

Substance Abuse Treatment

Update to 2006 Evaluation Report

Problems Identified

- **Lack of Sufficient Treatment Options.** Minnesota prisons did not have enough capacity in their substance abuse treatment programs to serve many inmates who needed treatment. Inmates were often placed in short education programs instead of longer-term treatment, and graduates of short programs had high recidivism rates. Also, the Department of Human Services (DHS) had not done enough to foster the development of adequate community-based treatment options to meet needs across the state.
- **Inadequate State Oversight.** Counties used inconsistent practices for assessing clients and referring them to treatment, and DHS did not actively monitor these practices.
- **Inadequate Planning for Post-Prison Treatment.** Few chemically dependent inmates entered treatment after prison, and prison “release plans” provided limited direction about the services needed by individual offenders after their release.

Changes Implemented

- **Improvements in Prison Release Planning Implemented.** The 2006 Legislature required the Department of Corrections (DOC) to ensure that release plans address post-release assessment, treatment, and other services. It also required DOC to provide community-based corrections agencies with better assessment and treatment information regarding offenders released to community supervision. DOC hired two chemical dependency “release and reintegration specialists” to help with post-release planning.
- **Prison Programs Changed.** To improve post-release outcomes, DOC converted its short-term educational programs in prisons to longer-term treatment programs, and it expanded its in-prison “aftercare” services for inmates who have completed treatment.

Action Needed

- **Expand Treatment Availability in Prisons and Communities.** DHS and DOC have not proposed ways to significantly address treatment shortages, and the 2007 Legislature should consider the need for additional treatment resources. For instance, DOC says it needs 1,200 more treatment beds in its prisons, but the Governor’s budget does not propose new funding for treatment beds.
- **Improve Consistency of Assessments.** DHS has drafted rules, scheduled to take effect in 2008, that would require counties to use a uniform assessment instrument.
- **Address Equity of County Funding Obligations.** DHS agreed with OLA’s concerns regarding the equity of statutory “maintenance of effort” provisions for substance abuse treatment funding. But DHS said that addressing these inequities would require increased state funding, and such funding was not proposed in the Governor’s budget.