



Case Planning in Treatment Courts

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Objectives

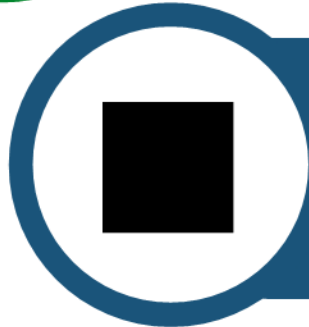


1. Understanding the purpose of case planning in treatment courts.
2. Review of criminogenic risk and needs and their role in effective case management.
3. Identification of core case plan elements.
4. Recommended case planning strategies.



START

What could you *start* doing to integrate today's learning into your program?



STOP

What could you *stop* doing to avoid current problems?



CONTINUE

What's still working that you want to *continue* to do?



CHANGE

What needs to *change* to bring the desired outcome?

**Consider how
the content of
this session
can be
applied**



You can't go back and
change the beginning,
but you can start
where you are and
change the ending.

-C.S. Lewis



**Why is this so
important?**



Who *doesn't* have a case plan?

- SUD Treatment Provider
- Mental Health Provider
- Medical
- Housing
- Peer Support
- Probation



Who Does it



- Often more than one team member
- Specific Case Manager model
- If more than one team member, then on-going real time communication is a must.
- Our responsibility to ensure needs are being met, don't expect the participant to be able to manage much in the beginning.

Research on Case Planning & Management of CJ populations



- Strong on assessing risk
- Upstream the process wanes
 - Poor adherence to RNR principles
- Better outcomes when case plan developed and matched from high-risk domains.
 - Study of just under 200 high risk probationers with complex needs that had carefully crafted/responsive case plans displayed **52% less recidivism** than probationers that were not provided complete case plans.



Support

Focus on **Criminogenic Needs**
– those areas, if not removed
from a person's life, they will
recidivate

Coach



**Case
Managers**

We must know who they are, what their needs are and how best they will respond

Risk, Need, Responsivity



Case Management & Planning



Assessment

Planning

Linkage

Modeling

Monitoring

Advocacy

Normed and Validated Tools for Youth

- Youth Assessment and Screening Instrument (YASI)
- Positive Achievement Change Tool (PACT)
- Juvenile Risk Assessment Scale (JRAS)
- Child and Adolescent Risk Evaluation (CARE)

Normed and Validated Tools for Adults

- TRAS
- Static Risk and Needs Assessment (SRNA)
- Women's Risk and Needs Assessment (WRNA)
- Impaired Driving Assessment (IDA)
- Ohio Risk Assessment System (ORAS)
- Level of Service Inventory-Revised/Level of Service Case Management Inventory (LSI-R/CMI)
- Public Safety Assessment (PSA)
- Static Risk and Offender Needs Guide – Revised (STRONG-R)
- Correctional Offender Management Profiling for Alternative Sanctions (COMPAS)



**Assessing
Risks**

Central Eight



- Criminal history
- Antisocial personality pattern
- Pro-criminal attitudes
- Pro-criminal associations
- Family/marital
- School/work
- Leisure/recreation
- Substance misuse/abuse

Research over the last decade has shown no difference between the Big Four and the Moderate Four. The Big Four has been replaced with the Central Eight.

Source: Bonta, J. and Andrews, DA (2024). *The psychology of criminal conduct* (7th ed.). Routledge Publishing Co. pg. 362

Example ORAS Score and Domains

ORAS Domains

1. Criminal History
2. Peer Association
3. Criminal Attitudes/Behavior
4. Educ./Employ./Financial
5. Family And Social Support
6. Neighborhood
7. Substance Use

Max Score

8

8

13

6

5

3

6

Pay attention to the **score** in each **domain** to build case plans

RISK

WHO

Match the intensity of the individual's intervention to their risk of reoffending

Deliver more intense intervention to higher-*risk* offenders

NEED

WHAT

Target criminogenic needs: antisocial behaviors and attitudes, SUD, and criminogenic peers

Target criminogenic *needs* to reduce risk of recidivism

RESPONSIVITY

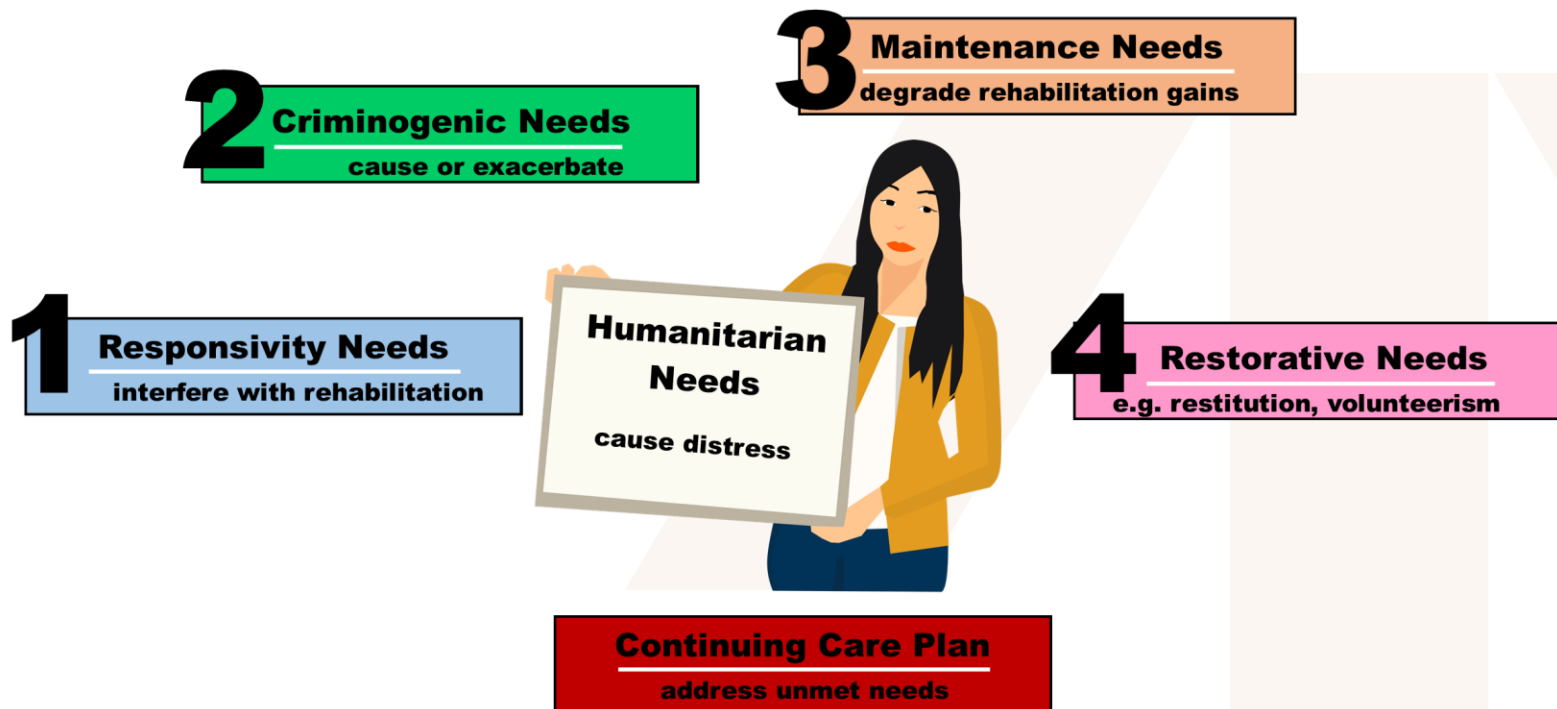
HOW

Tailor the intervention to the learning style, motivation, culture, demographics, and abilities of the offender

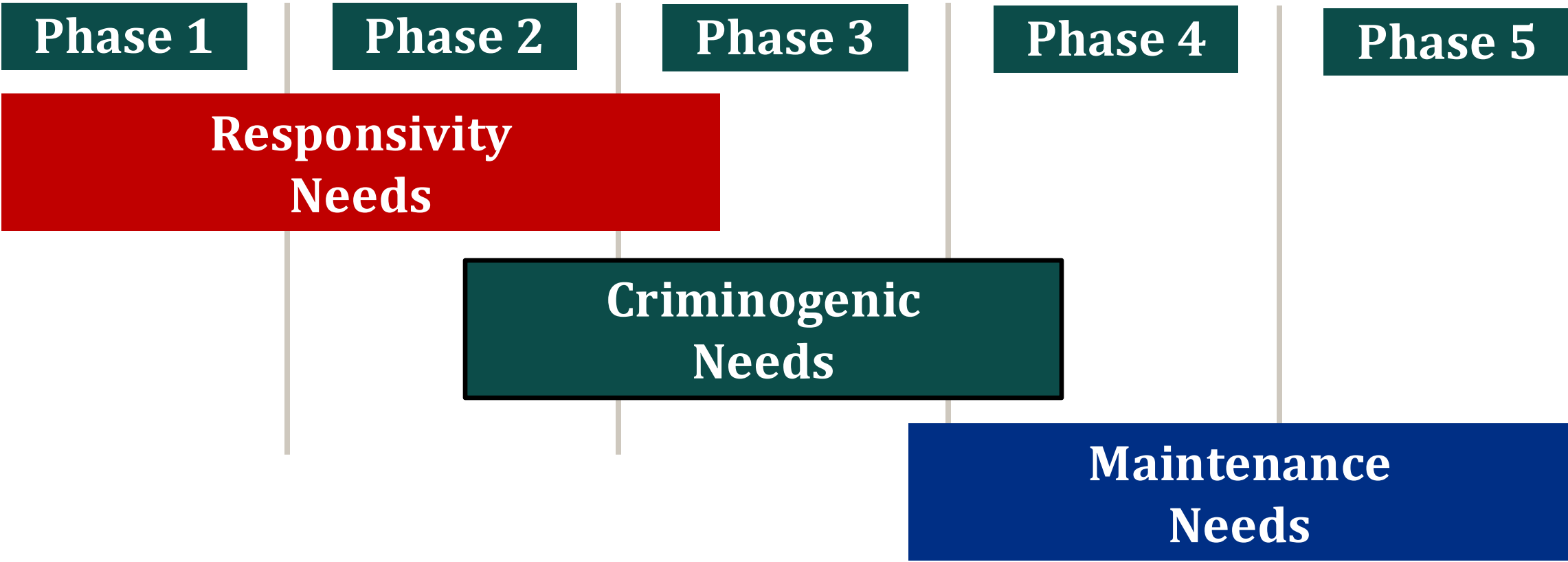
Address the issues that affect *responsivity*

Specific Responsivity

Prioritization of intervention is crucial



Timing Matters



Case Planning versus Court Requirements



- Individual case plans are the tools to help the client successfully move forward in the court phases.
- The phases are the court requirements, but the case plan is individualized to meet the client where they are at.
- Case plan progress should be built into the phase requirements.

Case planning and our MI Skills



Strategies

- Collecting information
- Build Rapport (Seeking Honesty)
- Facilitates Case Planning

Use these MI Skills

- Open and Evocative Questions
- Affirmations
- Reflections
- Summaries
- Spirit of Motivational Interviewing

Collaborativ Case Plan Development

- Review criminogenic needs and illicit client's input
- Engage Family/Natural Supports
- Identify Recovery Capital
- Be aware of inconsistencies reported versus information collected.
- Identification of potential barriers
- Identification of appropriate intervention options that can be discussed with the client. One size does not fit all.



Components of a Case Plan

case plans should address

1. Relevant criminogenic need(s), as determined by a validated assessment tool; and
2. The following information for each criminogenic need should be addressed in the case plan:

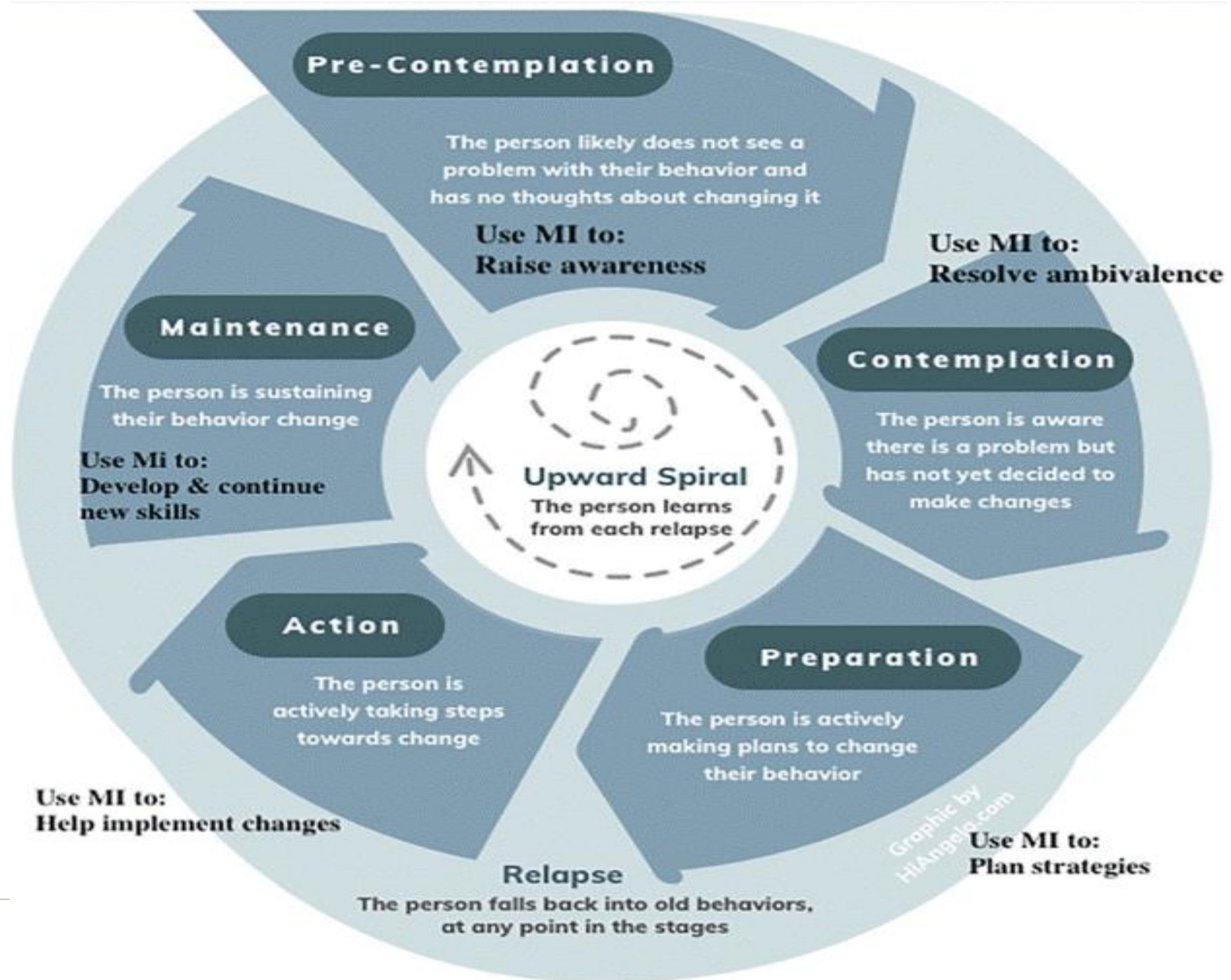
For Each Goal Have

1. Action step(s)
2. Intervention(s)
3. Person(s) responsible for completing the action step(s)
4. Time frame for completing the action step(s)
5. Status of the goal

| | Description | Target Goals |
|---------------------------------------|---|--|
| Criminal History | Does not change | |
| Antisocial Personality Pattern | Adventurous, pleasure-seeking, weak self-control, restlessly aggressive | Problem-solving skills, self-management skills, anger management skills, and coping skills. |
| Pro-Criminal Attitudes | Attitudes, values, beliefs, and rationalizations supportive of crime and cognitive-emotional states of anger, resentment, and defiance. | Reduce pro-criminal cognitions, recognize risky thinking and feeling, build up alternatives to prosocial thinking and feeling |
| Pro-Criminal Associations | Close association with criminal others and relative isolation from prosocial immediate social support for crime. | Reduce association with criminal others and enhance association with prosocial others. |
| Family/Marital | Two key elements are nurturance/caring and monitoring/supervision. | Reduce conflict, build positive relationships, enhance monitoring and supervision. |
| School/Work | Low levels of performance and satisfaction in work and/or school. | Enhance performance, rewards, and satisfaction. |
| Leisure/Recreation | Low levels of involvement and satisfaction in prosocial leisure pursuits. | Enhance performance, rewards, and satisfaction. |
| Substance Misuse/abuse | Misuse of alcohol/drugs. | Reduce substance misuse, reduce personal and interpersonal support for substance-oriented behaviors, and enhance alternatives. |

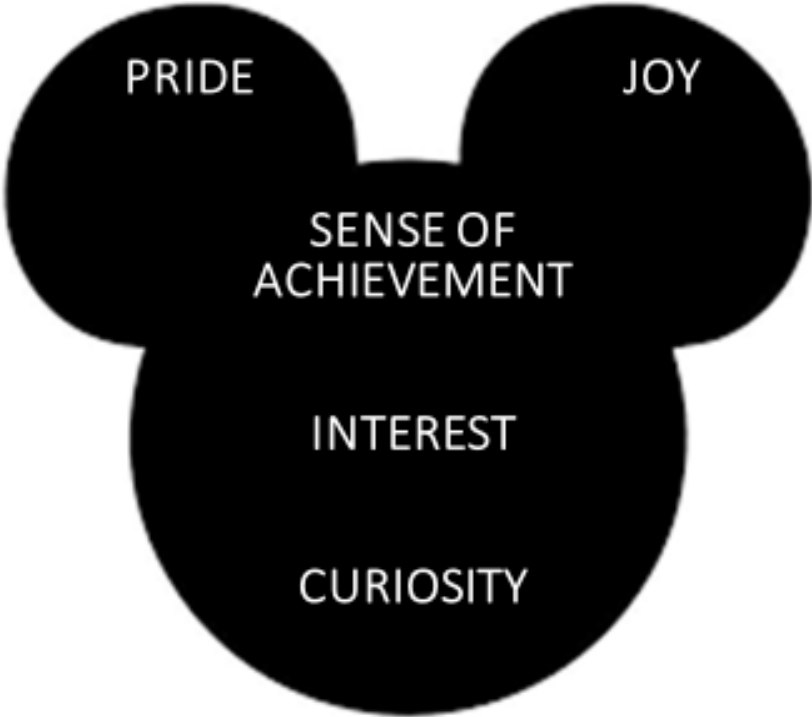
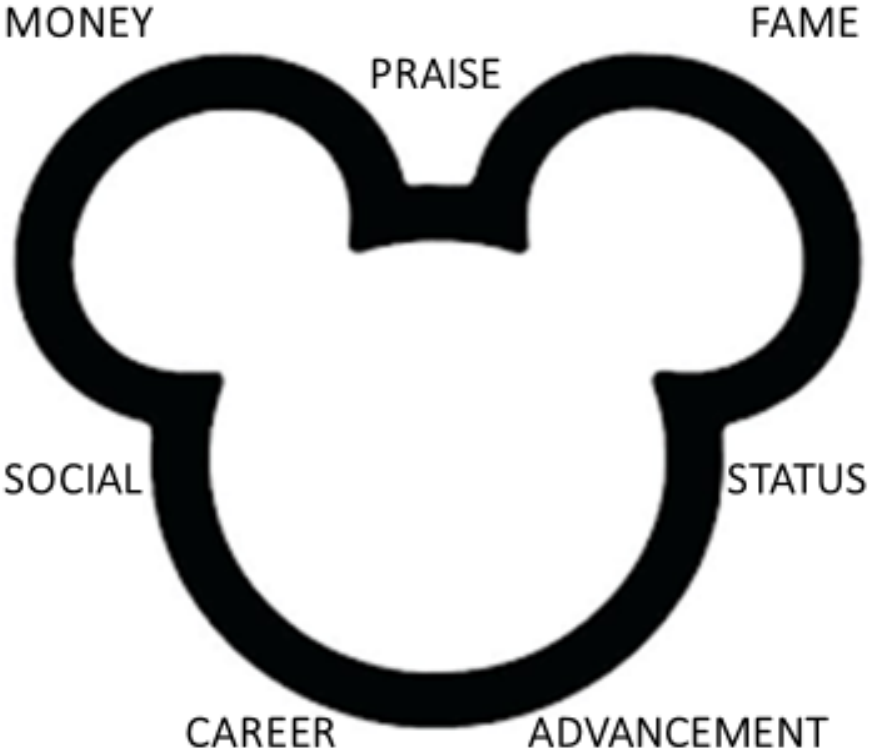
Identifying Motivation

- Be Curious
- Promote self advocacy
- Support making changes
- Increase confidence and resiliency



Identifying Motivation

MOTIVATION



EXTRINSIC VS INTRINSIC

Goal Setting

Proximal vs Distal

- Proximal Goals – Short-term goals that can be achieved sooner rather than later.
- Distal Goals – Objectives that take longer to attain.

Goal Setting



S M A R T



Smart Goals

Goal: Getting off probation. (not specific)

WHAT: I would like to successfully complete my probation

WHEN: Within six months

WHY: to gain more freedom so I can travel and visit my family without having to report.

SPECIFIC GOAL: Successfully complete my probation within the next six months to have greater freedom to visit family without restrictions.

Smart Goals



“Successfully complete my probation *within the next six months* in order to have greater freedom to visit family without restrictions.”

Provide a clear way for the client to know whether the goal has been accomplished.

Smart Goals



Successfully complete my probation within the next six months to have greater freedom to visit family without restrictions.

Identify goals that fall within the reach of the client's skills, opportunities, motivation, and sources.

Smart Goals



Connect the goal to the clients' circumstances, and longer-term goals. It must be meaningful to them.

Smart Goals



Sample SMART Goal Broken Down

| | |
|-------------------|---|
| Specific | Online Anger Management Class learn new skills to improve anger and stress management <ul style="list-style-type: none">• finishing eight sessions (one per week) |
| Measurable | As measured by: <ol style="list-style-type: none">1) certificate of completion2) # new skills learned |
| Attainable | (challenges or barriers & supports to address) |
| Relevant | (driven by need & voice/choice) |
| Time Bound | between September 1st and October 31 st |

| | | |
|---|--|--|
| GOALS PHASE ____ Review in ____ Days | Treatment Objectives (include responsivity factors to address) | Probation Objectives (include responsivity factors to address) |
|---|--|--|

| | | |
|---|--|--|
| Area of Focus: GOAL: Recovery capital element: | | |
|---|--|--|

Area of Focus:

Goal: brief statement of condition to change, happen, or behaviors during

Recovery capital element: list here whether the goal builds the personal, social or community/cultural capital for the client.

Treatment objectives: all goals have objectives, which are specific skills that need to be acquired in order to reach the goal. Objectives have timelines and can be measured or “seen”

Case Management objectives: same definition as treatment objectives, but the approach for the skill building may (or may not) be different.

| GOALS PHASE ____ Review in ____ Days | Treatment Objectives (include responsivity factors to address) | Probation Objectives (include responsivity factors to address) |
|---|---|--|
| <p>Area of Focus: <i>Peers</i></p> <p>GOAL: Spend time with sober people that are my age.</p> <p>Recovery capital element: Social & Personal</p> | <p>John will increase his involvement in the recovery community by attending 2 recovery support meetings and 2 social events at the recovery club on Main Street by October 15th.</p> <p>John will complete a decisional balance sheet on how his peers affect his life in recovery and share it with treatment. TX and John will create a plan to address the negative peers that hang out at his house. John will work with probation. Completed by 10/1.</p> | <p>John will complete a decision balance sheet on how his peers affect his life in recovery and share with this probation by 10/3.</p> <p>John will role play having a difficult conversation with his probation officer to prepare for the conversation with his peers. During this meeting, John will set a plan to when he will have this discussion with his peers. To be completed prior to the next court date on 10/15.</p> |
| <p>Area of Focus: <i>Substance Use</i></p> <p>GOAL: I want to make recovery work this time</p> <p>Recovery capital element: Personal</p> | <p>John will write a list of triggers and high-risk situations that have led to relapse in the past year by ____.</p> <p>Clinician to explore ambivalence using MI and CBT.</p> | <p>John will complete a Behavior Offense Chain with his probation officer when the last time he used and committed a new offense. John will identify any triggering _____ behaviors, emotions, or thoughts that led to use and criminal activity.</p> |



Focus of every meeting

And involving them in making a case plan

Reassessed Every 180 days



growing and succeeding long-term.

Remember to reassess and update



- Our clients should not be high risk when they graduate!
- We have met their needs, they have developed Recovery Capital and are ready to move on without us.
- Using validated tools helps us measure progress.

Questions

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