

Implementation Timeline

- ☞ Process has begun, anticipation of long time for change over
- ☞ New contracts will reflect these standards
- ☞ Training needs
- ☞ Standards available for review on vendornet when published
- ☞ QA procedure not developed

Components of Standards

- ☞ Treatment
 - ☞ Assessment
 - ☞ Treatment
 - ☞ Documentation
- ☞ Staffing
 - ☞ Credentialing
 - ☞ Continuing Education
- ☞ Quality Assurance Standards

Assessments

- ☞ Criminogenic Needs Assessment
 - ☞ Utilizing COMPAS software
 - ☞ Antisocial Cognition
 - ☞ Antisocial Companion
 - ☞ Antisocial personality or temperament
 - ☞ Family and/or marital problems
 - ☞ Substance Abuse
 - ☞ Employment
 - ☞ School
 - ☞ Leisure/recreation

Assessment

✎ Instruments to Determine Level of Risk:

- ✎ Stable-2007 (Hanson & Harris, 2000; Hanson, 2007)
- ✎ Acute-2007 (Hanson & Harris, 2000; Hanson, 2007)
- ✎ Static-99R (Harris, Phenix, Hanson, & Thornton, 2003; 2012)
- ✎ SAPROF : Structured Assessment of Protective Factors for violence risk

Assessment- Special Populations

✎ Armidillo-S (Boer et al., 2013): Assessment of Risk and Manageability of Intellectually Disabled Individuals who Offend Sexually

✎ J-SOAP-II (Prentky & Righthand, 2003): Juvenile Sex Offender Assessment Protocol, 2nd edition

✎ Females: No validated tool, incorporate static or dynamic risk factors for general recidivism

Assessment

✎ How assessments were selected

- ✎ Large body of research
- ✎ Utilized by other states
- ✎ Combination of static and dynamic factors in assessing progress

Plan for Utilization



☞ Institution

- ☞ All offenders will be evaluated for appropriateness for treatment

☞ Community

- ☞ Agents will complete Static-99R
- ☞ Referral for further assessment will be based on scores
- ☞ Goal to for independent risk/needs assessment



Treatment



☞ WI-DOC previously used a one size fits all approach to sexual offender treatment:

- ☞ Institution (SO-2, SO-4)
- ☞ Community (SO-2)

☞ New SOT standards outline additional groups for low risk offenders, special populations, and offenders who have previously completed SOT.

☞ Length of treatment is now defined for Low, Moderate, and High Risk offenders.



Treatment



☞ Different groups are offered to reflect differences in risk/needs/responsivity.

- ☞ Low Risk: SO-1A
- ☞ Moderate Risk: SO-2
- ☞ High Risk: SO-4
- ☞ Aftercare: SO-1B

- ☞ Alternative to Revocation (ATR): SO-2, SO-4
- ☞ Special Needs: Lighthouse (SO-2), GOALS (SO-4)
- ☞ Spanish Speaking: SO-2 and SO-4



Treatment



❧ Sex Offender Education (SO-1A)

- ❧ Provide education related to healthy human sexuality, statutory expectations and cultural norms.
- ❧ Designed for low risk/low need offenders.
- ❧ Primarily offered in the community, but groups can also be set-up in the institution.
- ❧ Weekly 90 minute sessions; 18 hours.



Treatment



❧ Community-based or short-term institutional (SO-2)

- ❧ Develop knowledge and skills needed to reduce individual risk factors identified through assessment.
- ❧ Moderate or greater risk with moderate or greater treatment needs.
- ❧ Offered in the community and medium security institutions.
- ❧ Minimum of 100 hours of treatment over a minimum of 6 months.



Treatment



❧ Intensive Residential (SO-4)

- ❧ OSCI (SOTP) and RCI (Beacon).
- ❧ Not offered in the community.
- ❧ Develop knowledge and skills needed to reduce individual risk factors identified through assessment.
- ❧ Offenders with moderate-high or high risk with moderate-high or high treatment needs.
- ❧ Minimum of 400 hours of treatment over 2 years.



Treatment



- ☞ Aftercare/maintenance (SO-1B)
 - ☞ Transfer or maintain skills developed in other sex offender programming.
 - ☞ Appropriate for SO-2 and SO-4 program completers.
 - ☞ Primarily offered in the community, but groups can also be set up in the institution. (At the present time offenders who complete SOT are near the end of their prison sentence.)
 - ☞ Weekly 90 minute sessions; 18 hours.



Treatment



- ☞ Alternative to Revocation (ATR)
 - ☞ Develop knowledge and skills needed to reduce behaviors that interfere with community supervision and reinforce application of skills learned in prior treatment.
 - ☞ SO-2 ATR is currently offered at RCI.
- ☞ SO-2 = 80 hours/2 months
- ☞ SO-4 = 150 hours/3 months



Treatment – Special Populations



- ☞ Special needs short-term: Lighthouse (SO-2, RCI)
- ☞ Special needs intensive: GOALS (SO-4, OSCI)
- ☞ Designed for adult males who have cognitive deficits or who have been identified with a severe mental illness that would make it difficult to complete a standard SO-2 or SO-4 group.



Treatment – Special Populations

- ☞ Spanish speaking short-term SO-2
- ☞ Spanish speaking intensive SO-4
- ☞ Designed for adult males whose primary language is Spanish and who have been identified through assessment as appropriate for SO-2 or SO-4.
- ☞ Spanish speaking SO-2 has been offered in the past at RCI.



Treatment Progress

- ☞ Treatment outcome criteria:
- ☞ ...completion of re-offense prevention plan;
- ☞ ...completion of all required tasks identified in approved curriculum.



Treatment Progress


- ☞ Treatment outcome criteria:
- ☞ ...reduction of risk-factors identified via the Stable/ Acute-2007 treatment progress evaluation.
- ☞ identifies long-term vulnerability and service needs with adult male sexual offenders.



Treatment Progress

☞ Treatment outcome criteria:

- ☞ Stable-2007 treatment needs:
 - ☞ Significant Social Influences
- ☞ criminal associates vs.
- ☞ pro-social influences



Treatment Progress

☞ Treatment outcome criteria:


- ☞ Stable-2007 treatment needs:
 - ☞ INTIMACY DEFICITS
 - ☞ Capacity for Relationship Stability
 - ☞ Emotional Identification with Children
 - ☞ Hostility Toward Women
 - ☞ General Social Rejection/Loneliness



Treatment Progress

☞ Treatment outcome criteria:

- ☞ Stable-2007 treatment needs:
 - ☞ GENERAL SELF-REGULATION
 - ☞ Impulsive Acts
 - ☞ Poor Cognitive Problem Solving
 - ☞ Negative Emotionality/Hostility




Treatment Progress

☞ Treatment outcome criteria:

☞ Stable-2007 treatment needs:

☞ SEXUAL SELF-REGULATION

- ☞ Sexual Preoccupation/“High Sex Drive”
- ☞ Use of Sexual Activity for Coping
- ☞ Deviant Sexual Interests




Treatment Progress

☞ Treatment outcome criteria:

☞ Stable-2007 treatment needs:

☞ Cooperation with Supervision

- ☞ disengagement, manipulation, no-show, vs.
- ☞ works with, follows through, participates




Treatment Progress

☞ Treatment outcome criteria:

☞ Acute-2007 short-term treatment needs:

- ☞ Victim Access
- ☞ Hostility
- ☞ Sexual Preoccupations
- ☞ Rejection of Supervision



Treatment Progress

☞ Treatment outcome criteria:

- ☞ Acute-2007 short-term treatment needs:
 - ☞ Emotional Collapse
 - ☞ Collapse of Social Supports
 - ☞ Substance Abuse

Staff Standards

☞ Service providers...

- ☞ will have adequate staff to deliver the treatment program.
- ☞ will ensure that staff participates in appropriate ongoing training and education.

Staff Standards

☞ Primary Facilitator

- ☞ shall have sufficient:
 - ☞ education,
 - ☞ supervision, and
 - ☞ experience.
- ☞ will not practice outside the scope of his or her competence.

Staff Standards

Primary Facilitator

- ...will hold a Wisconsin License in mental health related field
- ...qualifications meet or exceed ATSA and Wisconsin licensure standards for a:
 - Licensed Psychologist, or
 - Licensed Clinical Social Worker, or
 - Licensed Professional Counselor, or
 - Licensed Marriage and Family Therapist.

Staff Standards

Primary Facilitator

- ...will be skilled in interpretation and scoring of the Stable 2007

Staff Standards


The Clinical Supervisor

- shall meet the qualifications of a Primary Facilitator, *plus*:
 - ...be trained in clinical supervision,
 - ...be competent to practice independently in the areas they supervise.
 - ...hold responsibility for the delivery of services in their organization,

Staff Standards

Co-Facilitator shall have


- ...a minimum of a high school diploma *plus*
- ...appropriate skills,
- ...appropriate training, and
- ...appropriate experience



Staff Standards

Co-Facilitator shall have


- ...experience working with a correctional clientele,
- ...specific formal training
 - ...confidentiality,
 - ...ethics as apply to working with a forensic population,
 - ...group processes,
 - ...motivational interviewing,
 - ...cultural diversity.



Staff Standards

Co-Facilitator shall have,

- ...during the first year of experience, formal training on the following topics:
 - ...human sexual development;
 - ...cognitive behavioral therapy;
 - ...risk, need, responsivity principles;
 - ...other training applicable to the specific population.



Staff Standards

Sex offender treatment evaluators

...shall meet all educational and training qualifications specified by the instrument's authors.




Staff Standards

Continuing Education & Consultation

...18 hours of continuing education training in the field of sex offender treatment and assessment every biennium.


...providers shall to supplement their experience through consultation with other professionals with relevant expertise.



Measures of Sexual Interest

May be used to further the goals of assessment and treatment

- Abel Assessment of Sexual Interest-3
- Penile Plethysmograph



Quality Assurance Standards



- ☞...maintain a program/curriculum manual
- ☞...updated once every two years, or
- ☞...whenever the standards are amended or revised.



Quality Assurance Standards



- ☞Program supervisors
- ☞...shall document and ensure that staff meet and maintain educational and consultation requirements.
- ☞...shall regularly observe and document the quality of service delivery
- ☞...shall regularly review documentation for quality and timeliness.



Quality Assurance Standards



- ☞Participant satisfaction surveys shall be gathered periodically throughout treatment and used to inform program delivery practices.
- ☞Pre- and post-testing shall be conducted to measure knowledge acquisition, behavioral and attitudinal changes.



Quality Assurance Standards



- ☞ Results of QA efforts shall be maintained and made available to DOC upon request.
- ☞ The formal sex offender service standards shall be reviewed by the appropriate oversight body at a minimum of every 5 years.



Service Needs



- ☞ **Community Corrections: 2016**
 - ☞ 2,755 sex offenders receiving services in the community through contracted providers
 - ☞ 7871 under supervision
 - ☞ Average length of time on supervision 3.02 ($SD = 3.54$)



Service Needs



- ☞ **Adult Institutions:**
 - ☞ 3748 inmates on the waiting list
 - ☞ 214 have < 6 months of time left
 - ☞ 39 have their MR to be determined
 - ☞ 46 have life without Parole
 - ☞ 56 have life sentences with a possibility of parole
 - ☞ 114 have MR dates >50 years from now (after 2066)
 - ☞ 1188 have MR dates >10 years from now (but less than 50 years)
 - ☞ 1417 inmates with >3 year and < 10 years
 - ☞ 778 inmates likely to be offered treatment in the next 3 years (21%).



Community Providers How To Access Contracts in DOC



- ☞ Go to Vendor Net:
<http://vendornet.state.wi.us/vendornet/default.asp>
- ☞ Register an account
- ☞ NGIP codes fall under Human Services
- ☞ Print page and mail it in
- ☞ Scan and email to:
DOAVendornetHelpDesk@wisconsin.gov



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