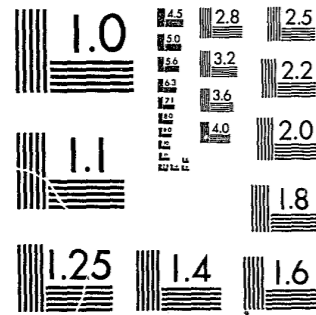


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National Institute of Justice
United States Department of Justice
Washington, D. C. 20531

10/22/82

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M 4500.1F
December 21, 1977

OMB APPROVAL NO. 43-R0525

U. S. DEPARTMENT OF JUSTICE LAW ENFORCEMENT ASSISTANCE ADMINISTRATION		CATEGORICAL GRANT PROGRESS REPORT	
GRANTEE Connecticut Justice Commission 75 Elm Street Hartford, Connecticut	LEAA GRANT NO. 80-PG-AX-0034	DATE OF REPORT 9/28/81	REPORT NO. 6
IMPLEMENTING SUBGRANTEE Connecticut Department of Correction 340 Capitol Avenue Hartford, Connecticut 06106	TYPE OF REPORT <input type="checkbox"/> REGULAR <input type="checkbox"/> SPECIAL REQUEST <input checked="" type="checkbox"/> FINAL REPORT		
SHORT TITLE OF PROJECT Connecticut TRAP Project	GRANT AMOUNT \$353,742		
REPORT IS SUBMITTED FOR THE PERIOD 5/1/80		THROUGH 7/31/81	
SIGNATURE OF PROJECT DIRECTOR <i>Frank B. Hall</i>	TYPED NAME & TITLE OF PROJECT DIRECTOR Frank B. Hall Project Director		
COMMENCE REPORT HERE (Add continuation pages as required.)			
SUMMARY OF PROGRAM ACCOMPLISHMENTS			
A. <u>Achievements Toward Meeting Needs</u> The Law Enforcement Assistance Administration (LEAA) grant award of the Treatment and Rehabilitation for Addicted Prisoners (TRAP) Program to the Addiction Services Division of the State of Connecticut Department of Correction allowed for the continued development and operationalization of a comprehensive treatment service program for sentenced drug abusing inmates. A continuity of care system characterized by a multi-modality approach to treatment and coordination of services has been established at the Connecticut Correctional Institution-Somers (a maximum security facility) and the Connecticut Correctional Institution-Enfield (a minimum security facility). This system begins with the inmate's admission to the correctional system in sentenced status and continues with the outreach, identification, screening and evaluation of drug abusers, comprehensive treatment services being offered while institutionalized, community and			
<small>NOTE: No further monies or other benefits may be paid out under this program unless this report is completed and filed as required by existing law and regulations (FMC 74-7: Omnibus Crime Control Act of 1976).</small>			
RECEIVED BY GRANTEE STATE PLANNING AGENCY (Official)			DATE
<small>EAA FORM 4567/1 (REV. 2-77) REPLACES EDITION OF 10-75 WHICH IS OBSOLETE.</small>			

84001

pre-release planning and services, and the out-patient community services of Project FIRE and other agencies while in parole status.

Data collected on TRAP Program outreach and identification substantiates state and federal studies which consistently indicate that a significant percentage of drug abusing offenders enter state correctional systems of which approximately 19% have received prior treatment. Thus, with the TRAP Program, a higher percentage of the state's population of sentenced inmates with a prior history of drug abuse are receiving institutional treatment services. Of those in the TRAP Program, 36% of the participants are receiving substance abuse treatment for the first time. The establishment of the TRAP Program has expanded the previous scarce system of services developed by the Addiction Services Division in Connecticut's state correctional facilities and in the community. The National Advisory Commission on Criminal Justice Standards and Goals recommended in Standard 11.5 for Special Offender Types that "each institution must experiment with and work toward the development of institution programs that can be related eventually to community programs following parole or release and that have more promise in dealing effectively with addiction". The TRAP Program, with its documented policies and procedures is a long awaited model program which has addressed the needs and the goal of providing substance abuse treatment and continuity of care for sentenced inmates with addiction problems.

There is now an adequate and properly coordinated treatment service system available within the Connecticut Department of Correction's major male correctional institutions for the drug dependent inmate. Skilled personnel, including minority candidates, have been hired and trained to treat drug abusers and are able to provide comprehensive services necessary for adequate treatment within the correctional facilities. Operational guidelines and procedures on the regulatory functions and structure of the TRAP Program have been established by a Treatment Committee, are acceptable by all affected parties, and have allowed for the effective implementation

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of the TRAP Program Statement (See Appendix A for TRAP Program Statements) has set a firm basis for favorable agreement and successful coordination between the administration of the respective institutions, the Deputy Commissioner of Institutions, the Chairman and members of the Board of Parole, the Deputy Commissioner of Field Services, the Chief of Community Release, the Director of Addiction Services, and the inmate. This agreement between all the above-mentioned parties offers guaranteed parole and, where possible, Community Release to participants who successfully complete the Institutional Phase of TRAP treatment programming.

U.S. Department of Justice
National Institute of Justice

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B. Impact on Criminal Justice, Treatment and Other Systems

The implementation and operationalization of the TRAP Program has had a strong and positive impact within and outside the Department of Correction and the State of Connecticut. In general, impact has been made in the following areas: increased communication, cooperation, coordination and rapport among key parties, establishing unprecedented policies, regulations and procedures, administrative interface and treatment linkages with agencies outside the Department of Correction, public relations, and expansion of institutional addiction services and continuity of care in the community. The above-mentioned factors have had a positive impact philosophically toward the treatment of addiction and the aim of providing quality services to addicted prisoners.

The most substantial impact has been accomplished within the Connecticut Department of Correction. At the institutional level, the Addiction Services TRAP Program has gained recognition with all custodial, treatment, administrative personnel, and the inmate population. Prior to program implementation, all institutional and diagnostic counselors, and correctional officers at the respective institutions, who serve as possible referral sources for the TRAP Program, were provided with descriptive information including program eligibility criteria. Inmates were oriented to the TRAP Program through the following mechanisms: a major outreach effort was provided by TRAP Program staff utilizing institutional inmate master file lists to research and identify eligible candidates; orientation of newly admitted inmates; program information provided by the above-mentioned institutional referral sources; advertisements on all institutional bulletin boards and in the weekly circulated inmate newspapers; and word of mouth. A good rapport has been established between the Director of Addiction Services, the Wardens and Deputy Wardens of the respective institutions, and the Deputy Commissioner of Institutions which has resulted in increased communication, and excellent cooperation and coordination in regard to TRAP Program and substance abuse treatment concerns.

Another major impact has resulted from the development of an excellent relationship between the members of the TRAP Screening Committee composed of the Addiction Services TRAP Project Director, the Chairman of the Board of Parole, and the Chief of Community Release. Positive communication and cooperation between all parties has led to a realistic and viable set of TRAP Program Eligibility Criteria, the TRAP Program Statement, and established Procedures and Guidelines for the TRAP Screening Committee. These written documents and excellent cooperation have resulted in a very low rate of denials by the TRAP Screening Committee of TRAP Program applications. A reasonable time period of Board of Parole processing of TRAP applications has emerged from this excellent relationship. From the point that the TRAP application is submitted to the Board of Parole until disposition there is an average of 11.84 working days. The Board of Parole TRAP application processing time is broken down by institution as follows: C.C.I. -Somers, 13.13 working days; and C.C.I. -Enfield, 10.88 working days.

To facilitate communication and continuous cooperation, there are Monthly Progress Reports sent to the Board of Parole on TRAP participants, and regular meetings are held to monitor the TRAP process and alleviate any operational problems (See Appendix B for TRAP Program Eligibility Criteria, Procedures for the TRAP Screening Committee, and Monthly Report to the Board of Parole). An example of this excellent relationship is the positive cooperation which has emerged between the Board of Parole and the TRAP Program. Addiction Services receives an average of seven (7) referrals a month on inmates at C.C.I. -Somers and Enfield who have recently been denied parole and who are recommended by the Board of Parole for the TRAP Program. These inmates are approached by TRAP Program staff and are asked if they wish to participate in the program. If they are interested, they are immediately processed.

Major accomplishments have been made with regard to program operations, the implementation of the various treatment approaches, development of treatment plans,

provision of treatment services, and active client participation. TRAP Program Procedural Guidelines for client intake, treatment planning, development of treatment files, and, discharge and referral to Project FIRE have been established (See Appendix C for TRAP Program Guidelines). All TRAP staff members have completed 70 hours of training in the Behavioral Studies Methodology in addition to extensive departmental training. The staff of the TRAP Program have received over 2,000 hours of training. A Manual for a Behavioral Studies Program, a comprehensive handbook and guide for program facilitators, has been developed, distributed, and implemented. This manual has complemented and enhanced the counseling skills of all staff trained in the methodology of the Behavioral Studies Program. In order to enhance the quality of the TRAP Program, TRAP staff members are continuously receiving training and skill development in the areas of group dynamics, family counseling, assessment and treatment planning, and other counseling skills. Appropriate training has been made available to staff with the assistance of the TRAP Program Educational Curriculum Specialist, the Connecticut Justice Academy, and the Connecticut Alcohol and Drug Abuse Commission (CADAC) training programs. In addition, bi-weekly treatment meetings are held for TRAP staff in order to facilitate such training opportunities and in order to continuously strive toward increased professionalism and quality TRAP treatment programming.

The Audio-Book Unit has become operational within the TRAP Program at C.C.I. - Somers. This unit records books for the blind and physically handicapped and is being conducted with the cooperation of the Connecticut State Library. The Ensworth Charitable Foundation has provided the funds for the recording equipment. The Audio-Book Unit provides a constructive activity for the participants of the TRAP Program in that it raises the self-esteem of the participant by making him feel, through a sense of accomplishment, that he is making a positive contribution to society. In addition to Recording for the Blind, coordination with public and private social service agencies has resulted in outside speakers visiting the TRAP Program. These vocational services and visits have been favorably received by TRAP participants.

Continuity of care for TRAP participants, placed in Community Release status after completing the Institutional Phase of treatment has been insured through established procedures and pre-release planning. Coordination has been developed for the inmate's smooth transfer to either a Halfway House (under contract with the Department of Correction) or to a Pre-Release Program at a Community Correctional Center in the locale in which the individual lives. A Project FIRE counselor visits the TRAP client approximately one month prior to transfer from the institution and makes periodic visits with the client during the Community Release Phase in order to allow for a smooth re-entry to the community. Upon release on parole, the client is actively involved in Project FIRE for 6-9 months and then will be followed-up bi-monthly for an additional 12 months. Mechanisms have been established such as report forms, and coordination procedures for the TRAP Institutional Program, the Community Release facility, the Division of Parole and Project FIRE to insure that there is no break in the continuity of care between the TRAP Institutional Phase and TRAP parole. Cooperation between the above-mentioned parties has been excellent and a good working relationship is shared by all parties.

A precedent has been set between the Addiction Services Division of the Department of Correction and the TASC Program of the Office of Adult Probation in the form of a Letter of Agreement. This Letter of Agreement between these two parties has allowed for the development of mutual coordination and delivery of treatment services to mutual clients. Specific procedures have been developed and formulated to assure such coordination and regular meetings are held to monitor the interaction. There is frequent telephonic communication between the Project Directors of the TRAP and TASC Programs and a good working relationship has developed (See Appendix D for Letter of Agreement, and Procedures for Addiction Services Division Coordination with the TASC Program).

In general, the quality of coordination and cooperation between the staff of The Institute for Human Resources Research (IHRR) and the TRAP Project Director and Research Analyst has been excellent. Frequent correspondence has been maintained with the IHRR staff. The research and methodological design for the evaluation of the TRAP Program has been extremely comprehensive and accurate which should result in valid and reliable findings if the evaluation receives continued funding.

The last impact area to be discussed refers to the impact the TRAP Program has made outside the State of Connecticut. The Connecticut TRAP Program at C.C.I. - Somers has hosted visits from an employee of the Drug Dependence Division of the Massachusetts Department of Mental Health, employees of the Department of Correction Drug Unit at the Adult Correctional Institution at Cranston, Rhode Island, and employees of the New Jersey Department of Correction, TRAP Program at Annandale, New Jersey. These visitors were interested in seeing the TRAP Program and talking to the staff in order that they may learn the basics of developing and operating a drug program within a maximum security facility. The visitors were welcomed and information was shared. It is believed that such methods of information sharing can only positively impact all the parties involved.

C. Problems Encountered and Strategies Employed to Deal with the Problems

The Connecticut TRAP Program has experienced many problems which commonly arise when a new experimental program is instituted. Strategies and alternatives have been employed to resolve these problems. Some of the problems encountered are typical of such an endeavor; others are unique to the circumstances in the State of Connecticut. It is not atypical for a program to experience problems that were unforeseen at the time when the grant application was developed or awarded. However, as the Connecticut TRAP Program reaches the end of its second phase of funding, all the major problems have been resolved and emphasis is being placed on refinement of the program.

D. Progress Toward Second Year Goals, Performance Objectives, and Impact Goals

TRAP Goals

- 1a. To identify, screen, and evaluate 140 drug abusers within the correctional system and refer for appropriate treatment within a continuity of care system.
- 1b. By the end of the grant period, 710 drug abusers within the correctional center were identified, screened, evaluated, and referred for appropriate treatment within a continuity of care system.
- 2a. To develop realistic treatment plans with 85 drug abuse clients based upon the TRAP Program Statement; the agreement between the Department of Correction, the Board of Parole, and the inmate.
- 2b. Realistic treatment plans were developed with 125 drug abuse clients based on a solid contractual agreement among the Department of Correction, the Board of Parole, and the inmate by the end of the grant period.
- 3a. To maximize treatment opportunities for 76 drug abusers within two correctional institutions through completion of a 9 month therapeutic program.
- 3b. Treatment opportunities were maximized for 70 drug abusers within two correctional institutions through completion of a 9 month therapeutic program.
- 4a. To provide supportive community services for all participants of the TRAP Program through Project FIRE for six to nine months after release on parole.
- 4b. Supportive community services have been provided to 85% of the participants of the TRAP Program through Project FIRE for 6-9 months after release on parole.
- 5a. To attempt to follow-up for 12 months on all TRAP Program participants in order to measure the long-range effectiveness of the program.
- 5b. Due to the present suspension of funding for the National Evaluation, follow-up to measure long-range effectiveness of the program has not begun yet.
- 6a. To improve the manner and quality in which drug treatment services are provided to Connecticut prison inmates.
- 6b. The TRAP Program has been established at C.C.I. -Somers and C.C.I. - Enfield and provides quality drug treatment services to Connecticut prison inmates. A continuous effort is and will continue to be made to improve the manner and quality of the drug treatment services provided to Connecticut prison inmates.
- 7a. To decrease the rate of recidivism of illicit drug use and re-incarceration among TRAP participants.
- 7b. The attainment of this goal is extremely important to the evaluation of the TRAP Program. Every attempt will be made to maintain and continually improve the quality of TRAP treatment program so that such a goal will be achieved.

Performance Objectives and Progress

- 1a. Any staff attrition will be replaced through the hiring and training of new staff when necessary.
- 1b. During the grant period, staffing levels were kept at full complement by the replacement of staff attrition through the hiring and training of new staff when necessary.
- 2a. Identify, screen, and evaluate clients to maintain 90% of bed capacity of the TRAP treatment communities at C.C.I. -Somers and C.C.I. -Enfield from the first through the twelfth month.
- 2b. A total of 710 drug abuse clients were identified, screened and evaluated to maintain 90% of bed capacity at the TRAP treatment communities from the first through the fifteenth month.
- 3a. To keep the bed capacity of all TRAP communities above 90% from the first through the twelfth month.
- 3b. Bed capacity was maintained at over the 90% level from the sixth through the fifteenth month.
- 4a. To have pre-release services available to 100% of clients who complete institutional TRAP treatment programs.
- 4b. Pre-release services were available to 100% of the clients who completed the institutional TRAP treatment programs.
- 5a. To have drug abuse re-entry services available to 100% of clients who complete the institutional TRAP treatment programs.
- 5b. Re-entry services provided by Project FIRE were available to 100% of the clients who completed the institutional TRAP treatment programs.
- 6a. To provide realistic treatment plans based on the TRAP Program Statement for 100% of clients who enter the TRAP Program.
- 6b. Realistic treatment plans based on the TRAP Program Statement were provided to 100% of the clients who were admitted to the TRAP Program.
- 7a. To have 85 drug abusers enter the TRAP Program based on the TRAP Program Statement; the agreement between the Department of Correction, the Board of Parole, and the inmate.
- 7b. By the end of the grant period, 125 drug abusers entered the TRAP Program based on the TRAP Program Statement.
- 8a. To have 75 clients complete the TRAP Institution Phase.
- 8b. By the end of the grant period, 70 clients completed the TRAP Institutional Phase, while 68 clients remained active in the TRAP institutional program.
- 9a. To have 65 clients complete the TRAP Parole Phase.
- 9b. By the end of the grant period, 66 clients had entered the TRAP Parole Phase.

Impact Goals

1. Obtain a re-arrest rate for TRAP Program participants that is significantly less than a control group.
2. Reduce illicit drug use by TRAP Program clients to a rate that is significantly less than a control group.
3. Obtain a re-incarceration rate for TRAP Program participants that is significantly less than a control group.

It is certain that the three above mentioned impact goals will be achieved through the successful operation of the TRAP Program and the quality treatment services offered to all program participants. The status of the impact goals cannot be measured at this point, nor by the end of the grant period. The data is incomplete and inconclusive at this point. Evaluative data is being collected continuously in order to research the impact of these goals. The impact of these goals will not be determined until a significant number of TRAP clients complete the Parole Phase, are followed-up, and until all necessary data is collected, compiled, and analyzed. Please note Section E-Progress on Evaluation.

4. Develop a coordinated approach to the identification and treatment of drug dependent inmates at C.C.I. -Somers and C.C.I. -Enfield.

A coordinated approach to the identification and treatment of drug dependent inmates at C.C.I. -Somers and C.C.I. -Enfield has been developed through the implementation and operation of the TRAP Program.

E. Progress on the Evaluation

Progress on the evaluation of the TRAP Program has been poor since the funding for the Institute for Human Resources Research (I.H.R.R.) was discontinued in September, 1980. There continues to be communication between the TRAP Project Director and I.H.R.R. staff discussing the prospects for additional funding to complete the Evaluation.

The collection of the TRAP Screening Instruments continued until January, 1981 at which time a total of 303 screening instruments had been completed. There are a total of 128 screening instruments for the experimental group and 171 screening instruments for the comparison group.

The collection of the TRAP Parole Officer/Agent Locator Update Form on the experimental and the comparison group by Project FIRE staff continued until September, 1981. The TRAP Parole Officer/Agent Locator Form was completed on a quarterly basis for 66 TRAP clients. The form was completed on a monthly basis for 78 clients from the comparison group. Even though the collection of the TRAP Parole Officer/Agent Locator Update form has been discontinued, the Director of the Addiction Services Division and the TRAP Project Director are confident that if additional funding is secured for the evaluation that the clients in the experimental and comparison group can be efficiently and effectively followed-up. Please note letter of support to Dr. Marvin Burt of I.H.R.R. in Appendix E.

Although the comprehensive evaluation has not been completed, there is some other data that has been collected over the past three years that has yielded some interesting information. Approximately 36% of those clients in the TRAP Program are receiving substance abuse treatment for the first time through TRAP. Only 14% of the TRAP clients have had no prior convictions while 50% have had at least three prior convictions. 66.5% were under the influence of drugs or alcohol at the time of the offense causing their present imprisonment. 69% of the clients were previously involved in opiate abuse, either alone or in addition to other drugs including alcohol.

Heroin was the primary drug of abuse for 57% of the clients while 34% of the TRAP clients primary drug(s) of abuse was hard, non-opiate drug(s). The median length of time served by the clients in their respective institutions prior to entering the TRAP Program was ten (10) months. These are merely a few of the findings and yet, they present an interesting TRAP client profile.

Please note attached in the Appendices, the TRAP Statistical Report with total numbers since inception, and the Outreach/Intake Summary - Total Since Inception period ending 7/31/81.

State of Connecticut
Department of Correction
Addiction Services Division

PROJECT TRAP - PROGRAM STATEMENT
C.C.I. - Somers

I. Introduction

Project TRAP (Treatment and Rehabilitation for Addicted Prisoners) is a unique program in which satisfactory completion of treatment goals provides for:

- 1) a Guaranteed Parole Release Date after the minimum present term is served from the Connecticut Board of Parole, and 2) where possible Guaranteed Community Release approximately 3 months prior to the Parole Release Date dependent on available bed space. Participants in the TRAP Program will receive seven day credit good time and regular pay for satisfactory participation. All clients who fulfill the eligibility criteria and are approved through the screening process will be placed in the TRAP Program subject to available bed space.

The provision of the Guaranteed Parole Release Date and Community Release will be contingent upon the following minimum required level of participation in the TRAP Program.

1. Satisfactory institutional work reports.
2. Satisfactory institutional performance with adherence to all departmental and program rules.
3. Satisfactory program performance and completion of specified treatment goals. Satisfactory completion shall be defined as completion at a performance level specified under the minimum requirements, within the reasonable capabilities of the inmate, for the specific treatment service to be evaluated by the TRAP Program staff.

II. Specific Treatment Services

The Department of Correction will provide comprehensive treatment services which will include the development of an individually designed treatment plan which will be monitored on a monthly basis. The treatment services will consist of individual and group counseling, and the Behavioral Studies Program.

A. Institutional Phase - (6 month minimum)

Minimum requirements for participants in the TRAP Program:

1. Attendance at all of the scheduled classes in the Behavioral Studies Program.

2. Attendance at all scheduled individual counseling sessions with a minimum of one-1 hour session scheduled per week.
3. Attendance at all scheduled group counseling sessions (i.e. values clarification, relaxation therapy) with a minimum of two-1½ hour sessions per week.

Attendance is required at 100% of the above treatment sessions unless the client's absence is authorized in writing by the Addiction Services Counselor Supervisor or his designee. Failure to comply with the above minimum requirements may result in removal from the TRAP Program and return to regular population housing.

THE CLASSIFICATION COMMITTEE RESERVES THE RIGHT TO DETERMINE ADMISSION TO AND REMOVAL FROM THE TRAP PROGRAM. IF AN INMATE IS DENIED ADMISSION OR IS REMOVED FROM THE PROGRAM, HE MAY APPEAL SUCH DECISION THROUGH EXISTING GRIEVANCE PROCEDURES (SEE C.C.I. -SOMERS HANDBOOK OF REGULATIONS AND PROGRAMS).

B. Community Re-entry Phase

Minimum requirements for participants in the TRAP Program:

1. Satisfactory participation while in Community Release status with placement in a Group Home/Community Correctional Center for approximately 3 months prior to Parole Release Date. Placement will be dependent on available bed space.
2. Stipulation to Project FIRE by the Connecticut Board of Parole as a condition of parole supervision. Project FIRE re-entry services include: comprehensive treatment planning, substance abuse counseling, individual, group and family counseling, employment assistance, urinalysis monitoring, and social service referrals. Upon satisfactory completion of the Project FIRE Program, Project FIRE staff will make a recommendation through the Parole Officer to the Board of Parole for consideration of an early discharge from parole supervision when eligible.

Failure to maintain satisfactory participation in Community Release status may result in removal from Community Release status, and may void the Guaranteed Parole Release Date. After an inmate has been granted parole at the parole hearing date, the inmate must continue to maintain satisfactory institutional performance. Failure to maintain satisfactory institutional performance may result in a parole rescission.

Failure to comply with the required participation in Project FIRE may result in parole violation with possible subsequent parole revocation.

THE ABOVE DESCRIBED PROGRAM IS SUBJECT TO CHANGE IN ALL OR ANY PART AT THE DISCRETION OF THE DEPARTMENT OF CORRECTION.

Department of Correction
Addiction Services Division

PROJECT TRAP - PROGRAM STATEMENT
C.C.I. -Enfield

I. Introduction

Project TRAP (Treatment and Rehabilitation for Addicted Prisoners) is a unique program in which satisfactory completion of treatment goals provides for: 1) a Guaranteed Parole Release Date after the minimum present term is served from the Connecticut Board of Parole, and 2) where possible Guaranteed Community Release approximately 3 months prior to the Parole Release Date dependent on available bed space. Participants in the TRAP Program will receive seven day credit good time and regular pay for satisfactory participation. All clients who fulfill the eligibility criteria and are approved through the screening process will be placed in the TRAP Program subject to available bed space.

The provision of the Guaranteed Parole Release Date and Community Release will be contingent upon the following minimum required level of participation in the TRAP Program.

1. Satisfactory institutional work reports.
2. Satisfactory institutional performance with adherence to all departmental and program rules.
3. Satisfactory program performance and completion of specified treatment goals. Satisfactory completion shall be defined as completion at a performance level specified under the minimum requirements, within the reasonable capabilities of the inmate, for the specific treatment service to be evaluated by the TRAP Program staff.

II. Specific Treatment Services

The Department of Correction will provide comprehensive treatment services which will include the development of an individually designed treatment plan which will be monitored on a monthly basis. The treatment services will consist of individual and group counseling, and the Behavioral Studies Program.

A. Institutional Phase - (4 month minimum)

Minimum requirements for participants in the TRAP Program.

1. Attendance at all of the scheduled classes in the Behavioral Studies Program.

6/28/79

2. Attendance at all scheduled individual sessions with a minimum of one-1 hour session scheduled per week.
3. Attendance at all scheduled group counseling sessions (i.e. values clarification, relaxation therapy) with a minimum of two-1½ hour sessions per week.

Attendance is required at 100% of the above treatment sessions unless the client's absence is authorized in writing by the Addiction Services Counselor Supervisor or his designee. Failure to comply with the above minimum requirements may result in removal from the TRAP Program and return to regular population housing.

THE CLASSIFICATION COMMITTEE RESERVES THE RIGHT TO DETERMINE ADMISSIONS TO AND REMOVAL FROM THE TRAP PROGRAM. IF AN INMATE IS DENIED ADMISSION OR IS REMOVED FROM THE PROGRAM, HE MAY APPEAL SUCH DECISION THROUGH EXISTING GRIEVANCE PROCEDURES (SEE C.C.I. -ENFIELD RULES AND REGULATIONS, SERVICES AND PROGRAMS HANDBOOK).

B. Community Re-entry Phase

Minimum requirements for participants in the TRAP Program:

1. Satisfactory participation while in Community Release status with placement in a Group Home/Community Correctional Center for approximately 3 months prior to Parole Release Date. Placement will be dependent on available bed space.
2. Stipulation to Project FIRE by the Connecticut Board of Parole as a condition of parole supervision. Project FIRE re-entry services include: comprehensive treatment planning, substance abuse counseling, individual, group and family counseling, employment assistance, urinalysis monitoring, and social service referrals. Upon satisfactory completion of the Project FIRE Program, Project FIRE staff will make a recommendation through the Parole Officer to the Board of Parole for consideration of an early discharge from parole supervision when eligible.

Failure to maintain satisfactory participation in Community Release status may result in removal from Community Release status, and may void the Guaranteed Parole Release Date. After an inmate has been granted parole at the parole hearing date, the inmate must continue to maintain satisfactory institutional performance. Failure to maintain satisfactory institutional performance may result in a parole rescission.

Failure to comply with the required participation in Project FIRE may result in parole violation with possible subsequent parole revocation.

THE ABOVE DESCRIBED PROGRAM IS SUBJECT TO CHANGE IN ALL OR ANY PART AT THE DISCRETION OF THE DEPARTMENT OF CORRECTION.

6/28/79

C.C.I. -Enfield and Somers

TRAP PROGRAM ELIGIBILITY CRITERIA

1. A drug abuse background which indicates compulsive use and results in dysfunctional behavior.
2. Normal Program Exclusions:
 - a. Men whose sole drug of abuse is alcohol.
 - b. Men serving sentence(s) for aggressive sexual crimes.
 - c. Men who have a serious emotional or psychiatric disorder.
 - d. Men with a background of violent or assaultive behavior and escapes.
3. All prospective TRAP candidates must meet satisfactory institutional standards of performance and adjustment. Those inmates that have had misconduct reports or unsatisfactory work reports within the past 4 months will not normally be considered for admission into the TRAP Program.
4. Parole violators who have had their parole revoked two or more times and/or those inmates who are currently serving a sentence for a felony committed while in parole status, will normally not be considered for the TRAP Program.
5. 6-18 months from Parole Eligibility Date at point of Eligibility Interview by TRAP Evaluation Committee.

The purpose of the above eligibility criteria is designed to identify the most appropriate candidates for screening with regard to the viability for participation in the TRAP Program. The Classification Committee reserves the right to determine admission to and removal from the TRAP Program. If a candidate is denied admission to the TRAP Program, he may appeal such decision through existing grievance procedures.

2. Any recent misconduct reports? (CIRCLE ONE)

YES NO

If yes, please comment and/or attach Disciplinary Report: _____

3. Is the client in Community Release Status? (CIRCLE ONE)

YES NO

a. Has the client maintained satisfactory institutional performance while in Community Release Status? (CIRCLE ONE)

YES NO

If no, please comment: _____

III. Summary Statement

1. As of the end of this report period, has this client adhered to all requirements of the TRAP Program Statement? (CIRCLE ONE)

YES NO

If no, please comment: _____

2. Additional Comments regarding client's progress: _____

Prepared by _____

This report is due on the 7th day of each month.

Send to: Mr. Frank B. Hall
TRAP Project Director
Department of Correction
Addiction Services Division
340 Capitol Avenue
Hartford, Connecticut 06106

Thank you.

The Program Director should maintain a record of all prospective clients and their assigned counselor to assure that a counselor is available to perform a thorough intake (at least an hour). Counselor-client rapport should be initiated at this interview. The treatment "helping" aspects of the program should be emphasized.

Referral sources should be contacted to convey results following the client's first appointment to promote good relations. Before concluding each session, the next appointment should be scheduled establishing definite days and times. Each time, this information should be given the client in writing.

At the Intake Interview, the following should be covered:

1. A reiteration of an overview of the program.
2. A review of the TRAP Program's treatment services.
3. A Thorough Explanation of Confidentiality Rules and Regulations. Each program is to comply with the Federal Register for Confidentiality of Alcohol and Drug Abuse Patient Records. The standardized individual Authorization of Disclosure Form is to be utilized for all client disclosure of information outside of the Department. Any information sent out should be stamped with the Prohibition of Redisclosure statement. Extreme caution should be taken in releasing a client's identity or other data over the telephone. The caller should be instructed that the program cannot release any information on a client unless a specific waiver for this information is signed by the client.

4. Explanation of TRAP Program Statement. Each client should be given a thorough explanation of the TRAP Program Statement and a copy of the Program Statement.

A client is expected to behave responsibly in attending his appointments. He must be willing to agree to formulate a treatment plan with his primary counselor tailored to client's individual needs. It is expected that the client will attempt to meet the goals of the plan. A client is expected to remain drug-free while participating in the TRAP Program.

A client can expect a counselor's credibility, honesty, and treatment of him as an individual.

5. Termination Criteria and Review process. Successful completion of the program is determined by a client's performance in meeting his treatment plan and compliance to program requirements.

A client is formally notified by a pretermination letter when a decision is made to terminate his treatment. Reasons for termination are stated in this letter. In addition, the right for a review process is stated.

The client is required to contact the program by the date indicated on his letter if he wishes a review. An appointment is then set up to discuss the reasons for termination. The client is allowed to bring any persons or other documentation he may wish to substantiate his case. The program encourages efforts to continue treatment. A realistic agreement toward this end is developed between the program and client which both parties hold.

TREATMENT AND DOCUMENTATION

I. General Policy and Procedures

The goal of clinical record-keeping is that records be maintained so that the full history of each client can be clearly and easily traced from intake through discharge.

1. Each counselor is responsible for providing adequate documentation of direct services provided by the TRAP Program and supportive services arranged by the program for each client on his caseload.
2. Files should be kept in an organized and consistent manner with access limited only to authorized individuals. Active clients should be filed separately from inactive clients.
3. All staff members should be aware of confidentiality laws and are responsible to uphold them.
4. Each program is responsible for maintaining an updated "Client Master Chart System".
5. Each program will appropriately utilize the standardized TRAP forms. (See attached chart section)
6. All staff members will be expected to participate in appropriate staff training and meetings.

II. Intake Interview

1. TRAP Admission Form-E- Personal and Drug History

A complete personal and substance abuse history for each client must be secured upon the client's entry into the program and shall be maintained in the individual client's records and kept up to date throughout the client's treatment. The TRAP Admission Intake Form-E will be completed at the Intake Interview by the client, and reviewed thoroughly by his counselor.

2. A CODAP admission form should be completed. The green copy should be maintained in the individual client's records.
3. The Assessment Section of TRAP Form-I should be completed within 7 days of admission into the program.
4. The Statement of Problem(s)- Current Status Section of the Treatment Plan should be completed.

III. Treatment Plan

1. Within 30 days of admission a treatment plan will be developed between the client and his primary counselor.

2. Treatment plans should be dated, signed and individually tailored to meet the client's needs. Plans should include a) short-term and long-term goals generated by both staff and client, b) a time schedule for meeting these goals, c) assignment of primary counselor, d) description of the type of counseling services provided and the frequency thereof, e) description of the supportive services determined to be needed by the individual client, f) results of physicals, g) results of urine testings, and implications of results on treatment, and h) efforts toward client's participation in educational programs. Short-term goals are defined as client activities in the institutional setting which promote the achievement of goals to be fulfilled within the correctional facility (ie, TRAP Program).

Long-term goals are defined as client activities in the community setting which promote the achievement of goals to be fulfilled in the community setting (ie, Project FIRE).

3. All goals stated in the "Treatment Plan" should be attempted and progress made toward meeting these goals should be reflected in "Client Progress Notes".

IV. Case Record Review- Progress Evaluation.

Case Record Reviews are to be held on a monthly basis at your scheduled staff meetings. A thorough review should be performed on each client.

1. Within 30 days of admission, a Case Record Review should be conducted to review the client's status, insure assignment of a primary counselor, and to develop a treatment plan.
2. At least once within a 90 day period thereafter, a Case Record Review should be conducted to review each unresolved problem/goal/method, compare services actually received in relation to those outlined in treatment plan, and include all pertinent details leading to the modification, if any, of the plan.
3. Just prior to discharge, a Case Record Review should be conducted to review the client's current status in relation to treatment plan, and determine how and when to discharge.

The primary counselor will be responsible for presenting the case at the Case Record Review. A separate sheet titled "Case Record Review" will be included in each client file. The Program Director will be responsible for conducting and recording of the Review. The Program Director will date, document, and sign each Case Review.

V. Progress Notes

A. Information to be documented:

1. Progress notes are documented evidence of all counseling sessions and other services to a client which relate to the treatment plan.
2. Individualized client progress notes must be in client files.
3. All necessary data containing pertinent information pertaining to the client should be documented to determine client's progress towards attaining short-term and long-term treatment goals.

4. Any action taken in response to a positive urine should be noted.
5. The client's participation in group counseling sessions should be individually commented on in his progress notes.
6. Progress notes must be legible, dates (including day, month, and year), and signed showing full signature and title of person making the report.
7. Progress notes will be used to verify regular face-to-face contact with a client.

VII. Discharge

The following are the categories to be used for client discharge:

Completed Treatment No Drug Use- A total successful completion of Program.

Transfer within Program.

Referred Outside This Program.

Non-Compliance.

Left Before Completing Treatment.

Death.

1. A Case Record Review should be held prior to the decision for discharge. A meeting should be arranged with the client and TRAP staff member, if possible, before a final decision is made to discharge a client for non-compliance.
2. A client is formally notified by a pretermination letter when a decision is made to terminate his treatment. Reasons for termination are stated in the letter along with the procedures for review process. Clients should be encouraged to continue rather than terminate, if appropriate.
3. When discharging a client, there should be a "Narrative Discharge Summary" prepared within 7 days after the client's discharge date. A client's status and progress with each goal in the treatment plan should be addressed.
4. A CODAP discharge report should be completed. The green copy should be maintained in the individual client's records.

VII. Referral to Project FIRE

Approximately two months prior to the client's community release date or parole eligibility date, the client should be referred to the appropriate Project FIRE office for re-entry services and to provide continuity of care. There should be a discussion of the client's case with the appropriate Project FIRE staff prior to the client's release date. All referrals to Project FIRE are to be recorded on the monthly FIRE referral form and sent to Central Office by the 7th of the month with your regular monthly report. A copy of the client's file should be given or mailed to the appropriate FIRE office one week prior to the actual release date.

Individual Client File Documentation

	<u>Completed By</u>	<u>When Completed</u>
Request for Admission-Form A	Client	TRAP Orientation Session
TRAP Eligibility Checklist-Form B	Primary Counselor	During Screening Process, after Form A
TRAP Screening Instrument-Form P	Primary Counselor	During Screening Process, prior to Eligibility Interview
Initial Locator Form (7/12/79)	Primary Counselor	During Screening Process, prior to Eligibility Interview
Release of Information Form	Primary Counselor/Client	During Screening Process and when appropriate.
Final of Admission-Form D	Program Director	Upon Denial of admission.
Waiting List-Form-C	Program Director	Upon development of waiting list.
Acknowledgement Statement-Form-H	Primary Counselor/Client	Upon explanation of Program statement during Screening Process.
Rate Profile Supplement-CN1117	Program Director	Upon submission of Preliminary Package
Community Release Application OR112	Program Director	Upon submission of Preliminary Package, if applicable.
Rate Transfer Request-COR11	Program Director	Upon submission of Preliminary Package, if applicable.
Judicial Clearance Form-COR111	Program Director	Upon submission of Preliminary Package, if applicable.
Admission Form-E	Client with review by Primary Counselor	Upon admission into Program.
Treatment Assessment Plan-Form-I	Primary Counselor	Within 7 days of admission into Program.
DAP Admission Report	Primary Counselor	Within 7 days of admission into Program.
Treatment Plan	Primary Counselor	Within 30 days of admission into Program. Should be initiated following completion of Treatment Assessment Plan.
Progress Notes	Primary Counselor	Same day as contact with client.

Form

Case Record Review
Progress Evaluation-

MAP Discharge Report

Administrative Discharge Summary

Monthly Progress Report to
Board of Parole-Form-J.

Completed By

Primary Counselor
presents case, Pro-
gram Directors con-
ducts Review.

Primary Counselor

Primary Counselor

Program Director

When Completed

1. Within 30 days of admission.
2. At least once within a 90 day period thereafter.
3. Seven days prior to discharge from Program.

Within 7 days of Program discharge.

Within 7 days of Program discharge.

Within 7 days of the end of each month.

LETTER OF AGREEMENT

This Letter of Agreement indicates that the Addiction Services Division of the Department of Correction and the TASC Program of the Office of Adult Probation will coordinate and cooperate efforts in order to enhance the appropriate delivery of treatment services to mutual clients. Specific procedures will be developed and formulated to insure the coordination between the above two parties. There will be regular meetings held between the two parties to monitor the interaction and coordination between the Addiction Services Division and the Office of Adult Probation.

Lawrence P. Mayer
Director, Addiction Services Division

4/27/79
Date

Thomas Kaput
Project Director, TASC Program

5/3/79
Date

Interdepartment Message

SAVE TIME: Handwritten messages are acceptable.

STO-201 REV 7/78 STATE OF CONNECTICUT
(Stock No. 6938-031-01)

Use carbon if you really need a copy. If typewritten, ignore faint lines

To	NAME Thomas Kaput	TITLE Project Director, TASC Program	DATE July 9, 1979
	AGENCY TASC - Adult Probation	ADDRESS 641 Maple Avenue, Hartford, Connecticut	
From	NAME Lawrence P. Mayer	TITLE Director, Addiction Services	TELEPHONE 566-2859
	AGENCY Department of Correction	ADDRESS 340 Capitol Avenue, Hartford, Connecticut	
SUBJECT Addiction Services Division Coordination with the TASC Program			

The following procedures were discussed at our meeting on 7/2/79. They will be implemented immediately to expedite the coordination between the Addiction Services Division and the Connecticut TASC Program.

1. A monthly referral list with all the referrals to TASC from the Addiction Services staff in each of the correctional centers will be developed. A referral list will be developed for each geographical area. The list of referrals will be forwarded to TASC Program Project Director by the 10th day of the following month. The referral list will be reviewed by the TASC Program and the appropriate disposition will be indicated. The referral list will be returned to the Addiction Services Division for dissemination to the appropriate staff in the correctional centers. Please find attached the proper form for the referral list.
2. As was discussed in our meeting, it has been recommended that in those drug cases that are expected to be sentenced to the custody of the Commissioner of Corrections that a specific recommendation to the TRAP Program be indicated in the Pre-sentence Investigation Report prepared by the Office of Adult Probation. All such cases upon sentencing will receive immediate consideration for the TRAP Program. Please find attached a one sheet description of the TRAP Program.
3. The Project Director of the TASC Program will send a list of names of those TASC clients that are sentenced to the specific community correctional centers to the Director of Addiction Services. The Addiction Services Division will offer the treatment services of the SIP Program or TRAP Program to such clients.
4. Active Project FIRE clients who are arrested may be referred to the appropriate TASC Program for assistance in court dependent on the offense and TASC eligibility.

The above procedures should provide a comprehensive screening network for drug abuse clients entering the criminal justice system, and enhance the cooperation and coordination between the TASC, TRAP, and SIP Programs.

LWM/jf

cc: Albert Butkus
Frank Hall ✓
Marla Hauslaib
Mary Stuart



STATE OF CONNECTICUT
DEPARTMENT OF CORRECTION
340 CAPITOL AVENUE • HARTFORD, CONNECTICUT 06106



WILLIAM A. O'NEILL
GOVERNOR

September 2, 1981

JOHN R. MANSON
COMMISSIONER

Dr. Marvin R. Burt
Institute for Human Resources Research
4340 East West Highway
Suite 506
Bethesda, Maryland 20014

Dear Dr. Burt:

I would like to take this opportunity to indicate my support and cooperation in your request for funding to complete the National Evaluation of the Connecticut TRAP Program. The Addiction Services Division will fully cooperate and insure your access to the necessary files and treatment records in accordance with the federal confidentiality regulations. The staff of the TRAP Program and Project FIRE will provide assistance to enable you and your staff to collect all of the necessary data and information and to contact the clients for the follow-up interviews.

As you know, an immense amount of data has already been collected on the TRAP Program, its clients, and its staff. In order to properly evaluate the impact and outcome of the TRAP Program, it is essential that the National Evaluation receive funding and be completed.

If I can be of any further assistance in this matter, please contact me.

Sincerely,

Lawrence P. Mayer
Director
Addiction Services Division

LPM/jf

TRAP STATISTICAL REPORT

PROJECT: Connecticut TRAP Program

PERIOD ENDING: 7/31/81

A. CLIENT PROFILES

	CUMULATIVE TOTAL SINCE INCEPTION	%
1. Number of clients receiving substance abuse treatment for the first time through TRAP.	76	35.8%
2. Number of clients in your project with no prior convictions.	30	14.2
3. Number of clients with at least three prior convictions.	106	50
4. Number of clients who were under the influence of drugs or alcohol at the time of offense causing present imprisonment.	141	66.5
5. Number of clients previously involved in opiate abuse (either alone or in addition to other drugs including alcohol).	147	69.3
6. Number of clients whose primary drug(s) of abuse was hard, non-opiate drug(s) (cocaine, barbiturates, amphetamines, and others such as LSD, Hallucinogens, PCP, etc).	72	34
7. Number of clients whose primary drug of abuse was alcohol.	0	0
8. Number of male clients in your project.	212	
9. Median length of time served by inmates in the institution prior to entry into this phase of TRAP.	10 mos.	
10. Number of clients whose primary drug of abuse was heroin.	120	56.6%

CLIENT FLOW	TOTAL SINCE INCEPTION
B. INSTITUTIONAL PHASE	
1. Number of inmates who, after the initial interview by TRAP staff, have been found to be potentially eligible for TRAP.	471
a. Number of above who formally request entry into TRAP.	246
b. Number of above for whom TRAP/MAP contracts are submitted to the parole authority.	219
c. Number of above whose TRAP/MAP contracts are approved by the parole authority.	214
d. Number of above who are officially admitted to TRAP.	212
2. Number of clients active at the end of grant period in this phase of TRAP.	68
3. Number of institutional clients who have dropped out against advice or who have otherwise violated the TRAP/MAP contract resulting in termination.	58
4. Number of clients who have reached the contracted MAP release date.	66
5. Number of clients actually paroled on the contracted MAP release date.	66
6. Number of clients transferred to Community Release.	70

C. COMMUNITY-BASED TREATMENT PHASE**	TOTAL SINCE INCEPTION
1. Number of TRAP clients referred to community-based treatment.	66
a. Number of above who are officially admitted to community-based treatment.	66
2. Number of clients active at the end of this quarter in this phase.	23
3. Number of clients who have dropped out of community-based treatment against advice or who have otherwise violated the TRAP/MAP contract resulting in termination.	10 *
a. Number of above whose parole was therefore revoked.	0
4. Number of clients who, despite temporary successful participation, were not able or required to complete the TRAP/MAP contract (e.g. client died, client allowed to change jurisdiction with parole authority approval, etc.).	3 *
5. Number of TRAP clients whose parole was revoked while in TRAP for reasons not related to the TRAP/MAP contract.	0 *
6. Number of clients arrested (other than traffic related arrests) while in TRAP.	7
7. Number of clients who have successfully completed this phase of the TRAP/MAP contract.	20 *

**TRAP Formula for Community-based treatment phase:
 (CQ) refers to current quarter figure.
 (TSI) refers to total since inception figure.

*Means that these figures should add to equal the total number of clients admitted to treatment since inception of your project. Please check formula before submitting your report.

$$Cl_a(TSI) = 2(CQ) + 3 \& 4 \& 5 \& 7 \text{ (all TSI)}$$

4/17/79

ADDICTION SERVICES DIVISION
TRAP PROGRAM
OUTREACH/INTAKE SUMMARY

LOCATION OF TRAP PROGRAM Connecticut

REPORTING FOR TOTAL SINCE INCEPTION - Period Ending 7/31/81.

	<u>Somers</u>	<u>Enfield</u>	<u>Total</u>
1. How many TRAP Screening Instruments were filled out by your staff during grant period?	<u>185</u>	<u>118</u>	<u>303</u>
2. How many inmates were accepted into your TRAP Program during grant period?	<u>125</u>	<u>87</u>	<u>212</u>
3. How many inmates were rejected for TRAP?	<u>555</u>	<u>183</u>	<u>738</u>
3a. How many in (3) above were rejected only because they were not drug abusers?	<u>35</u>	<u>26</u>	<u>61</u>
3b. How many in (3) above were rejected only because they were not MAP eligible?	<u>0</u>	<u>0</u>	<u>0</u>
3c. How many in (3) above were rejected only because they failed to meet the other eligibility criteria (except for that noted in 3a)?	<u>338</u>	<u>91</u>	<u>429</u>
3d. How many in (3) above were rejected only because of unavailability of beds?	<u>0</u>	<u>0</u>	<u>0</u>
3e. How many in (3) above were rejected principally for reasons not specified in (3a) through (3d) above? (SPECIFY PRINCIPAL REASON BELOW)			
<u>Denied by Classification Committee</u>	<u>40</u>	<u>4</u>	<u>44</u>
<u>Denied by Warden/Superintendent</u>	<u>0</u>	<u>9</u>	<u>9</u>
<u>Denied by TRAP Screening Committee</u>	<u>14</u>	<u>23</u>	<u>37</u>
<u>Self-Withdrawal</u>	<u>48</u>	<u>27</u>	<u>75</u>
<u>Denied at Eligibility Interview</u>	<u>80</u>	<u>3</u>	<u>83</u>
<u>Limited English Ability</u>	<u>0</u>	<u>1</u>	<u>1</u>
<u>Transferred out of Facility</u>	<u>0</u>	<u>1</u>	<u>1</u>

	<u>Somers</u>	<u>Enfield</u>	<u>Total</u>
4. How many inmates who were approved for TRAP at the eligibility interview were offered the chance to participate in TRAP?	<u>293</u>	<u>126</u>	<u>419</u>
4a. Of those (in Question 4), how many decided not to participate in TRAP?	<u>179</u>	<u>34</u>	<u>213</u>
5. How many TRAP treatment slots (beds) were available to be filled during this entire month?	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
6. Were notices of TRAP slot availability published or distributed in any institution this month to inform inmates of TRAP? (CIRCLE ONE)			
YES			<u>1</u>
NO (WAITING LIST)			<u>0</u>
IF "YES" PLEASE ATTACH COPIES OF THESE NOTICES			
7. How many group meetings were held with inmates during grant period to inform them about the TRAP Program?	<u>120</u>	<u>122</u>	<u>242</u>
IF NONE, RECORD "00" AND SKIP TO Q.8			
7a. How many inmates attended these meetings? (RECORD TOTAL NUMBER OF INMATES ATTENDING ALL MEETINGS)	<u>1,322</u>	<u>1,133</u>	<u>2,455</u>
8. How many requests for appointments were made by inmates during grant period either to discuss TRAP with staff or to enroll in TRAP?	<u>912</u>	<u>346</u>	<u>1,258</u>
IF NONE, RECORD "00" AND SKIP TO Q.9			
8a. How many of these requests did your staff respond to during grant period?	<u>847</u>	<u>346</u>	<u>1,193</u>
9. How many appointments for interviews or discussions of TRAP were made by staff with inmates this grant period?	<u>546</u>	<u>466</u>	<u>1,012</u>
IF NONE, RECORD "00" AND SKIP TO Q.10			
9a. How many of these appointments were NOT kept:			
(1) by staff?	<u>36</u>	<u>0</u>	<u>36</u>
(2) by inmates?	<u>107</u>	<u>2</u>	<u>109</u>

10. Please record the average number of days between request for appointment and completion of appointment during this month. (IF AVERAGE TIME WAS LESS THAN 8 HOURS, RECORD THIS AS 1 DAY.)

<u>Somers</u>	<u>Enfield</u>	
<u>7</u>	<u>1</u>	(days)

11. Please list and briefly describe the types of outreach methods you used this month. In the left column, list those you used and plan to continue to use; in the right column, list those you used but do not plan to use again because they do not appear useful.

METHODS USED NOW/LATER	METHODS USED/NOT TO BE USED LATER
<u>C.C.I. -Somers</u>	N/A
Orientation	
Word of Mouth	
Inmate Request	
Inmate Radio Station	
Inmate Newspaper	
Parole Board Referrals	
 <u>C.C.I. -Enfield</u>	 N/A
Inmate Newspaper Ad #5 & #6	
TRAP Orientation	
Institutional Orientation	
TRAP Staff Contacts	
Institutional Staff Referrals	
Classification Committee Referrals	
Program Resident Referrals	
Word of Mouth - Inmate Grapevine	
Parole Board Referrals	

12. Total number of clients enrolled in TRAP on the first day of this month?

<u>Somers</u>	<u>Enfield</u>	<u>Total</u>
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<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
------------	------------	------------

13. Total number of clients enrolled in TRAP on the last day of grant period?

<u>48</u>	<u>20</u>	<u>68</u>
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14. Total number of TRAP clients since inception who:

14a. Were discharged for TRAP Program rule infractions

<u>14</u>	<u>7</u>	<u>21</u>
-----------	----------	-----------

14b. Were discharged for Institutional rule infractions

<u>6</u>	<u>4</u>	<u>10</u>
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14c. Escaped from the correctional institution

<u>0</u>	<u>0</u>	<u>0</u>
----------	----------	----------

14d. Were "graduated" to another program phase

<u>27</u>	<u>39</u>	<u>66</u>
-----------	-----------	-----------

14e. Left TRAP for some other reason (SPECIFY)

Administrative Transfer

<u>3</u>	<u>0</u>	<u>3</u>
----------	----------	----------

Withdrew Voluntarily

<u>21</u>	<u>6</u>	<u>27</u>
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15. Total number of TRAP treatment slots unoccupied on the last day of this month?

ADDITIONAL COMMENTS:

PREPARED BY _____

OFFICE PHONE _____

DATED _____

PLEASE REMEMBER TO ATTACH COPIES OF TRAP PUBLICITY NOTICES THAT WERE ISSUED DURING THE MONTH.

THANK YOU.

SEND TO: MR. FRANK B. HALL, TRAP PROJECT DIRECTOR
DEPARTMENT OF CORRECTION, ADDICTION SERVICES DIVISION
340 CAPITOL AVENUE
HARTFORD, CONNECTICUT 06106

I. TRAP PROGRAM - COMMUNITY RELEASE PHASE

Totals are Since Inception of TRAP Program to 7/31/81

	<u>Total</u>	<u>Percentage of Total</u>
1. Graduated from Institutional Phase and Transferred to Community Release Status.	64	
2. Active in Community Release Status as of 12/31/80.	9	
3. Discharged from Community Release Status.	55	
a. Successfully completed Community Release Phase and were Paroled.	44	80%
b. Removed from Community Release Phase for cause and returned to a correctional facility.	7	12.7%
c. Escaped from Community Release Phase.	3	5.4%
d. Case relocated to C.C.C. -New Haven.	1	1.8%

II. TRAP PROGRAM - PAROLE/FIRE PHASE

	<u>Total</u>	<u>Percentage of Total</u>
1. Released to Parole Supervision and stipulated to the Project FIRE program.	66	
2. Transferred to out-of-state Parole Supervision.	1	
3. Clients who were never admitted to Project FIRE.	11	16.7%
4. Clients admitted to Project FIRE.	55	83.3%
a. Presently active in Program.	24	43.6%
b. Discharged from Program.	31	56.4%
1. Transferred to another state for parole supervision.	3	9.7%
2. Terminated from program for non-compliance to program rules.	10	32.3%
2a. Parole Absconders.	4	
2b. In parole status.	3	
2c. Incarcerated.	3	
3. Successfully completed Project FIRE.	18	58%
3a. In parole status.	18	

EQUIPMENT INVENTORY

Grantee: Department of Correction
 Grant No.: 80-PG-AX-0034
 Project Title: Connecticut TRAP Project
 Date of Report: 9/28/81

<u>Item Description</u>	<u>Date of Purchase</u>	<u>Condition</u>	<u>Cost</u>
Carrying Case for Calculator	9/80	Good	\$27.50
High Back Executive Chair	10/80	Good	\$101.30
Satellite Portable Typewriter-Elite	1/81	Good	\$344.00
Satellite Portable Typewriter-Elite	1/81	Good	\$344.00
Satellite Portable Typewriter-Elite	1/81	Good	\$344.00
Satellite Portable Typewriter-Elite	1/81	Good	\$344.00
Satellite Portable Typewriter-Elite	1/81	Good	\$344.00
Cole-5 Drawer Letter File w/Lock	7/81	Good	\$206.40
		TOTAL:	\$2,055.20

END