

Alcohol and Other Drugs Criminogenic (AOD-C) Service Delivery Forensic Intervention Services

AOD-C Project Team

June 2023

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Acronyms

AOD: Alcohol and Other Drugs

AOD-C: AOD-Criminogenic

AOD-H: AOD-Health

HSR: Health Services Review

LS/RNR: Level of Service/Risk, Need, Responsivity

ADP: Alcohol or Drug Problem

Forensic Intervention Services

Who are we?

- Forensic Intervention Services provides service users in custody and in the community with offence-specific, evidence-based screening, assessment and intervention services to support their rehabilitation.
- Forensic Intervention Services was established on 1 August 2019, combining the two formerly separate program areas of Offending Behaviour Programs (OBP) and the Specialised Offender Assessment and Treatment Service (SOATS).
- Additionally, in recent years Forensic Intervention Services' **remit has expanded to include Countering Violent Extremism (CVE)** service delivery, **Restorative Justice (RJ)** and **Family Violence Perpetrator Interventions (FVPI)** portfolios.
- Forensic Intervention Services has a multidisciplinary team of allied health clinicians (clinical psychologists, forensic psychologists, psychologists, social workers, occupational therapists, mental health nurses).

What do we do?

- Undertake forensic risk assessments to ascertain the service user's risk of sexual, violence and intimate partner violence.
- Deliver treatment programs to address offence-specific and offence-related criminogenic needs.

Service Charter

Our **Service Charter** puts staff at the heart of serving the community and providing public value through the delivery of services that contribute to community safety

OUR VISION

To become a world leader in forensic intervention services, enabling meaningful behaviour change in offenders and contributing to a justice and community safety system that works together to build a safer, fairer and stronger Victoria.

OUR MISSION

To reduce recidivism by delivering evidence-based offending behaviour programs founded in the risk, need and responsivity principles.

Criminogenic AOD Project

Overview of AOD-C Project

The Health Services Review resulted in a separation of the AOD Health (AOD-H) and AOD Criminogenic (AOD-C) streams, with AOD-H services delivered under a primary health model and AOD-C services to be delivered by Forensic Intervention Services.

Separating service delivery for AOD-H and AOD-C streams allow for **differing yet complementary approaches** to the treatment of AOD use and offending behaviour.

This approach supports a **more holistic and integrated rehabilitation pathway** for service users in prisons. It also supports **stronger alignment of criminogenic risk assessment and interventions**.

AOD-C stream

- Utilises a social learning model, assuming that AOD use is a learned, maladaptive coping behaviour
- Explores **AOD use as it is related to offending behaviour**; that is, the **link** between the use of substances and subsequent offending

AOD-H stream

- Utilises a disease/medical model, assuming that addiction is a chronic, primary illness
- Explores the risks, impacts and influence of AOD use on the individual, their health and their wellbeing, addressing **medical and psychosocial needs**

AOD-Health vs AOD-Criminogenic

AOD-Health



Who is responsible?

Primary Health Providers



Who is it for?

- Remandees and sentenced service users
- Service users with a medical or psychosocial Alcohol and Other Drug (AOD) need.



What services will they deliver?

- AOD-Health Programs (generally up to 25 hours)
- Prison Related Harm Reduction (PRHR)
- Release Related Harm Reduction (RRHR)
- Identified Drug User (IDU) Reviews
- Peer educators.



How will service users be referred?

All service users will be referred via the Program Support Worker/AOD Health Programs team. Self-referrals are accepted, as well as needs identified through other programs, services, staff and other stakeholders.



How soon will services be delivered after a service user is sentenced?

AOD Health services are designed to commence at the point of Reception. The delivery of service timeframes will vary depending upon the service type and identified need for the individual.



AOD-Criminogenic



Who is responsible?

Forensic Intervention Services



Who is it for?

- Sentenced service users who meet the AOD-C eligibility criteria
- Service users must have an identified link between their AOD use and offending.



What services will they deliver?

Assessment and Interventions on the Criminogenic AOD Pathway.



How will service users be referred?

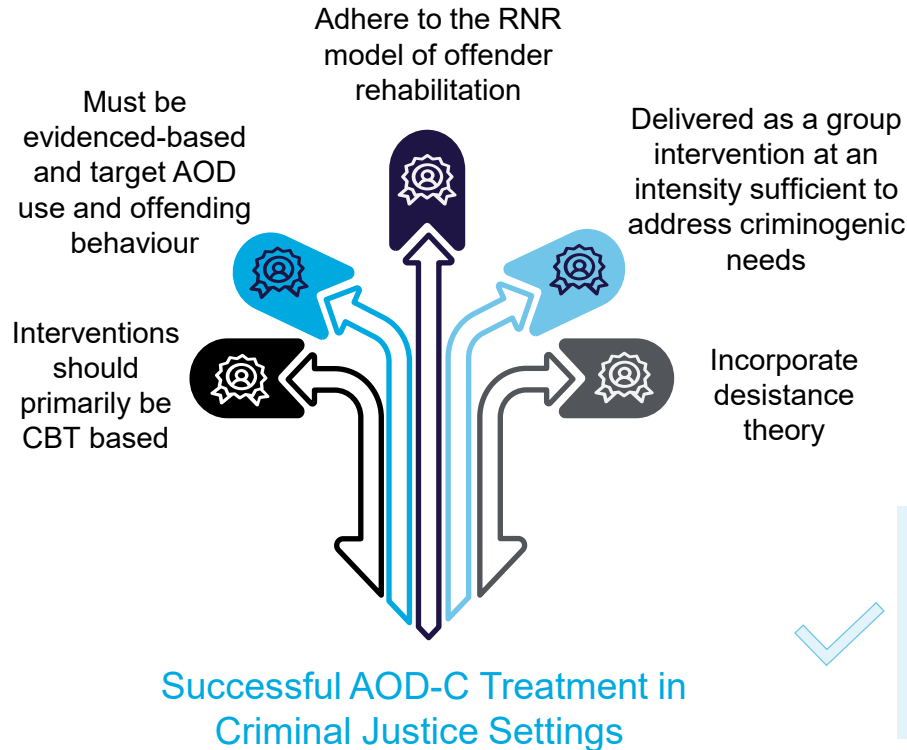
Eligible service users will be referred to an Assessment automatically via the Intake Unit if they meet the AOD-C eligibility criteria.



How soon will services be delivered after a service user is sentenced?

AOD-C services are intended to be delivered at the front end of a service user's sentence. They will be referred for an Assessment as soon as the LS/RNR is received and eligibility can be determined.

Literature Base



Risk Needs Responsivity (RNR) Model (Andrews & Bonta)

- Highest risk service users require most intensive interventions (match level of risk and need to intensity of intervention)
- AOD a Central 8 Risk Factor (factors known to have significant influence on offending behaviour)

Desistance Theory

- Considers motivations, propensity for reoffending and engagement in alternative behaviours as a process for ceasing offending

✓ Offender rehabilitation programs can reduce recidivism by 10-50% if they are CBT based and adhere to best practice principles¹



Poor adherence to best practice principles (e.g., providing interventions for low-risk cohorts, not using CBT methodology, use of unskilled workforce for intensive interventions) has been shown to increase risk of recidivism²

AOD-C Model Eligibility

AOD-C Pathway

- Service users who meet eligibility criteria for AOD-C but do not meet criteria for Forensic Intervention Services (i.e., general offenders, low-risk for sex/violence, etc)



Eligibility for the AOD-C pathway:

- Have a minimum 7 month sentence; **and**
- Have a minimum 3-months remaining of their current sentence in order to participate in an assessment; **and**
- Have an assessed **medium** to **high** risk level for general offending (LS/RNR); **and**
- Have an assessed **medium**, **high** or **very high** AOD concern as per the Alcohol or Drug Problem [ADP] scale on the LS/RNR; **and**
- Have an identified link between their AOD use and offending behaviour;

Integrated Pathway

- Service users are eligible under current Forensic Intervention Services eligibility and likely have other offence-specific needs to target (e.g. sex, violence, family violence)



Eligibility for the integrated pathway:

- Are eligible under Forensic Intervention Services offence-specific criteria;

Service Pathways

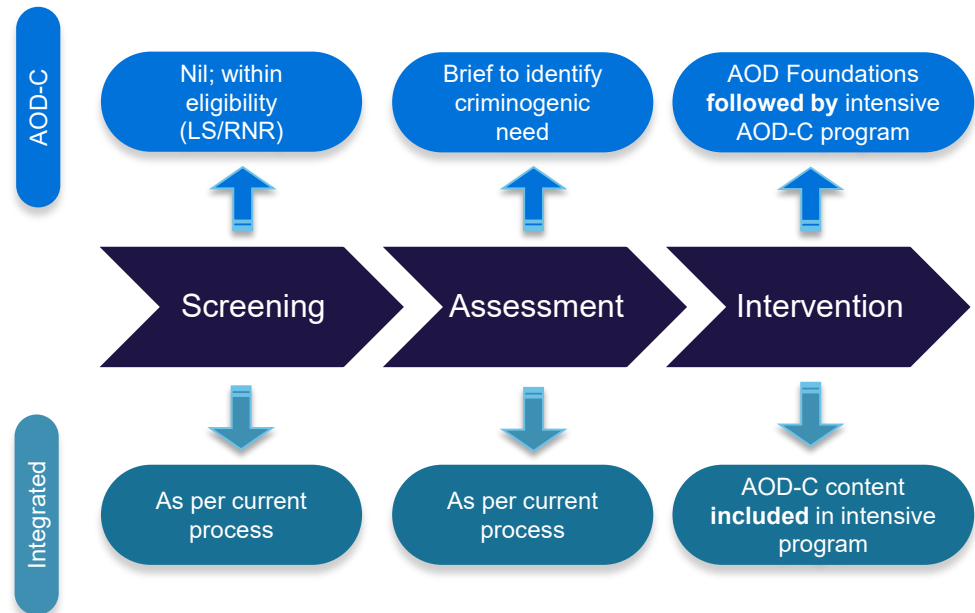
AOD-C Service Pathways

Two pathways:

AOD-C and Integrated

- For the AOD-C pathway, the intention is to conduct a brief assessment only, in order to confirm that there is a link between the AOD use and the offending behaviour (i.e., that the use is criminogenic)
- For the integrated pathway, service users are assessed and provided with appropriate interventions alongside existing FIS processes (e.g., current assessment process will include identification of AOD-C needs; AOD-C content will be added to the existing intensive interventions within FIS – BLP, VIP)

Standard Process for Assessment and Treatment



Interventions and Treatment Hours

AOD-C Program Suite



Interventions and Treatment Hours

AOD-C Specific Programs

Program	AOD Foundations	AOD-C MOD	AOD-C HIGH	TALKING CHANGE
Treatment Hours	25	55	95	12.5

Service User Need	Interventions	Treatment Hours
AOD only (insufficient time)	Talking Change + AOD Foundations	12.5 + 25 = 37.5
AOD-C – Moderate	Talking Change + AOD Foundations+ Wised Up	12.5 + 25 + 55 = 92.5
AOD-C – High	Talking Change + AOD Foundations+ AOD-C High	12.5 + 25 + 95 = 132.5

Note: Treatment hours are indicative as programs are yet to be finalised

AOD Foundations Program

- Designed to be facilitated prior to participation in an intensive AOD-C program (moderate or high intensity)
- Targets topics designed to increase a service user's understanding of:
 - the cycle of addiction,
 - the impact of substance use
 - the likely effects on their mind, body and wellbeing
 - the link with offending behaviour
- Total treatment hours of 25 hours over 10 sessions
- Suitable for service users with insufficient time to participate in a more intensive program



AOD-C Moderate Intensity Program 'Wised Up'

- Total treatment hours of 55 hours over 22 sessions.
- The overarching aim of the program is to reduce recidivism by increasing service user awareness of the relationship between their substance use and offending behaviour.
- Each participant will have the opportunity to examine their offence process in detail, including:
 - the antecedents to both their substance use and offending
 - salient risk factors that maintain their behaviour.
- Program content will increase participants' knowledge of healthy strategies for self-regulation, including challenging thinking, regulating emotion, and coping with physiological cravings.



Offence-Specific Program Updates

Violence Intervention Program

- The Violence Intervention Program (VIP) with integrated AOD content has been prioritised and currently being developed by the Service Development Team.
- On track to be completed January 2024.
- Total treatment hours of the new High VIP is expected to be approximately 235 hours.

Better Lives Program

- The Better Lives Program updates will commence after the VIP Program.
- It is anticipated that the program review will commence in late 2023/early 2024, subject to availability of resources.

Criminogenic-AOD Transition Timeline

February 2023

- Clinical Induction training commences. We will see the onboarding of new AOD Practitioners.



B

May 2023

- CVIMS enhancements (Phase 1) are deployed.
- Forensic Intervention Services commence Assessment delivery.



D

July 2023 onwards

- Caraniche cease delivery within public prisons.
- Forensic Intervention Services take full carriage of Criminogenic AOD service delivery.



E

March 2023

- Caraniche cease delivering AOD-C Assessments.
- Caraniche commence delivery of their final Interventions.
- Caraniche to continue delivering individual counselling.



A

C



June 2023

- Forensic Intervention Services commence Intervention delivery.

Staffing & Recruitment

Forensic Intervention Services Roles

Approximately 40 new roles were created across Forensic Intervention Services to support the transition of AOD services, including the following positions:

**VPS3 – AOD
Practitioner**

AH3 - Clinician

**AH4 – Senior
Clinician**

**VPS6 –
Principal
Clinician**

**AOD-C
Assessments,
Treatment
Readiness & AOD
Foundations
Programs**

**Screening,
assessment and
intervention
delivery for all
pathways**

**AH3 clinician
responsibilities +
leadership
responsibilities
or additional
experience**

**FIS clinical
experts –
combination of
service delivery,
development &
clinical support**

Salary Ranges (as at 1 May 2023)

- VPS3 (AOD Practitioner): \$73,842 - \$89,661
- AH3 (Clinician): \$91,418 - \$103,725
- AH4 (Senior Clinician): \$105,479 - \$127,621
- VPS6 (Principal Clinician): \$129,379 - \$151,259

Thank you