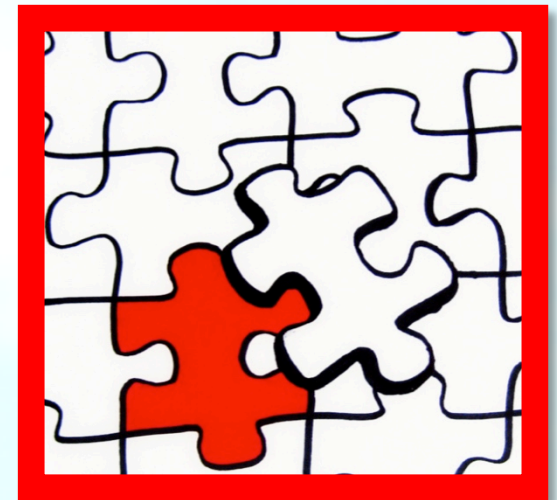
# Staffing: Crafting Responses

Understand: this is about them,  
not you.

*Responses are in the eyes of the  
beholder, not you.*

# CRAFTING RESPONSES

- Response matrix should have options keyed to clients current level of competence and motivation
- Matrices should have several options– No “one size fits all.”
- 10-20% of the time matrix may not work
- **FOCUS ON THE BIG PICTURE AND LOOK FOR PATTERNS**
- **Consider:** “What do you want the participant learn?”



# CRAFTING RESPONSES - Scenario

- **Carol is in Phase 2**
- **Positive EtG for Alcohol – 3<sup>rd</sup> positive**
- **Perfect attendance at treatment and engaged in treatment**



A copy of the following response matrix is on the NADCP conference app and website for this session



# Inappropriate Behavior

**Sanction Matrix:** “What do we want the participant to learn from this?”

## Step 1. Identify the Behavior

Low (Less Immediate)	Moderate	High (More Immediate)	Very High
<ul style="list-style-type: none"> <li>Late for Scheduled Event</li> <li>Missed payment</li> </ul>	<ul style="list-style-type: none"> <li>Missed UA</li> <li>Failure to Complete Assignments</li> </ul>	<ul style="list-style-type: none"> <li>Unexcused Absence tx</li> <li>Alcohol Use</li> <li>Drug Use</li> <li>Tamper w/ UA or device</li> <li>Dishonesty</li> </ul>	<ul style="list-style-type: none"> <li>Criminal behavior (new crimes, drinking and driving)</li> <li>Arrest</li> </ul>

## Step 2. Determine the Response Level

		Low	Moderate	High	Very High
	Phase 1	Level 1	Level 2	Level 2	Level 4
	Phase 2	Level 1	Level 2	Level 3	Level 4
	Phase 3	Level 2	Level 3	Level 4	Level 5
	Phase 4	Level 3	Level 4	Level 5	Level 5
	Phase 5	Level 3	Level 4	Level 5	Level 5

*Step 3. Choose the Responses (includes with Judicial verbal Disapproval and Explanation)*

### 3a. Therapeutic Responses

Level 1	Level 2	Level 3	Level 4	Level 5
<ul style="list-style-type: none"> <li>Behavior Chain</li> <li>• Cost/Benefit Analysis</li> <li>• Skill Development</li> <li>• Thought Restructuring</li> <li>• Homework/Practice</li> <li>• Linking Report</li> </ul>	<p><b>Level 1 plus:</b></p> <ul style="list-style-type: none"> <li>• LOC Review</li> </ul>	<p><b>Level 1, 2, plus:</b></p> <ul style="list-style-type: none"> <li>• Referral Medication Eval</li> <li>• Treatment Team Review/Round Table</li> </ul>	<p><b>Level 1, 2, 3, plus:</b></p> <ul style="list-style-type: none"> <li>• Re-Assessment</li> </ul>	

### 3b. Control Responses

Level 1	Level 2	Level 3	Level 4	Level 5
<ul style="list-style-type: none"> <li>• ≤ 1 additional report days/week</li> <li>• Official Letter in File</li> </ul>	<ul style="list-style-type: none"> <li>• ≤ 2 additional report days/week</li> <li>• Home Visit</li> <li>• Curfew</li> </ul>	<ul style="list-style-type: none"> <li>• Continuous Testing</li> <li>• GPS/Electronic Monitoring</li> <li>• ≤ 3 additional report days/week</li> <li>• Home Visit</li> <li>• Increase frequency U Test</li> <li>• Contingency Contract</li> <li>• Additional Link Report</li> <li>• Case Conference</li> </ul>	<ul style="list-style-type: none"> <li>• ≤ 4 additional report days/week</li> <li>• Contingency Contract</li> <li>• Electronic Monitor Device</li> <li>• Case Conference</li> <li>• Curfew</li> </ul>	

## Behavior Chain

### SITUATION

"An old friend came to my house. We started talking about old times. One thing led to another and we ended up going to the club. I drank 3 bourbons and we smoked weed in the car later."

Name: \_\_\_\_\_

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

### THOUGHTS

"I missed my friend and the good times we used to have. I thought I would just drink Coke at the club. I didn't want him to think I was an asshole. I thought I've been good for so long, I deserve this break, and I probably won't even get caught."



### FEELINGS

"At first, I felt like 'why not'? Later, I felt trapped. There was no way to get out of this situation. I just hoped I wouldn't get caught. I felt angry, and frustrated."

### ACTIONS

"I could've made up a story why I couldn't go out. I could've told him I was on probation. I could've suggested we do something else that didn't involve drinking / weed"

### CONSEQUENCES

+

"I enjoyed being with my friend, remembering the good times and feeling "normal" again."

—

"I ruined my sobriety. I had over 90 days. I risked jail and even revocation."

### 3c Sanction/Punishment Responses (Judicial Disapproval)

	Level 1	Level 2	Level 3	Level 4	Level 5
Community Service	≤ 4 hrs	≤ 8 hrs	≤ 16 hrs	≤ 32 hrs	≤ 32 hrs
Curfew	≤ 3 days	≤ 5 days	≤ 7 days	≤ 15 days	≤ 15 days
House Arrest	≤ 24 hrs	≤ 72 hrs	≤ 5 days	≤ 15 days	≤ 15 days
Jail			≤ 24 hours	≤ 3 days	≤ 7 days
Other				Review Placement	Termination

# Positive Behavior


Incentive Matrix: “what do we want the participant to learn from this?”

Step 1: Identify the Behavior.

Proximal (Expect Sooner)	Moderate	Distal (Expect Later)
<ul style="list-style-type: none"> <li>• Attendance at treatment</li> <li>• Attendance at other appointments</li> <li>• Home for home visits</li> <li>• Report to UA</li> <li>• Timeliness</li> <li>• Payment</li> </ul>	<ul style="list-style-type: none"> <li>• Honesty</li> <li>• Testing Negative</li> <li>• Participating in Prosocial Activities</li> <li>• Employment</li> <li>• Progress toward Tx Goals</li> <li>• Progress in Tx</li> </ul>	<ul style="list-style-type: none"> <li>• Complete Tx LOC</li> <li>• Extended Abstinence/Neg. Tests</li> <li>• Treatment Goals Completed</li> <li>• Phase Goals Completed</li> <li>• Program Goals Completed</li> </ul>



**Step 2. Determine the Response Level**

		Easier/Proximal	Moderate	Difficult/Distal
<b>Distal</b>  <b>Prox</b>	<b>Phase 1</b>	Small	Medium	Large
	<b>Phase 2</b>	Small	Medium	Large
	<b>Phase 3</b>		Small	Large
	<b>Phase 4</b>		Small	Large
	<b>Phase 5</b>		Small	Medium

*Step 3. Choose the Responses (Paired with Judicial Approval/Verbal Praise)*

## 3a. Therapeutic Response

	Phase 1	Phase 2	Phase 3	Phase 4
Single Event	<ul style="list-style-type: none"> <li>Behavior Chain</li> <li>Cost/Benefit Analysis</li> </ul>	<ul style="list-style-type: none"> <li>Behavior Chain</li> <li>Cost/Benefit Analysis</li> </ul>	<ul style="list-style-type: none"> <li>Behavior Chain</li> </ul>	<ul style="list-style-type: none"> <li>Behavior Chain</li> </ul>
Continued Progress		<ul style="list-style-type: none"> <li>Change in LOC</li> </ul>	<ul style="list-style-type: none"> <li>Aftercare Fqcy</li> <li>Re-evaluate Pharmacological Interventions</li> </ul>	<ul style="list-style-type: none"> <li>Aftercare Fqcy</li> <li>Re-evaluate Pharmacological Interventions</li> </ul>

## 3b. Supervision Responses

Phase 1	Phase 2	Phase 3	Phase 4
<ul style="list-style-type: none"> <li>Change in Curfew Status</li> </ul>	<ul style="list-style-type: none"> <li>Reduced Contacts</li> <li>Reduction in Home Visits</li> </ul>	<ul style="list-style-type: none"> <li>Reduced Contacts</li> <li>Reduce Home Visits</li> <li>Reduce in External Monitoring Devices</li> </ul>	<ul style="list-style-type: none"> <li>Reduced Contacts</li> <li>Decreased Drug Testing</li> </ul>

## 3c. Incentive Response

Small	Medium	Large
<ul style="list-style-type: none"> <li>• Judicial approval (always)</li> <li>• Fish Bowl</li> <li>• Decision Dollars</li> <li>• Example for other participants in court</li> <li>• Handshake</li> <li>• Candy</li> <li>• ≤ 1 day reduction of curfew</li> </ul>	<p><b>Any small and/or:</b></p> <ul style="list-style-type: none"> <li>• ≤ 3 day reduction of curfew</li> <li>• Choice of Gift Certificate</li> <li>• Supervisor Praise</li> <li>• Written Praise</li> <li>• Positive Peer Board</li> <li>• Certificate</li> <li>• Reduction in CS hours</li> <li>• Reduction in program fees</li> </ul>	<p><b>Any small, medium or:</b></p> <ul style="list-style-type: none"> <li>• Framed Certificate</li> <li>• Travel Pass</li> <li>• Larger Gift Certificate</li> <li>• Position as Mentor to New Participants</li> <li>• Reduction of Curfew</li> </ul>

# WWYD

## Using the Matrix

- **Identify the behavior**
- **Select the response level**
- **Select the response:**
  - **Sanction?**
  - **Therapeutic response?**
  - **Supervision response?**



# Diluted UAs

- **Devon, 27, is Phase 3. When he was in Phase 1 and 2, he had a series of dilutes. 3 months ago, he had 2 more. Medical exam revealed no issues.**
- **Devon said he has a shy bladder and can't go when under stress. He drinks a lot of water before hand so he can produce a sample.**



# Diluted UAs

- He had no explanation other than he drinks a lot of energy drinks to keep sharp at work.
- The judge put Devon on a 30-day behavior contract. During that time, Devon had no dilutes.
- Now, 3 months later, Devon has had another dilute. His treatment counselor says Devon is in the Contemplation stage of change.



# How do you respond?

- 1. 24 hours of CS.** Devon has shown that he can produce a non-diluted sample.
- 2. Put Devon back on the behavior contract** and nip this in the bud. If he succeeds, give him a CS voucher. If he fails, require CS.
- 3. 24 hours in jail.** Enough is enough.
- 4. No sanction, but place Devon on the IVR** call-in system for UA for the next 30 days. If he is drinking, we will catch him. If he continues to have dilutes, sanction accordingly.

# Questions, Training, TA?

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