The Rehabilitation Programs Division is the treatment coordinating entity for the four (4) operational divisions of the Texas Department of Criminal Justice (TDCJ). Additionally, the Rehabilitation Programs Division has managing authority for the Correctional Institutions Division Substance Abuse Treatment Programs. In its function of facilitating effective treatment delivery interdivisionally, the Rehabilitation Programs Division coordinates with the Parole Division, the Community Justice Assistance Division (CJAD), and the Correctional Institutions Division to provide substance abuse treatment services for individual offenders throughout the entire incarceration and supervision period. The Substance Abuse Treatment Program is multi-divisional and focuses on a continuum of treatment as offenders move between operational divisions.

The intensive treatment programs managed by the Substance Abuse Treatment Program (SATP) Administration under the authority of the Rehabilitation Programs Division include: the Substance Abuse Felony Punishment Facility (SAFPF), the In-Prison Therapeutic Community (IPTC), the Pre-Release Substance Abuse Program (PRSAP), and the Pre-Release Therapeutic Community (PRTC).

The SAFPF is an intensive, six-month Therapeutic Community (T.C.) program (nine-month for offenders with special needs) sentenced by a judge as a condition of community supervision or as a modification of parole / community supervision. All offenders must be chemically dependent as shown by an accepted substance abuse screening instrument. Offenders charged with or convicted of a felony or criminal attempt of a felony under Section 21.11 (Indecency with a Child), 22.011 (Sexual Assault), or 22.021 (Aggravated Sexual Assault) of the Penal Code are not eligible. The program consists of Phase I (Orientation), learning basic language and rules of the T.C.; Phase II (Main Treatment), exposing addiction and offender thinking errors and drug seeking behaviors to intense confrontation while respect for the individual is maintained; and Phase III (Re-Entry), practicing relapse prevention and pro-social problem solving techniques. A Special Needs Program provides educational components that address Axis I mental disorders as well as personality disorders, medication regimentation, and the interaction of disorders with substances of abuse.

The IPTC is an intensive, six-month treatment program for incarcerated offenders who are within six months of parole release who are identified as needing substance abuse treatment. Offenders must be chemically dependent as shown by an accepted substance abuse screening instrument. Offenders charged with or convicted of a felony or criminal attempt of a felony under Section 21.11 (Indecency with a Child), 22.011 (Sexual Assault), or 22.021 (Aggravated Sexual Assault) of the Penal Code are not eligible. The Board of Pardons and Paroles must vote to place qualified offenders in the therapeutic community program and successful graduates are then released on parole. The program consists of Phase I (Orientation), learning basic language and rules of the T.C.; Phase II (Main Treatment), exposing addiction and offender thinking errors and drug seeking behaviors to intense confrontation while respect for the individual is maintained; and Phase III (Re-Entry), practicing relapse prevention and pro-social problem solving techniques.

The PRSAP is an intensive, six-month treatment program for offenders with serious substance abuse/dependency and antisocial characteristics from Correctional Institutions Division (CID) Units. Offenders must have a minimum release date of at least seven (7) months prior to being released on parole (voted action), mandatory supervision, or discharged. Offenders must be chemically dependent as shown by an accepted substance abuse screening instrument. Treatment modality is similar to the SAFPF facilities, but much more condensed.
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The PRTC is an intensive, six-month treatment program for offenders in a therapeutic community setting which provides pre-release services to offenders within seven (7) months of release through the coordination with treatment departments. Offenders must have a minimum release date of at least seven (7) months prior to being released on parole (voted action), mandatory supervision, or discharged. Offenders must be chemically dependent as shown by an accepted substance abuse screening instrument. Individual treatment plans are monitored to ensure appropriate programming and support services provisions, and a continuum of care plan for release is developed through coordination with the Parole Division. Again, treatment modality (programming consists of three phases – see above) is similar to that of the SAFPF/IPTC/PRSAP programs.

Offenders participating in the SAFPF and IPTC are required to complete an aftercare component (continuum of care) consisting of three (3) months of residential aftercare in a Transitional Treatment Center (TTC), six (6) to nine (9) months of outpatient aftercare, and up to 12 months of support groups and follow-up upon release from the in-prison phase. The aftercare phase administers a diverse range of therapeutic, residential, outpatient, and resource programs.

In addition to these intensive treatment programs, chemical dependency screening is provided to all Correctional Institutions Division offenders as soon as possible after incarceration. Twelve-step groups such as AA/NA/CA and approved alternative secular groups are available for all offenders. Volunteers are recruited and utilized to enhance the twelve-step and secular recovery group meetings.

In the pages that follow, this manual will describe the kinds of offenders who are appropriate for the substance abuse treatment programs offered by the TDCJ and managed by the SATP Administration, how to enroll an offender into a specific program, management of offenders while in the program, and the continuum of care for appropriate offenders. The intent, therefore, is to assist those in the criminal justice system to understand all of the programs and to determine how each may apply to the needs of offenders in local jurisdictions.
To develop and provide evidence-based rehabilitation programs that facilitate positive change in the lives of offenders by a dedicated team of skilled professionals.

The goals of the Substance Abuse Treatment Program are to:

- Use treatment and accountability programs to reduce recidivism.
- Make security a partner in substance abuse treatment, recognizing that treatment is more effective when security is an integral part of treatment.
- Use substance abuse treatment programming to improve the work environment of correctional officers.
- Strongly support Alcoholics Anonymous (AA), Narcotics Anonymous (NA), and other self-help groups.
- Develop a range of substance abuse treatment and accountability programming so that the TDCJ can cost-effectively address different levels of chemical dependency and criminality.
- Develop a uniform screening and assessment process throughout the TDCJ and place substance abusing offenders in programming that provides the appropriate level of treatment and accountability.
- Use management practices and management information systems that track individual substance abusing offenders through every stage of involvement with the TDCJ.
- Require close coordination between TDCJ divisions to ensure substance abusing offenders do not fall “between the cracks” of treatment and accountability programming.
- Use outcome evaluation and process evaluation to analyze programming and improve programming based upon evaluation results.
Management Objectives

The Rehabilitation Programs Division Management Objectives for the Substance Abuse Treatment Program are to ensure that the delivery of quality substance abuse treatment services for offenders in all TDCJ divisions throughout the level of services are provided in a manner that aligns with the Agency’s mission and goals. These objectives are accomplished by:

- Ensuring staff utilize policies and procedures to improve intake, program enrollment, and transition of offenders, successful and unsuccessful participation.
- Managing potential treatment backlogs by effectively monitoring program activities.
- Adopting and implementing best practices to provide individualized treatment services that are conducive to offender’s needs, and ensure consistent application of eligibility criteria.