# The Practical Application of Incentives and Sanctions Part 1 - Staffing

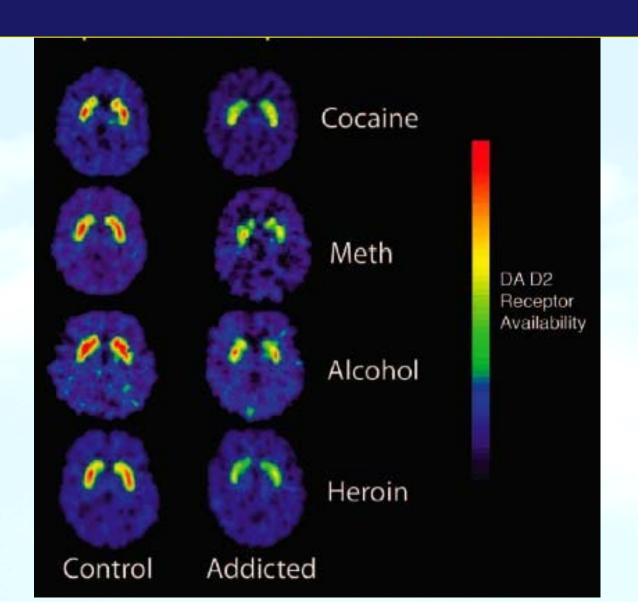


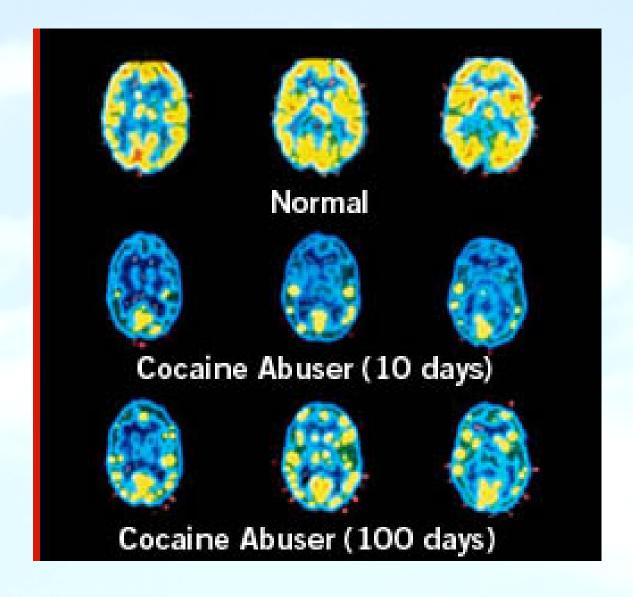




Helen Harberts, J.D Shannon Carey, Ph.D.

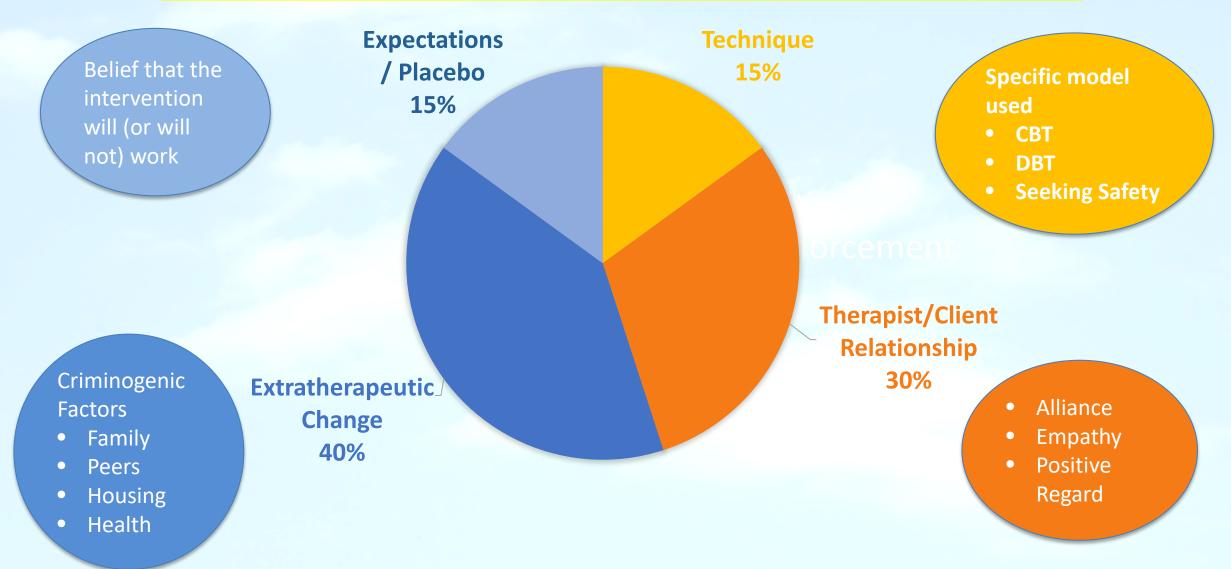
### First: Remember what we're dealing with





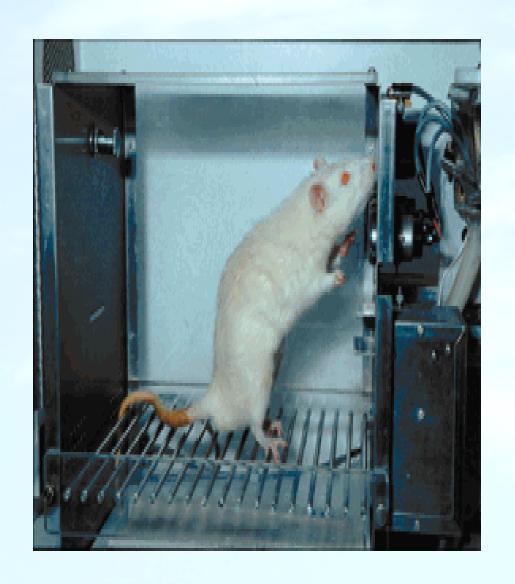
The enemy (addiction) is a difficult opponent. Brains take time to heal. Change is hard.

### What leads to behavior change?



Lambert and Barley 2001; Soto 2011

### 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**

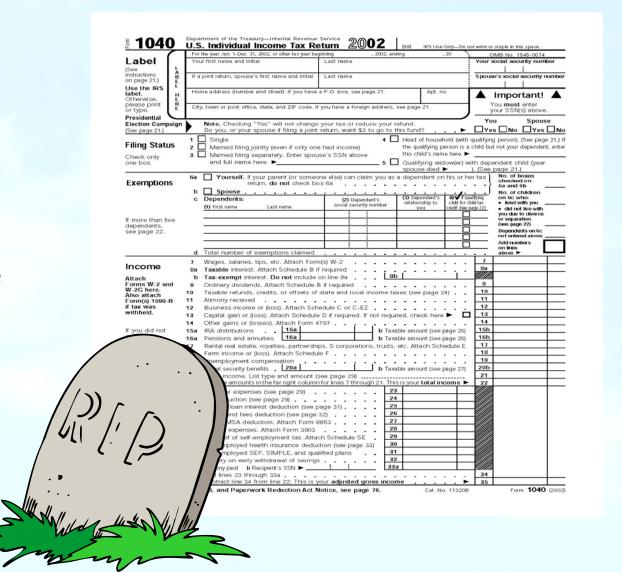
(Behavior and <u>Immediate</u> Consequence)

#### Reliable detection

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

Speeding ex.

**Supervision** 



### 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 # 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 <u>distal</u>
   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

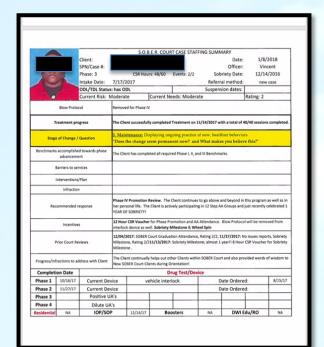


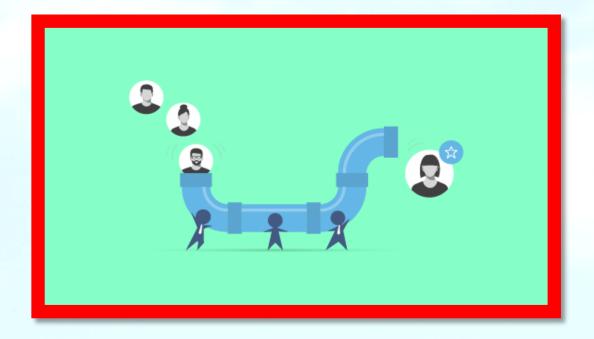
- Abstain from use
- Accept disease
- Work recovery

Video: Greenlick on honesty

### WHAT THE TEAM BRINGS

## **Changing Behavior Requires Information**





-	1			SORERCO	URT CASE STAFF	ING SUMMARY	
		Client: SPN/Case #: Phase: 1		CSR Hours: 20/60	17 Events: 0/2	Date: Officer: Sobriety Date:	Vincent 5/15/2017
	THE REAL PROPERTY.	Intake Date:	11/2/201		_	Referral method:	new case
		ODL/TDL Statu Current Risk: 1			Nandy Madage	Suspension dates:	Patient 2
Blow Protocol			5-8am, 11-1pm, 3-5pm, 7-8pm, & 10-12am				
Treatment progress			The Client has successfully completed 18/47 Treatment Sessions. Ms. Millis continues to willingly participate and demonstrate pro-social thinking by the feedback given to Counselor and other groupmates.				
Stage of Change / Question			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				
	larriers to ser	vices	1				
Interventions/Plan Infraction						a violation and has been a	
Recommended response			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: Helpding 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				
Completi	on Date				Drug Test/Devi	ce	
Phase 1	12/18/17	Current De	vice	at home device		Date Ordered: 11/10/	
Phase 2		Current Device				Date Ordered:	
Phase 3		Positive UA's					
		Dilute U	A's				
Phase 4							

## 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 <u>outside</u> 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 <u>expand</u> them. The disciplines collaborate on a single mission to create a more effective and efficient system.

But you <u>never</u> 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?

- 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 <u>must not</u> tell the judge and team.
- Rob expects termination and doesn't really want to fight it.



### 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 <u>everything</u>; 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?

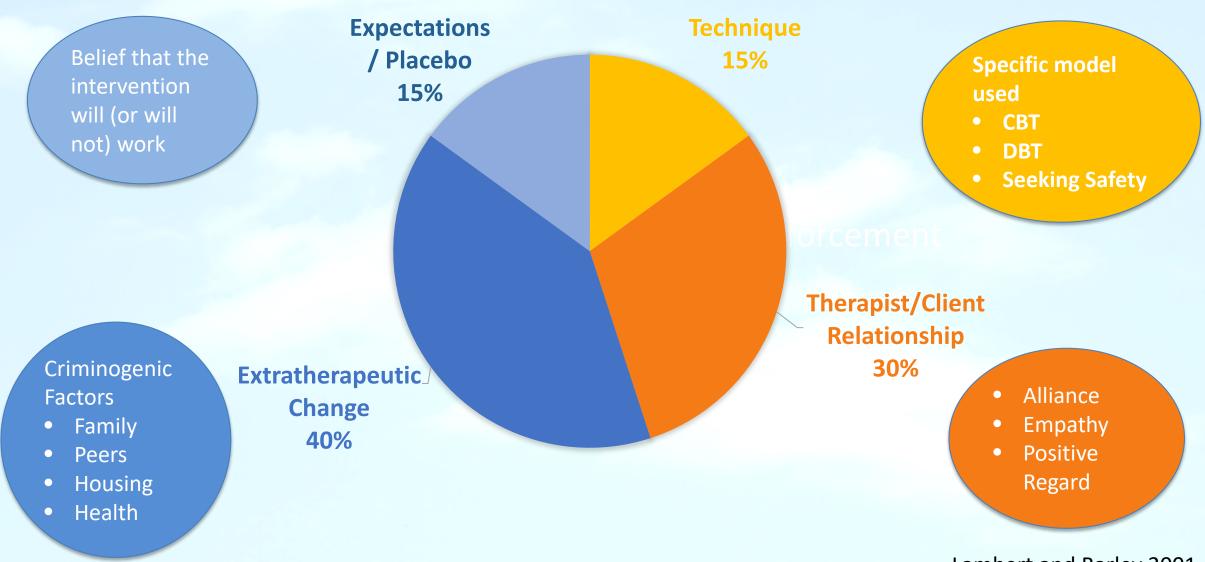
TREATMENT / SUPERVISION CHANGES?



New Video: NZ staffing

New Video: NZ court

### What leads to behavior change?



Lambert and Barley 2001

### 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

## Clients have a variety of Criminogenic needs:

- Subset of risk factors
- Dynamic, live and changeable

#### **DYNAMIC**

Criminogenic Needs

### 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						
Client:	nt: Doe, Jane DOB: 08/31/1982 Date:		4/1/2019				
Phase: 2		CSR Hou	irs: 60/60		Sobriety Date:		9/15/2018 (last pos)
Intake Date	take Date 8/17/2018 Class A/B Misd. Referral method:		method:	ACOCS- violations			
ODL/TDL Status: TDL eligible			Suspension dates:		ion dates:	N/A	
Current Risk: Moderate Cu			Current Ne	eds: Modera	ate		

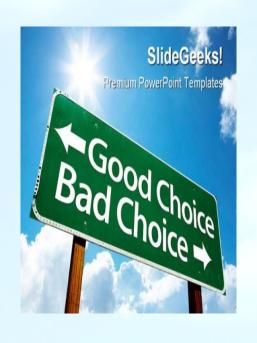
Current Kis	N. Moderate Current Needs. Moderate					
Risk/Criminogenic Need	Status/Progress/Plan					
The state of the s	*Focus on Goals for Top 3					
1. History of antisocial behavior	Dresenting charge, Forgery, possession, perceptornalia					
(Criminal History)	Presenting charge: Forgery, possession,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

Benchmarks accomplished towards phase	The Client has completed all required Phase 2 Benchmarks and is filling out application for Phase 3				
Barriers to services and intervention/plan	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.				
Summary of Successes	lane moved away from unhealthy relationship with boyfriend and moved in with supportive mother. Accomplished sober housing goal! Completed all requirements since last court session.				
Summary of Infractions	Client is doing very well. No issues with non-adherence.				
Recommended Court	Incentive: 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.				
Responses	Other responses: 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).				

Completi	on Date	•	Drug Test/Device						
Phase 1	10/15/18	Current Device	drug patch		D	Date Ordered:		10/15/18	
Phase 2	1/15/19	Current Device			D	Date Ordered:			
Phase 3		Positive UA's							
Phase 4		Dilute UA's							
Residential	NA	IOP/SOP	11/14/17	Воо	sters	NA	DWI Edu/R	RO	NA
Prior Court R	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)
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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)\_\_\_\_\_

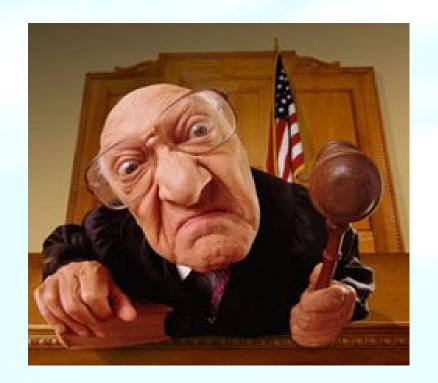
14. What are some fun things you do that help you stay

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 v

Hang out with the wrong people

Should be reserved for serious infractions

- Public Safety
- -Illegal activity

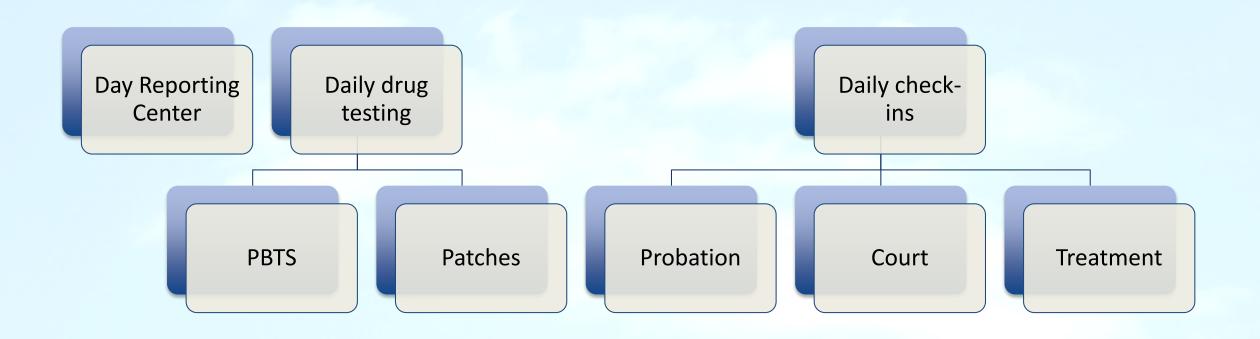
## Courts that typically impose jail longer than 6 days have <u>higher</u> recidivism



## 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

## Other options (Focus on Learning)

- Community service
- Attend/watch court
- Thought papers

- Homework/Practice
- Volunteering

May need to develop new resources for some alternatives

- 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

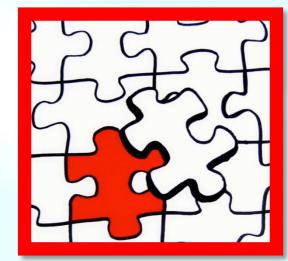
## Staffing: Crafting Responses

Understand: this is about them, not you.

Responses are in the eyes of the behaver, 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> <li>Late for Scheduled</li> </ul>	<ul> <li>Missed UA</li> </ul>	<ul> <li>Unexcused Absence tx</li> </ul>	<ul> <li>Criminal behavior (new</li> </ul>
Event	<ul> <li>Failure to Complete</li> </ul>	<ul> <li>Alcohol Use</li> </ul>	crimes, drinking and
<ul> <li>Missed payment</li> </ul>	Assignments	Drug Use	driving)
		<ul> <li>Tamper w/ UA or device</li> </ul>	<ul><li>Arrest</li></ul>
		<ul> <li>Dishonesty</li> </ul>	

Step 2. Determine the Response Level

		Low	Moderate	High	Very High
Distal	Phase 1	Level 1	Level 2	Level 2	Level 4
	Phase 2	Level 1	Love! >	Level 3	Level 4
	Phase 3	Level 2	Level 3	Level 4	Level 5
	Phase 4	Level 3	Level 4	Level 5	Level 5
Prox	Phase 5	Level 3	Level 4	Level 5	Level 5

Step 3. Choose the Responses (\* in the will Judicial Verbar Emproval and Explanation)

3a. Therapeutic Responses

	Level 1	Level 2	Level 3		vel 4	Level 5
d	Behavior Chain	Level 1 plus:	Level 1, 2, plus:		vel 1, 2	2, 3, plus:
4	Cost/Benefit Analysis	<ul> <li>LOC Review</li> </ul>	<ul> <li>Referral Medication</li> </ul>	- 7	Re-As	sessment
	Skill Development		Eval	<b>.</b>	<i>,</i>	
	Thought Restructuring		<ul> <li>Treatment Team</li> </ul>			
٦,	<ul><li>Homework/Practice</li></ul>		Review/Round Table			
٦	inking Report					

#### nonses

Lev	Level 2	Lever	Level 4	Level 5
• ≦ 1ional report ∫s/week Official Letter in File	<ul> <li>≤ 2 additional report days/week</li> <li>Home Visit</li> <li>Curfew</li> </ul>	<ul> <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 C         act</li> <li>Additional Report</li> </ul>	<ul> <li>≤ 4 addition days/week</li> <li>Contingency</li> <li>Electronic Note</li> <li>Device</li> <li>Case Confe</li> <li>Curfew</li> </ul>	y Contract Monitor

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."

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 anction/Punishment Responses (Judicial Disapproval)

	Level 1	Level 2	Level 3		Level 4	Level 5
ervice	¹≤ 4 hrs	≤ 8 hrs	≤ 16 hrs	<b>Y</b>	hrs	≤ 32 hrs
Curfew	≤ 3 days	≤ 5 days	≤ 7 days	<b>≤</b>	days	≤ 15 days
<b>House Arrest</b>	≤ 24 hrs	≤ 72 hrs	≤ 5 days	ν,	days	≤ 15 days
Jail			≤ 24 hours	≤ (	3 days	≤ 7 days
er.	•				eview acement	Termination

#### **Positive Behavior**

Incentive Manix: "what do we want the participant to learn from this?"

Step 1 Lentify the Behavio.

roximal (Expect Sooner)	Moderate	Distal (Expect Later)
Attendance at treatment	• lonesty	Complete Tx LOC
Attendance at other appointments	esting Negative	<ul> <li>Extended Abstinence/Neg. Tests</li> </ul>
<ul> <li>Home for home visits</li> </ul>	• articipating in Prosocial Activities	<ul> <li>Treatment Goals Completed</li> </ul>
Report to UA	Employment	<ul> <li>Phase Goals Completed</li> </ul>
Timeliness	Progress toward Tx Goals	<ul> <li>Program Goals Completed</li> </ul>
Payment	Progress in Tx	

Step 2. Determine the Response Level

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

#### Step 3. Choose the Responses (Paired with <u>Judicial Approval/Verbal Praise</u>)

20 Inerapeutic Response

	Pluse 1	Phase 2	Phase 3	Phase 4
Single Event	<ul><li>Behavior Chain Cost/Benefit Analysis</li></ul>	<ul><li>Behavior Chain</li><li>Cost/Benefit</li><li>Analysis</li></ul>	Behavior Chain	Behavior Chain
Continued Progress		• Change in LOC •	Aftercare Fqcy Re-evaluate Pharmacological Interventions	<ul><li>Aftercare Fqcy</li><li>Re-evaluate</li><li>Pharmacological</li><li>Interventions</li></ul>

## Supervision Responses

nase 1	Phase 2	Phase 3	Phase 4
• Change in Curfew Status	Reduced Contacts Reduction in Home Visits	<ul> <li>Reduced Contacts</li> <li>Reduce Home Visits</li> <li>Reduce in External Monitoring Devices</li> </ul>	<ul><li>Reduced Contacts</li><li>Decreased Drug Testing</li></ul>

3c. Incentive Response

Small	Medium	Large
udicial approval (always)	Any small and/or:	Any small, medium or:
• Fish Bowl	≤ 3 day reduction of curfew	Framed Certificate
Decision Dollars	Choice of Gift Certificate	Travel Pass
Example for other participants in	Supervisor Praise	<ul> <li>Larger Gift Certificate</li> </ul>
court	Written Praise	<ul> <li>Position as Mentor to New</li> </ul>
<ul> <li>Handshake</li> </ul>	Positive Peer Board	Participants
<ul> <li>Candy</li> </ul>	Certificate	Reduction of Curfew
≤ 1 day reduction of curfew	<ul> <li>Reduction in CS hours</li> </ul>	
	<ul> <li>Reduction in program fees</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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#### **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)
Attendance at treatment	Honesty	Complete Tx LOC
Attendance at other appointments	Testing Negative	Extended Abstinence/Neg. Tests
Home for home visits	Participating in Prosocial Activities	Treatment Goals Completed
Report to UA	Employment	Phase Goals Completed
• Timeliness	Progress toward Tx Goals	Program Goals Completed
• Payment	Progress in Tx	

#### Step 2. Determine the Response Level

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

### Step 3. Choose the Responses (Paired with <u>Judicial Approval/Verbal Praise</u>) 3a. Therapeutic Response

	Phase 1	Phase 2	Phase 3	Phases 4 and 5
Single Event	<ul><li>Behavior Chain</li><li>Cost/Benefit Analysis</li></ul>	<ul><li>Behavior Chain</li><li>Cost/Benefit Analysis</li></ul>	Behavior Chain	Behavior Chain
Continued Progress		Change in LOC	<ul><li>Aftercare Fqcy</li><li>Re-evaluate Pharmacological Interventions</li></ul>	<ul><li>Aftercare Fqcy</li><li>Re-evaluate Pharmacological Interventions</li></ul>

#### 3b. Supervision Responses

Phase 1	Phase 2	Phase 3	Phases 4 and 5
Change in Curfew	<ul><li>Reduced Contacts</li><li>Reduction in Home</li></ul>	<ul><li>Reduced Contacts</li><li>Reduce Home Visits</li><li>Reduce in External</li></ul>	<ul><li>Reduced Contacts</li><li>Decreased Drug</li></ul>
Status	Visits	Monitoring Devices	Testing

#### 3c. Incentive Response

	oo. meentive Response					
	Small	Medium	Large			
	Judicial approval (always)	Any small and/or:	Any small, medium or:			
	Fish Bowl	• ≤ 3 day reduction of curfew	Framed Certificate			
	Decision Dollars	Choice of Gift Certificate	Travel Pass			
	<ul> <li>Example for other participants in</li> </ul>	Supervisor Praise	Larger Gift Certificate			
	court	Written Praise	<ul> <li>Position as Mentor to New</li> </ul>			
	<ul> <li>Handshake</li> </ul>	Positive Peer Board	Participants			
	• Candy	Certificate				
	<ul><li>≤ 1 day reduction of curfew</li></ul>	Reduction in CS hours				
١	On the A Team	Reduction in program fees				

#### **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> <li>Late for Scheduled Event</li> </ul>	<ul><li>Missed UA</li><li>Failure to Complete</li></ul>	<ul><li>Unexcused Absence tx</li><li>Alcohol Use</li></ul>	<ul> <li>Criminal behavior (new crimes, drinking and</li> </ul>
<ul> <li>Missed payment</li> </ul>	Assignments	<ul><li>Drug Use</li><li>Tamper with UA or device/dilute</li><li>Dishonesty</li></ul>	driving)  • Arrest

Step 2. Determine the Response Level

		Low	Moderate	High	Very High
Distal	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
Prox	Phase 5	Level 3	Level 4	Level 5	Level 5

Step 3. Choose the Responses (paired with Judicial Verbal Disapproval and Explanation)

#### 3a. Therapeutic Responses

Level 1	Level 2	Level 3	Level 4	Level 5
Behavior Chain	Level 1 plus:	Level 1, 2, plus:		2, 3, plus:
<ul> <li>Cost/Benefit Analysis</li> </ul>	<ul> <li>LOC Review</li> </ul>	<ul> <li>Referral Medication</li> </ul>	<ul><li>Re-Ass</li></ul>	sessment
Skill Development		Eval		
Thought Restructuring		<ul> <li>Treatment Team</li> </ul>		
Homework/Practice		Review/Round Table		
Thinking Report				

#### 3b. Supervision Responses

Level 1	Level 2	Level 3	Level 4	Level 5
<ul> <li>≤ 1 additional report days/week</li> </ul>	<ul> <li>≤ 2 additional report days/week</li> <li>Home Visit</li> <li>Curfew</li> </ul>	<ul> <li>≤ 3 additional report days/week</li> <li>Continuous Testing</li> <li>GPS/Electronic Monitoring</li> <li>Home Visit</li> <li>Increase frequency UA Test</li> <li>Additional Court Report</li> <li>Case Conference</li> </ul>	<ul> <li>≤ 4 addition days/week</li> <li>Electronic Notes</li> <li>Device</li> <li>Case Conference</li> <li>Curfew</li> </ul>	/lonitor

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

	Level 1	Level 2	Level 3	Level 4	Level 5
Community Service	≤ 4 hrs	≤ 8 hrs	≤ 16 hrs	≤ 24 hrs	≤ 32 hrs
Curfew	≤ 3 days	≤ 5 days	≤ 7 days	≤ 10 days	≤ 15 days
<b>House Arrest</b>	≤ 24 hrs	≤ 72 hrs	≤ 5 days	≤ 7 days	≤ 15 days
Jail		≤ 3 days	≤ 7 days		
Other		Review Placement	Termination		