


**Implementing the Principles  
of Risk Need Responsivity**

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APPLYING RESEARCH TO TREATMENT



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**Risk Need Responsivity**

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- **Risk Principle:** level and intensity of services should match the client's risk level
- **Need Principle:** treatment should highlight and target those behaviors that are directly related to the client's risk of reoffending
- **Responsivity Principle:** provide cognitive behavioral interventions and tailor to match the client's learning style, motivation, abilities, and strengths

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**Preliminary Challenges**

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- Understanding RNR
- Getting buy-in from your agency to change the program
- Finding or dividing resources for the initial project
- Putting together a timeline and an implementation plan

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**Program Evaluation**

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**PREPARING FOR  
PROGRAM  
DEVELOPMENT**

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**Why Conduct a Program Evaluation?**

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- Roadmap for program development
- Identify program needs
- Identify strengths and areas for growth for your program and staff
- Define your population and its specific needs
  - ✦ Risk factors, challenges, special characteristics
- Gain new perspectives
- Avoid blind spots

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**Program Evaluation Questions**

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- Does the program consider risk?
- Do clients with more risk receive longer / more intensive treatment?
- How much of the curriculum / treatment focus addresses criminogenic needs?
- How much of the curriculum / treatment focus is dedicated to issues unrelated to criminogenic needs?
- Does the program assess and incorporate changes in criminogenic needs?
- How is treatment completion determined?

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**Program Evaluation Questions**



- What does your population look like?
- What services are available to assist clients with various needs?
- How cohesive are your groups?
- How strong is therapeutic alliance?
- How developed are the providers' clinical skills?
- Are there opportunities for social modeling and skills practice within the therapeutic setting?
- Are there opportunities for clinical supervision and consultation?

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**Program Evaluation Questions**



- Does the facility feel safe to clients?
- Is client and staff feedback elicited and incorporated into the program?
- What do your resources look like?

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**Program Development**



**CREATING THE NEW PROGRAM**

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### THE RISK PRINCIPLE IN PRACTICE

- Assessments guide:
  - Treatment entry
  - Treatment structure
  - Treatment completion decisions
- Consider time for treatment and options for those ineligible for treatment

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### THE NEED PRINCIPLE IN PRACTICE

- Need guides:
  - Decisions on individual assignments/treatment targets
  - Decisions on additional groups
- Specific tracks may be created based on need
- Clinicians can utilize need principal to individualize feedback and engage group members

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### THE RESPONSIVITY PRINCIPLE IN PRACTICE

- Cognitive Behavioral Therapy
- Social learning methods
- Motivate and engage clients
  - Trainings on Motivational Interviewing, therapeutic alliance
  - Client's goals, protective factors, and strengths integrated into curriculum/individual sessions
- Create groups for clients based on ability and needs
- Match providers and clients
- Provide opportunities for feedback
- Train, Supervise, Consult

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## Program Implementation

### PUTTING THE PLAN INTO ACTION

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## Timing & Training Considerations

- Director engagement
  - Consultation with developers before, during, after development
  - Program implementation
  - Motivating and training staff, agency, other stakeholders
- Staff training
  - Assessments
  - Curriculum
  - Program Logistics
  - Therapeutic skills
- Coordination of on-going duties
- Client training

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## Transitioning Groups

- Put groups and/or waitlist on hold
- Combine groups
- Remove clients that do not need more treatment
- Continue older groups or senior members
  - Cut assignments as needed
- Transition to RNR with newer groups/members
  - Determine which assignments are most relevant
  - Give credit for completed work
- Reorganize groups by track

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**Systemic Changes**

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- **Leadership**
  - Backing for treatment-supportive changes
  - Incentivizing treatment
  - Avoiding policies that de-incentivize treatment
- **Housing & Employment**
  - Safety
  - Access to supportive peers
  - Separation from negative influences
  - Access to employment opportunities
- **Re-Entry**
  - Maximizing successful integration into the community
- **Facility Staff**
  - Understanding and supporting treatment

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**Program Maintenance**

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**KEEPING THE  
PROGRAM CURRENT**

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**Avoiding Drift**

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- **Periodic internal checks**
  - Program implementation
  - Staff resources and morale
  - Client transition and morale
- **Schedule re-evaluation**
  - Determine whether key areas were implemented correctly
  - Determine whether drift is occurring
  - Identify and resolve unforeseen implementation issues
- **Continuous training and maintaining institutional responsibility**

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**Continued Change**

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- **Population shifts**
  - Unique offenses
  - Shifts in populations effecting tracks and staffing
- **Staff support and avoiding burnout**
  - Agency growth or turnover and its effects on staff
- **Integrating new research**
  - Protective Factors, Trauma Informed Care
  - New assessments and up-dates to current assessments

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**QUESTIONS?**

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