

The Comprehensive Alcohol and Substance Abuse Treatment Program

2021

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CASAT PROGRAM

The New York State Department of Corrections and Community Supervision (NYSDOCCS) Comprehensive Alcohol and Substance Abuse Treatment (CASAT) program was a creation of the 1989 Prison Omnibus Legislation.¹ This legislation called for the establishment of six 200-bed alcohol and substance abuse treatment annexes at specified locations. Persons successfully completing the sixmonth long annex phase of treatment (Phase I) would be transferred to a work release facility or an appropriate community based program (Phase II). The law also provided for an aftercare component upon release from the Department while under the supervision of the Division of Parole (Phase III). Appendix A diagrams the movement of the incarcerated individual through the CASAT program phases.

After briefly summarizing the CASAT program's history since 1990, this report focuses on recent program trends from 2006-2021. For an in-depth description of the CASAT program, please see *"The Comprehensive Alcohol and Substance Abuse Treatment Program: 2008"*.²

PROGRAM GOALS

The CASAT program, with its mandate to provide a continuum of treatment services, is designed to achieve the following goals:

- To focus facility resources on the needs of incarcerated individuals with a history of alcohol and substance abuse.
- To better prepare participants for return to their families and communities upon release.
- To reduce drug and alcohol relapse rates and recidivism rates for program participants.
- To ensure appropriate aftercare services in the community.
- To increase coordination among the pertinent state and local agencies, service providers, and community organizations.

¹ The New York State Department of Correctional Services and the New York State Division of Parole were merged through Legislative action on April 1, 2011. The resulting agency is the New York State Department of Corrections and Community Supervision.

² "The Comprehensive Alcohol and Substance Abuse Treatment Program: 2008," New York State Department of Correctional Services, Albany, New York 12226 (2009).

CURRENT PROGRAM ELIGIBILITY

- Documented history of alcohol and/or drug abuse.
- Minimum of 9 months to earliest release at the time of review to allow for sufficient program time, but no more than 24 months to merit eligibility (if, merit eligible) or earliest release date. One exception to this is that drug offenders may enter Phase I at 30 months to earliest release.
- Classified as medium or minimum security.
- Temporary Release program approvable except for some drug offenders sentenced by judges to CASAT treatment (court-mandated CASAT). Court-mandated CASAT offenders who do not meet Temporary Release program eligibility, are permitted to enter Phase I but are not allowed to transition to Phase II. This group is referred to as Phase I-only participants. This program modification, implemented in May 2006, permits a larger pool of offenders to receive intensive, residential drug treatment. Court-mandated offenders who meet all established CASAT requirements are only eligible to enter Phase II upon completion of Phase I if the incarcerated individual is approved for Temporary Release participation and transferred to a Work Release facility.

The review for CASAT eligibility is conducted via an automated screening during Reception processing or later at a general confinement facility during an interview between the incarcerated individual and their Offender Rehabilitation Coordinator. If a review determines a need for substance abuse treatment and the individual is statutorily eligible for Temporary Release program application, an automated Presumptive Work Release application for CASAT participation is generated at the facility level. The application, upon facility recommendation, is forwarded to Temporary Release in Central Office for a final review of appropriateness for work release upon completion of CASAT Phase I. Those individuals found to be acceptable for Temporary Release represent the pool of potential participants for traditional CASAT Phase I and II programs.

Historical information on CASAT is included in this report on the DOCCS website: <u>https://doccs.ny.gov/system/files/documents/2022/06/2020-casat-report.pdf</u>.

PHASE I PARTICIPANT POPULATION: 2006-2021

- Declines in CASAT Phase I participation continued until 2006 when the first impact of permitting temporary release ineligible, court-mandated individuals in the CASAT program was observed. The program increased from 467 on June 30, 2005 to 522 participants on June 30, 2006 (see Table 1.1).
- After the introduction of the court-mandated, temporary release ineligible participants in 2006, Phase I participation rose until the first half of 2010 before declining. As a response to the steep decline in Phase I participation during the second half of 2010 and 2011, the Department closed Wyoming Alcohol and Substance Abuse Correctional Treatment Center (ASACTC) (120 beds) in March 2011 and reduced the program capacity of Taconic ASACTC to 44 treatment beds (from 136 beds) in May 2011 (see Table 1.1). Remaining Wyoming CASAT participants were transferred to Arthurkill and Hale Creek to complete Phase I.
- Over a ten-year period, 2002-2011, the NYSDOCCS experienced a significant reduction in its under custody population. As a result, during 2011 and 2012, seven medium and minimum-security facilities were closed, including Arthurkill. CASAT participants not nearing program completion were transferred to a new 60-bed program at Marcy Correctional Facility that opened in October 2011 (see Table 1.2).
- In December 2012, the program for female CASAT participants was moved from Taconic ASACTC to Albion Correctional Facility. The program capacity at Albion ASACTC increased from 40 beds to 60 beds in August 2018 and decreased to 30 beds in June 2021.
- On June 30, 2021, there were 239 Phase I participants, 190 less than on June 30, 2020. This was a decrease of 44% in Phase I participants.
- On June 30, 2021, seven, or 3%, of the total Phase I participants were court mandated and work release ineligible, compared with 44% of Phase I participants at the end of June 2011. As a result, a larger proportion of participants who complete Phase I are eligible to participate in Phase II, which requires temporary release approval.

Table 1.1CASAT Phase I Participants Snapshots as of June 30In Annual CASAT Legislative ReportsBy Report Year: 2001 to 2021

	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Albion	0	0	0	0	0	0	0	0	0	0	0	0	28	30	28	37	37	38	56	37	16
Arthurkill	153	117	127	35	17	31	39	41	49	43	49	0	0	0	0	0	0	0	0	0	0
Butler	176	60	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Chateauguay	99	45	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Hale Creek	259	264	416	266	156	362	424	451	448	388	222	195	185	153	168	190	216	219	391	350	182
Marcy	192	197	192	143	178	0	0	0	0	0	0	49	37	43	29	41	50	47	55	42	41
Wyoming	99	82	90	95	58	60	125	124	126	127	0	0	0	0	0	0	0	0	0	0	0
Taconic	228	161	167	75	58	69	90	82	64	49	28	23	0	0	0	0	0	0	0	0	0
Total	1,206	926	992	614	467	522	678	698	687	607	299	267	250	226	225	268	303	304	502	429	239

Figure 1.1 CASAT Phase I Participant Snapshot as of June 30: 2001 to 2021

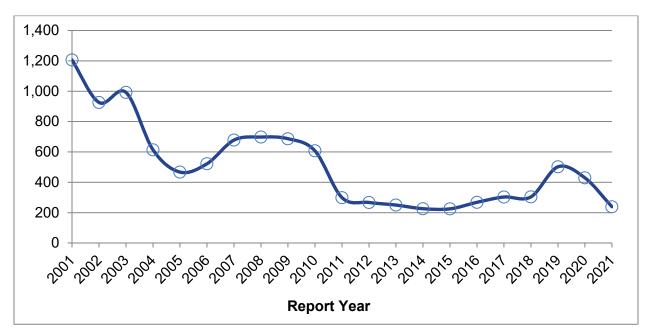


Table 1.2Capacity and Offender Population CASAT Programs – As of 6/30/2021*

Annex	Program Start Date	Capacity	CASATI	Participants	Traditional CASAT Participants	Work Release Ineligibles
			Total	% of Program Capacity		
Hale Creek	November 1990	412	182	44%	177	5
Marcy	October 2011	60	41	68%	41	0
Albion	Albion December 2012		16	<mark>5</mark> 3%	14	2
Total		502	239	48%	232	7

Source: DOCCS UC File

*Some program beds at CASAT facilities are occupied by offenders either waiting to begin Phase I or Phase I completers awaiting transfer to work release or general confinement facilities. These offenders are not included in these figures.

• As of June 30, 2021, 48% of all CASAT program beds were filled with participants. Albion was operating at 53% capacity, Marcy was at 68% capacity, while Hale Creek was at 44% capacity (see Table 1.2).

Declines in the number of incarcerated individuals eligible for the CASAT program were a consequence of the sweeping Drug Law Reform Act of 2009. Elements of this law encouraged the expansion of Drug Courts and community-based substance abuse treatment in order to divert drug offenders from NYSDOCCS incarceration. Since the Sentencing Reform Act (SRA) of 1995, approximately 70% to 80% of CASAT participants have been drug offenders; therefore, any decrease in drug offender commitments to NYSDOCCS would reasonably be expected to impact the availability of potential participants for the program. The number of drug offenders committed to DOCCS in 2021 (934) was slightly higher than in 2020 (872) which was the lowest recorded since the CASAT program started in 1990 and the lowest since 1985. This was a 7% (62) increase from 2020 but a 63% (1,586) decrease from 2019 and is attributed to similar decrease in new commitments in 2020 due, in part, to pandemic-related court processes and alternative sentencing (see Appendix B).

CASAT PHASE I and PHASE II QUARTERLY TRENDS: 2016-2021

- Focusing on the most recent years of the CASAT program (2016 2021), Table 1.3 and Figure 1.2 present quarterly Phase I and Phase II trends.
- Since 2016, the total number of Phase I participants generally increased until 2020, but then declined from 208 at the beginning of 2016 to 171 at the end of 2021 (-18%).
- The proportion of females in Phase I was 14% at the beginning of 2016 and decreased to 5% of Phase I participants at the end of 2021.
- Between the beginning of 2016 and the end of 2021, the number of CASAT Phase 2 participants has varied. It ranged from a high of 229 participants at the beginning of 2020 to a low of 70 in July 2020. On January 1, 2022, there were 161 Phase 2 participants. (Table 1.3).

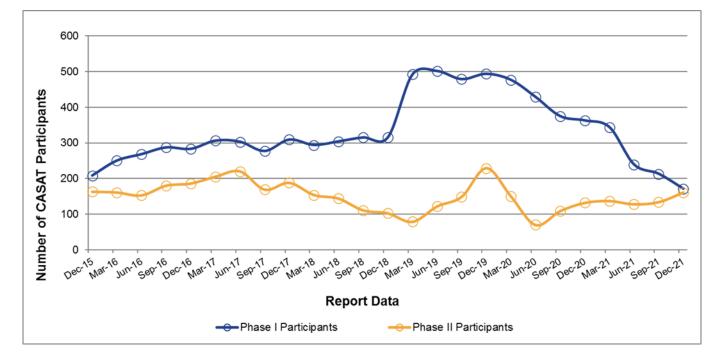


Figure 1.2 CASAT Participants 2016-2021

CASAT Phase I and Phase II Population: Calendar Years 2016-2021									
REPORT DATE		PHASE II PARTICIPANTS							
	Male	%	Female	%	Total	Total			
1/1/2016	178	85.6%	30	14.4%	208	163			
4/1/2016	213	85.2%	37	14.8%	250	161			
7/1/2016	231	86.2%	37	13.8%	268	153			
10/1/2016	250	87.1%	37	12.9%	287	180			
1/1/2017	244	86.2%	39	13.8%	283	186			
4/1/2017	267	87.3%	39	12.7%	306	205			
7/1/2017	266	87.8%	37	12.2%	303	220			
10/1/2017	237	85.6%	40	14.4%	277	169			
1/1/2018	269	87.1%	40	12.9%	309	188			
4/1/2018	256	87.1%	38	12.9%	294	154			
7/1/2018	266	87.5%	38	12.5%	304	144			
10/1/2018	259	82.2%	56	17.8%	315	111			
1/1/2019	259	82.2%	56	17.8%	315	103			
4/1/2019	443	90.0%	49	10.0%	492	79			
7/1/2019	446	88.8%	56	11.2%	502	122			
10/1/2019	430	89.8%	46	9.6%	479	149			
1/1/2020	437	88.5%	57	11.5%	494	229			
4/1/2020	429	89.9%	48	10.1%	477	150			
7/1/2020	292	68.1%	37	8.6%	429	70			
10/1/2020	330	88.0%	45	12.0%	375	109			
1/1/2021	316	87.1%	47	12.9%	363	132			
4/1/2021	325	94.5%	19	5.5%	344	137			
7/1/2021	223	93.3%	16	6.7%	239	128			
10/1/2021	180	84.5%	12	5.6%	213	134			
1/1/2022	163	95.3%	8	4.7%	171	161			

CASAT Phase I and Phase II Population: Calendar Years 2016-2021

CASAT PHASE II : CONTINUING SUBSTANCE ABUSE TREATMENT

- After participating in an intensive, residential, therapeutic community-based substance abuse treatment component in Phase I, CASAT participants eligible to enter Phase II (work release) continue in substance abuse treatment. Males assigned to New York City work release facilities receive treatment services at their facility. Female work release participants from the New York City area are now assigned to Edgecombe Correctional Facility with outpatient treatment services provided by the Center for Community Alternatives.
- Starting in March 2007, incarcerated individuals entering CASAT Phase II in upstate work release facilities began receiving treatment services from community outpatient treatment providers. This program is federally funded under a collaborative project with the New York State Office of Addiction Services and Supports (OASAS). At the end of 2021, there were 64 participants attending weekly individual and/or group counseling sessions, a 36% increase from last year. (see Table 1.4).

Table 1.4Outpatient Substance Abuse Service Providers

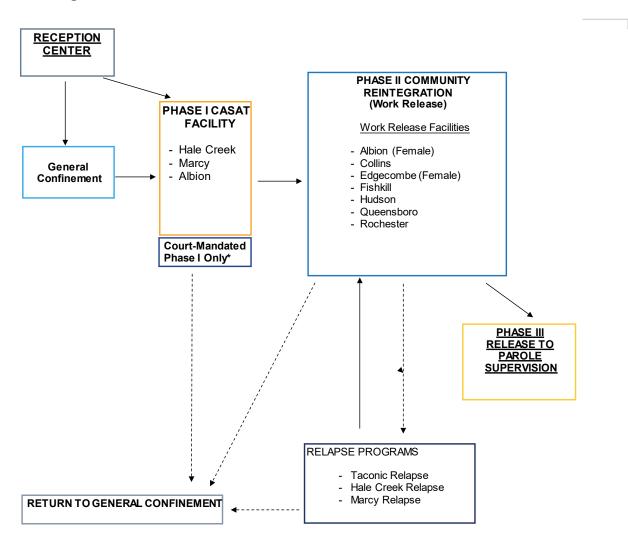
Upstate CASAT Phase II Participants December 2, 2021

Service Providers	Assigned Facility	Caseload
Albany Area		
Conifer Park	Hudson	5
Twin County Recovery Services	Hudson	6
Buffalo/Rochester Area		
BestSelf	Rochester, Albion, & Collins	0
Conifer Park	Rochester & Albion	5
Genesee Council on Alcoholism and		
Substance Abuse (GCASA)	Rochester & Albion	0
Spectrum	Rochester, Albion, & Collins	10
Strong Recovery	Rochester & Albion	7
Utica/Syracuse Area		
Insight House	Albion, Hudson & Rochester	10
	Albion, Hudson, Rochester	
Syracuse Behavioral	& Collins	7
Hudson Valley Area		
Bridge Back	Fishkill	0
Catholic Charities	Fishkill	0
St. Johns Riverside	Fishkill	0
Turning Point	Fishkill	4
New York City		
Center for Community Alternatives	Edgecombe Female	10
Total		64

CONCLUSION

In view of the fact that approximately 70% to 80% of the CASAT participants have been drug offenders since the Sentencing Reform Act (SRA) of 1995, the decline in the number of such offenders committed annually to NYSDOCCS in recent years has reduced the pool of incarcerated individuals eligible for the CASAT program. CASAT participation in 2021 decreased compared to 2020, and a greater percentage of formerly Phase I participants were eligible to participate in Phase II continuing the trend from the past few years.

Appendix A



NYSDOCCS Comprehensive Alcohol and Substance Abuse Treatment Program Diagram of Incarcerated Individuals Movement as of December 31, 2021

*Successful court-mandated Phase I-only participants are either paroled from the CASAT facility or are returned to general confinement.

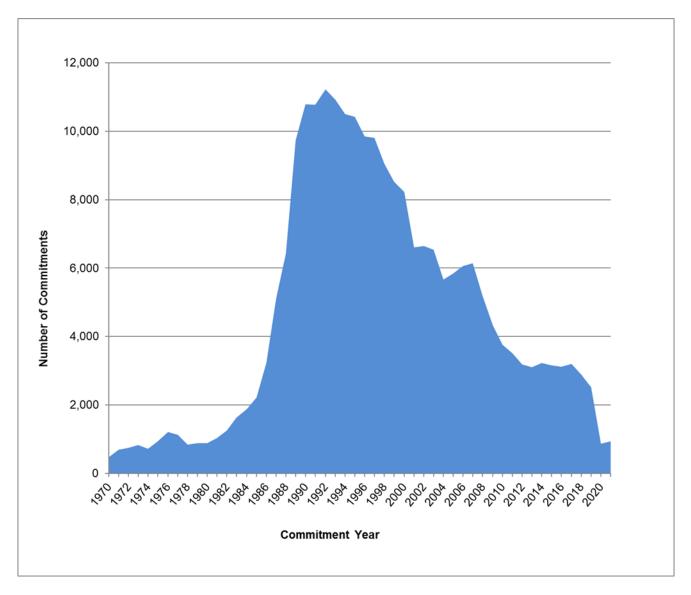
Dotted Lines (----) Indicate failure to complete program.

Calendar Years: 1970-2021

	Drug Commit	Total New Court Commitments	
Year of <u>Commitment</u>	<u>Number</u>	Percent	Number
1970	470	11.1%	4,250
1971	690	13.5%	5,130
1972	751	13.2%	5,709
1973	834	12.9%	6,477
1974	713	10.7%	6,691
1975	933	12.6%	7,424
1976	1,203	14.9%	8,063
1977	1,122	13.3%	8,436
1978	844	11.7%	7,232
1979	880	11.6%	7,559
1980	886	11.1%	7,960
1981	1,036	10.1%	10,303
1982	1,243	11.9%	10,406
1983	1,625	13.0%	12,537
1984	1,874	15.3%	12,248
1985	2,218	17.9%	12,420
1986	3,228	21.7%	14,901
1987	5,106	32.6%	15,654
1988	6,432	37.2%	17,308
1989	9,742	45.3% 46.7%	21,518
1990	10,784	46.7%	23,115
1991 1992	10,778	44.7%	24,116
1992	11,225 10,920	44.6%	25,155 24,897
1993	10,508	45.4%	23,153
1995	10,418	45.3%	22,981
1996	9,841	46.4%	21,192
1997	9,810	47.2%	20,804
1998	9,063	46.6%	19,453
1999	8,520	44.5%	19,157
2000	8,225	44.3%	18,561
2001	6,606	40.0%	16,497
2002	6,647	39.1%	16,999
2003	6,540	37.7%	17,336
2004	5,667	34.6%	16,388
2005	5,839	35.7%	16,363
2006	6,060	35.9%	16,867
2007	6,147	35.6%	17,248
2008	5,190	32.8%	15,812
2009	4,324	28.2%	15,322
2010	3,756	25.5%	14,754
2011	3,510	24.2%	14,496
2012	3,189	22.7%	14,089
2013	3,096	22.6%	13,694
2014	3,225	24.3%	13,271
2015	3,165	25.0%	12,663
2016	3,117	24.2%	12,872
2017	3,118	24.3%	12,806
2018	2,893	24.9%	11,608
2019	2,520	24.2%	10,409
2020	872	22.1%	3,945
2021	934	15.6%	5,991
TOTAL	234,011	32.8%	713,895

Appendix C Figure 2

NYSDOCCS Felony Drug Commitments Calendar Years: 1970-2021



Prepared by:

Program Planning, Research & Evaluation