

# Washington D.C. Superior Court Drug Intervention Program Assessment Report



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# Washington, D.C. Superior Court Drug Intervention Program Assessment Report

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## BACKGROUND AND SUMMARY

**D**rug courts are designed to guide offenders identified as drug-addicted into treatment that will reduce drug dependence and improve the quality of life for the offenders and their families. Benefits to society include substantial reductions in crime, resulting in reduced costs to taxpayers and increased public safety.

In the typical drug court program, participants are closely supervised by a judge who is supported by a team of agency representatives operating outside of their traditional roles. The team typically includes a drug court coordinator, case managers, substance abuse treatment providers, prosecuting attorneys, defense attorneys, law enforcement officers, and parole and probation officers who work together to provide needed services to drug court participants. Prosecuting and defense attorneys modify their traditional adversarial roles to support the treatment and supervision needs of program participants. Drug court programs blend the resources, expertise and interests of a variety of jurisdictions and agencies.

Drug courts have been shown to be effective in reducing criminal recidivism (GAO, 2005), improving the psycho-social functioning of offenders (Kralstein, 2010), and reducing taxpayer costs due to positive outcomes for drug court participants (including fewer re-arrests, less time in jail and less time in prison) (Carey & Finigan, 2004; Carey, Finigan, Waller, Lucas, & Crumpton, 2005). Some drug courts have been shown to cost less to operate than processing offenders through business-as-usual in the court system (Carey & Finigan, 2004; Carey et al., 2005).

### Assessment Description and Purpose

The D.C. Pretrial Services Agency (PSA) is intent on ensuring its Superior Court Drug Intervention Program (SCDIP) is incorporating national standards and guidelines to become a model drug court. NPC Research was hired to perform a process assessment and provide technical assistance to assist the SCDIP in these goals. The research team worked with the staff of the PSA's Office of Research, Analysis and Development (RAD) and the Office of Operations Treatment Program Area (Treatment), to assess the extent to which the current SCDIP program incorporates national standards from DOJ/NIJ, SAMHSA/CSAT, NIDA, and NADCP/ NDCI in terms of what constitutes best practices and evidence-based practices in drug courts.

The assessment process examined the extent to which SCDIP is implementing the 10 Key Components of drug courts (NADCP, 1997) and the best practices that research indicates are related to positive outcomes. Activities included administration of an electronic assessment; site visits to the drug court; interviews in person and by telephone with drug court staff; focus groups with current participants; and a facilitated discussion of enhancement recommendations at an on-site meeting with drug court staff members, court administration, a SCDIP advisory group and drug court experts.

A synthesis of the information collected through these activities provided NPC with a good understanding of the drug court's organization and current processes, assisted the assessment team in determining the direction and content of further questions and technical assistance needs and supports, and informed possible future evaluations of the program.

## Washington D.C. Superior Court Drug Intervention Program Assessment and Technical Assistance Activities

NPC staff conducted the following activities with the Washington D.C. Superior Court Drug Intervention Program (referred to as SCDIP in the remainder of the report):

1. Assessment completed by the Pretrial Services Agency, Director of Treatment in collaboration with several of the SCDIP Pretrial Services Officers
2. Site visits by NPC staff and consultant to:
  - a. Observe a graduation (progression) ceremony and drug court status review hearings, challenge hearings, and sanction hearings
  - b. Visit the primary treatment facility
  - c. Become oriented to the program's electronic data tracking system
  - d. Perform focus groups with current SCDIP participants
  - e. Talk to team members in person to:
    - i. Learn more about the drug court's program policies and procedures and how they are implementing these as they relate to the 10 Key Components and best practices
    - ii. Determine the drug court team's understanding of the 10 Key Components
    - iii. Share the current status of the research in these areas
    - iv. Review and discuss data elements and program operations, and address any questions that arose
  - f. Facilitate a discussion of enhancement recommendations at meetings of drug court staff, court administration, the advisory committee and drug court experts. The NPC assessment staff on this project was Dr. Shannon Carey, Dr. Michael Finigan and Dr. Theresa Allen. Consulting on this assessment was Dr. Doug Marlowe. See Appendix A for staff bios.
3. This report is the main product of the assessment phase of this contract. The report summarizes program characteristics and practices, analyzes the degree to which this program is following guidelines based on the 10 Key Components, and provides recommendations for program improvement and enhancement.

### ELECTRONIC PROGRAM ASSESSMENT

An electronic assessment was used to gather program process information from the SCDIP staff. This assessment, which provides a consistent method for collecting structure and process information from drug courts, was developed based on three main sources: NPC's extensive experience and research on drug courts, the American University Drug Court Survey, and a published paper by Longshore et al. (2001), which lays out a conceptual framework for drug courts. The assessment is regularly updated based on information from the latest drug court research in the literature and feedback from programs and experts in the field. The assessment covers a number of areas, particularly topics related to the 10 Key Components—including eligibility guidelines, specific drug court program processes (e.g., phases, treatment providers, drug and alcohol testing, fee



structure, rewards/sanctions), graduation, aftercare, termination, and identification of drug court team members and their roles. The use of an electronic assessment allows NPC to begin building an understanding of the program, as well as to collect information to support a thorough review of the site.

## General Summary of Findings and Recommendations

The Washington, D.C. Superior Court Drug Intervention Program (SCDIP) was established in 1993 as one of the original drug court programs in the country. It now stands as one of a shrinking number of drug courts that continue to serve pretrial defendants on a pre-plea basis. Less than 8 percent of drug courts, nationally, still follow a pre-plea model. This may be unfortunate for several reasons. First, pre-plea programs can substantially reduce burdens on the court system by diverting cases away from more costly and intensive trial proceedings. Second, defendants are not placed in the position of having to relinquish their trial rights in order to access needed treatment and social services. Finally, defendants can enter treatment more quickly because there is no need to complete (potentially lengthy) discovery before tendering a plea. Research clearly indicates that faster entry into drug courts is associated with significantly better outcomes (Carey et al., 2008); therefore, getting drug-addicted defendants into treatment quickly on a pre-plea basis has the potential to contribute greatly to public health and public safety.

Having administered a pre-plea drug court for approximately 18 years, the knowledge base of the SCDIP program could serve as a model for the drug court field as a whole, and assist in establishing best practices for pre-plea drug court programs.

Unlike post-plea and post-adjudication drug courts, which typically run from 12 to 24 months in duration, SCDIP cases must be adjudicated within a substantially shorter period of time. The program must accomplish its goals with most participants within approximately 5 to 7 months. The program population consists of a wide variety of defendants, including those charged with misdemeanor and non-violent felony offenses. Currently, the target population is described as adult pretrial defendants assessed with the need for substance abuse-related treatment. It has a reported capacity to serve approximately 375 participants at one time. As of December 2010, there were 350 active participants.

Research has demonstrated that drug courts that have performed monitoring and evaluation and made changes based on the feedback have significantly better outcomes, including 50% reductions in recidivism rates and twice the cost savings (Carey, Finigan, & Pukstas, 2008; Carey, Waller, & Weller, 2010). The recommendations in this report are based on research performed in over 100 drug courts around the country and on practical experience working with individual courts and collaborating with the professionals who do this work.

Overall, the SCDIP has implemented its drug court program within many of the guidelines of the 10 Key Components. Among its many positive attributes, the program should be specifically commended for the following practices:

- The SCDIP staff includes representatives from a range of collaborating agencies.
- The program provides a breadth of diverse and specialized services to program participants. A thorough reexamination and reorientation of the treatment curricula was conducted in late 2008 by the Director of Treatment. A careful review of the evidence-based treatment literature led to the selection of a proven menu of standardized, manualized and culturally relevant interventions, including cognitive-behavioral therapies, motivational enhancement procedures, and 12-Step facilitation.

- Treatment, supervision and case management are coordinated through a single organization, which allows for the consistent and seamless management of participants.
- Urine drug screens are analyzed on-site, in the PSA laboratory, allowing for quick results and an expert interpretation of drug test results. Laboratory experts are available to explain their findings at challenge hearings, thus enhancing the technical accuracy of the court's conclusions, and reducing opportunities for participants to delay or avoid the imposition of appropriate sanctions.
- The Pretrial Services Agency has established partnerships across other community agencies that can provide employment, educational and other services.
- Participants report being pleased with their relationships with their case managers/Pretrial Service Officers.
- The SCDIP program is open to and interested in performing best practices and being a model drug court. It has examined many of its own policies and procedures and already worked to improve practices. For example, as noted, the PSA has adjusted treatment services over time to incorporate evidence based practices. In addition, PSA's Department of Research, Analysis and Development (RAD) has performed a study comparing scheduled drug testing to random drug testing so that they could independently confirm the usefulness of random drug testing with their specific population. Finally, the SCDIP has implemented an alumni group to assist participants after graduation.
- The current judge, who just recently returned to the drug court bench, has already implemented some new practices, such as reading the PSO reports the night before status review hearings, instead of during the hearings. This has already had the effect of making the hearings more time-efficient and personalized for the SCDIP participants.
- PSA staff from RAD have been working to update the program database to ensure that the data entry options include variables appropriate for SCDIP and other PSA needs, and have been writing up clear data definitions and educating staff on those data definitions as well as data entry procedures.
- The SCDIP/PSA leadership has already begun the process of sharing the assessment results. The team and steering committee members should continue to set aside time to discuss the overall findings and recommendations in this report, both to make a note of their accomplishments and to determine what program adjustments will be made. In addition, the assessment and past evaluation results can be very beneficial to the program if it is looking to apply for grants to fund additional positions, or for local funders/agencies to help them access resources. These results can document needs as well as show how well the program has responded in some areas.
- Finally, the SCDIP has a model Progression Ceremony (graduation) that is well-attended, meaningful and inspirational.

Although this program is functioning well in many areas, NPC's review of program operations resulted in some recommendations for program improvements. It is recognized that it will not always be feasible to implement all of these recommendations due to budgetary, policy or infrastructure limitations. It is important for the team to be as flexible as possible and do what they can to work around the barriers that are not changeable, in order to accomplish the ultimate goal of doing what is best for the participants.

The following recommendations represent the primary areas of suggested program improvement that arose in the interviews, focus groups and observations during the site visit. These recommendations are provided with an understanding of the context within which this program operates, including the understanding that this is a pretrial program. Based on what NPC Research has learned about the SCDIP program and on our experience working with over 100 other drug courts, the key issues that should be addressed by this program are summarized below in general order of priority (though some of the later recommendations may be implemented more easily and therefore sooner). Background information, more detailed explanations, and additional recommendations are presented within each of the 10 Key Components in the main body of the report.

- **Assign a single or small number of consistent defense attorney(s) to the drug court program.** It is recommended that SCDIP have a dedicated defense attorney, or small group of defense attorneys, who are interested in and supportive of the drug court concept. Although defendants have the right to be represented by their own private attorneys, there are many downsides to this. The proceedings are delayed while defense lawyers are summoned to the courtroom to represent their clients. Several of the defense attorneys did not seem familiar with the drug court proceedings, or to have specialized knowledge about the nature of addiction or drug court processes. Their input seemed fairly minimal in many cases.

It is generally a good idea to have a trained defense lawyer who is assigned to the drug court and can serve in an advisory capacity for participants and their private counsel. This regularly assigned defense attorney should attend all hearings and staffings to gain information about the program and offer input into the program's processes and operations. According to the National Association of Criminal Defense Lawyers (NACDL), defense attorneys assigned to drug courts should be experienced, well trained, and assigned to the program for more than one-year rotations.<sup>1</sup> This is also recommended by NADCP and NDCI.<sup>2</sup> Defense attorneys assigned to drug courts should also be present, whenever reasonably possible, at all staffings and court hearings. The defense attorney(s) should be trained in the drug court model and the defense attorney's role in drug court. Because continuity in team roles strengthens relationships, and consequently team functioning, the program should work to maximize tenure in this position to the extent feasible. Drug court training early on in the defense attorneys' tenure will help ensure understanding and acceptance of the non-traditional roles that distinguish drug courts from usual court processing.

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<sup>1</sup>National Association of Criminal Defense Lawyers. (2009). *America's problem-solving courts: The criminal costs of treatment and the case for reform*. Washington DC: Author.

<sup>2</sup>NAT'L DRUG CT. INST., CRITICAL ISSUES FOR DEFENSE ATTORNEYS IN DRUG COURT (Monograph Series No. 4, 2003), available at [www.ALLRISE.org](http://www.ALLRISE.org).

- **Implement regular staffing meetings attended by the full team: judge, defense attorney, prosecutor, and PSO/treatment representative(s). In these meetings, participants’ progress should be discussed prior to the court sessions, and tentative decisions reached about potential responses to participant behavior.** Each professional who interacts with the participants observes them from a unique perspective, at different times of the day or week, and under varied circumstances. This offers holistic, useful information for the team to draw upon in determining court responses that will change participant behavior. Representatives from all agencies should attend pre-hearing meetings for the entire team to be unified in its understanding of the cases, and to have the most current information about participants and the decisions arising from these meetings. These meetings also allow status review hearings to be more efficient and focused on the specific behaviors that need attention in court. Best practices research shows that programs that include all team members (judge, prosecutor, defense attorney, case manager, treatment provider) at staffing meetings have 33% lower recidivism (Carey et al., in process).
- **Invite a representative from law enforcement (police and/or sheriff) onto the team or as a member of the advisory committee.** The SCDIP could benefit from having a law enforcement (e.g., police or sheriff) representative on the drug court team or advisory committee. Research has shown that drug courts that include law enforcement as an active team member have significantly higher graduation rates, lower recidivism and higher cost savings (Carey et al., in process). Attendance of law enforcement at graduation and other SCDIP events can be gratifying for drug court participants to demonstrate their success and can be a learning experience for law enforcement as they see that this population can change their lives and how the program helps this process.
- **Where possible, combine sanction and challenge hearings into regular status hearings, and use staffings to engage in the background discussions that are typically being conducted at the status hearings.** Currently, the majority of the important interactions in SCDIP take place outside of the status hearings. This is inconsistent with the drug court model, which focuses on status hearings as the central gathering for drug court rituals and interventions. Phase advancements and administration of rewards for phase advancement take place at the Progression and Commencement Ceremony. Sanctions are administered at sanction hearings, and challenges to the factual bases of sanctions occur at challenge hearings. This breaks up the flow of the process, delays the resolution of factual issues, delays the imposition of sanctions and rewards, and requires defendants and their attorneys to attend multiple court hearings.

Rewards and phase advancements could be administered at status hearings, and could be further ritualized at the Progression and Commencement Ceremony. Sanctions that stop short of a loss of liberty could be handled during status hearings, so long as defense counsel has had sufficient notice and opportunity to respond. Procedural due process does not necessarily require a separate hearing. Even jail sanctions and challenges to the factual bases underlying infractions could be handled after a relatively brief hearing the same day, with reasonably relaxed procedural formalities. These recommendations will be more feasible if there is an assigned defense attorney(s) who attends staffings and is apprised of upcoming sanctions.

An additional benefit to this arrangement is the “courtroom as theater” aspect of drug court sessions. The courtroom can be a theater or classroom where participants learn at an accelerated pace by observing the experiences of other participants. If all participants observe sanc-

tions, incentives and challenges, then the judge and team can use this variety of interactions to teach not only the participant in front of the judge, but also others in the courtroom awaiting their hearings.

- **Increase the frequency of status hearings.** Once the SCDIP has consolidated multiple types of court hearings, more time should be available to increase the frequency of status reviews. Best practices research has shown that programs that hold status review hearings every two weeks in the first phase have 33% greater reductions in recidivism than those that see participants less often. It is recommended that SCDIP participants attend status hearings once every two weeks during the first phase of the program. At a minimum, the program should consider having participants who are in need of more intense supervision attend hearings every two weeks. For example, those assessed as being high risk and in need of more intense supervision could appear weekly or every two weeks, whereas those who require only moderate to low supervision may attend hearings monthly. Although participants should start out by attending court sessions every two weeks, if they are in compliance with the program they may be incentivized by gradually reducing the frequency of court appearances.
- **Implement random drug testing.** For drug courts that perform urine drug testing less frequently than three times per week, research indicates the testing should be truly random and unexpected. Although a previous RAD study showed little difference between participants tested randomly compared to those tested on a twice-weekly regular schedule, it is possible that those on random testing were motivated to use drugs less often for the very reason that they were more likely to be detected. This is supported by findings in the focus groups, in which participants reported that they knew they could use drugs on certain days because there were four days between their last test and their next one. They further indicated they would find it more difficult to use drugs if the tests happened randomly. It is recommended that the SCDIP work to develop random testing procedures for all program phases. There are many models for best practices in this area and it is likely that the program will be able to identify one that fits its particular needs, particularly if this is focused on during the TA phase of this project.
- **Consider requiring participants to incur the cost of the test or receive some other sanction for challenging positive drug tests, if the confirmation test comes back positive.** Currently, there is no consequence for challenging a positive drug test which is subsequently confirmed by GCMS. As a result, participants often challenge the tests because they can do so without incurring any additional burden, resulting in a large number of participants on the challenge docket. This takes up the court's time and substantial resources must be expended to cover the cost of re-testing. Requiring participants to incur the costs of confirmed tests, or receive a sanction for failing to admit use, would discourage participants who know they have used drugs from challenging positive results. Consequences for dishonesty are commonly imposed in drug courts and are associated with better outcomes in treatment.
- **Implement a greater variety of sanctions and rewards.** In the hearings that were observed, a limited range of sanctions and rewards were routinely meted out, without much comment about the purpose and rationale behind the consequences. Programs tend to have better outcomes when they have at their disposal a wide range of graduated rewards and sanctions that they can apply in an escalating fashion over time. Also, it is a superior learning experience for the participants and court observers when they hear a clearly articulated explanation of what specific behavior elicited the sanction, why a particular type of sanction was chosen, and what the participant is expected to learn from the experience. Appendix B provides ex-

amples of possible incentives and sanctions, and Appendix C provides a sample sanction structure with ranges in sanctions for different types of infractions. The National Drug Court Institute (NDCI) maintains a list of sanctions and incentives that have been collected from around the country. In addition, NDCI offers one- and two-day trainings on how to most effectively apply sanctions, incentives and therapeutic consequences in drug courts.

- **Limit the use of jail as a sanction.** Jail can be an expensive use of resources. The program reports the use of jail as a sanction for each infraction beyond the third. If the recommendation to implement a greater variety of sanctions is put into practice, the consistent use jail after the 3<sup>rd</sup> infraction may naturally decrease. Although the option to use jail as a sanction is an integral component of an effective drug court (e.g., Carey et al., 2008), it is important to use jail judiciously both because of the expense and because it may not be the most effective sanction in some circumstances. For example, there are some goals that are extremely difficult for truly dependant individuals to accomplish during the early phases of the program, particularly abstinence. For addicted participants, positive drug tests in the first phase of the program should ordinarily receive treatment-oriented consequences, and not high-magnitude punitive sanctions, even after the third infraction. Using jail sanctions for drug use in the first phase may leave the court with no harsher alternatives (called a “ceiling effect”) before treatment has had a chance to take effect. However, even for participants with true drug dependence it can be appropriate to impose jail for some non-compliant behavior such as tampered urine specimens (as is done in SCDIP) or nonattendance at appointments as these are behaviors that even dependant participants can be expected to engage in immediately. It is recommended that the drug court team attend a scientifically informed training program on effective behavior modification techniques for drug defendants.
- **Increase the focus on rewards for participants who are doing well.** The program may want to discuss expanding its use of incentives and strength-based practices. Identifying the strengths of each participant and using them to build on can increase program engagement, identify individualized incentives to participation, and contribute to greater success. Incentives are key to shaping participant behavior, and it is important that the program find incentives that are meaningful to its participants. For ideas and examples, please see Appendix B, which is a sample list of rewards and sanctions used by drug courts across the United States. Other examples can be found at this BJA Web site: [http://www.dcpj.ncjrs.org/dcpj/dcpj\\_adult.html#ias](http://www.dcpj.ncjrs.org/dcpj/dcpj_adult.html#ias) and at the NADCP/NDCI website.
- **Consider assigning only one role to the PSO case managers.** It is unusual to have supervision staff serve so many different functions, including provision of treatment, pretrial supervision, and reviewing progress reports during court hearings. Research does not offer much guidance on the effects of such an approach, but there could be concerns about potential role conflicts, the PSOs’ competence in so many different functions, and whether the participants understand or object to this practice. The team may want to discuss the logistics of assigning some of the case managers to treatment and others to supervision, and/or contracting out some of the treatment services. Participants usually perceive and relate to their treatment counselors in a different way than they do the persons responsible for supervising their adherence to program requirements. Separating these roles might help foster the therapeutic relationship that is needed in drug treatment. It may also be a more effective way to make use of the PSOs’ education, interests and experience. Alternatively, if separating the roles is not feasible, the PSA leadership has discussed implementing some more specific training for all

PSO's on what is expected of them to help them prioritize their tasks and be more consistent in their work with participants across PSO's.

It is further recommended that the PSO liaison to the court not sit adjacent to the bench facing the audience, and not read out incident reports prior to the discussion of the cases. (The latter recommendation has already been implemented by the judge in that incident report are no longer read aloud in court). This arrangement gives a distinct impression that the PSO is a court officer primarily responsible for prosecuting matters. To facilitate the appearance (and reality) that the PSOs serve as treatment and supervision agents, it is recommended that they sit adjacent to the attorneys, and respond to inquiries from the judge rather than initiate case discussions.

- **Determine the amount of time PSOs should be spending performing their required duties, ensure those duties are clearly defined, and establish what size a PSO's caseload should be based on a 40 hour work week.** Given the multiple duties performed by the PSOs, the size of the group sessions/classes, and their expressed work stress levels, there are some indications that the caseloads for the PSOs may be too high. The PSA should work to better define the specific duties SCDIP PSOs are expected to perform, and determine what a reasonable amount of time is to perform those duties. This information can then be used to calculate a caseload size that would allow PSOs to accomplish their duties within a 40-hour work week. This issue is also related to the matter of treatment capacity, which is discussed further below.
- **Explore options for increasing treatment capacity.** PSA should consider contracting more treatment services outside of the agency, and determine whether it is possible to increase the number of PSA treatment counselors. Counseling groups that number substantially over 12 participants tend to be less effective and become more like classrooms than therapeutic interventions. With large numbers of participants, it is no longer feasible to process or discuss individual participants' experiences. Instead, the groups tend to focus on imparting information, which is not sufficient alone for behavioral change. During focus groups with the participants, several clients expressed surprise that the groups were intended to be therapeutic in nature, and instead referred to them as "classes". The large number of participants can also pose safety issues for treatment counselors trying to manage the interactions, and for group participants who may not have sufficient space to easily exit the room.
- **Consider waiting to increase the number of participants in the program until a determination has been reached about available resources.** Drug court team members have expressed a desire to increase the number of felony participants in the program. The drug court steering committee should determine whether the program has the appropriate resources for a larger number of (potentially more serious) clients, and whether all team members feel prepared to provide services to this expanded population. Once these determinations are made, there can be a better estimation of the true capacity of the program and what additional resources would be necessary to effectively treat a larger number of clients.
- **Train all team members on the drug court model, incentives and sanctions, collaboration and drug court roles.** Several of the current SCDIP staff members have not attended specialized drug court training workshops, or it has been many years since their last attendance at a workshop. The drug court model requires specialized training for all staff members to understand their new roles, and the behavioral science underlying effective treatment of addiction. Team member training has been demonstrated to produce significantly lower

recidivism and greater program completion rates, and to save criminal justice system resources that can then be used to support the processing of greater numbers of defendants (Carey, Finigan and Pukstas, 2008; Carey et. al., in process). The NDCI offers many excellent training opportunities, and is located nearby in a Virginia suburb of Washington D.C. In addition, the NADCP Annual Training Conference will be held in Washington D.C. this July. It is strongly encouraged that the SCDIP send as many staff members as possible to the training workshops available at this conference.

- **Extend judge tenure to the drug court.** It is recommended that the drug court continue to keep the judge on the drug court bench for at least 2 years and ideally longer, rather than having this be a frequently rotating assignment. When the position rotates, the judge should serve at least 2 years and the court should consider having the same judges rotate through the drug court assignment more than once, as judge experience and longevity are correlated with more positive participant outcomes and greater cost savings (Carey, Pukstas, & Finigan, 2008; Finigan, Carey and Cox, 2007).
- **Streamline data collection on program participants.** PSA's RAD has been modifying and updating the data collection process for SCDIP and other PSA programs. The drug court team should continue to work to improve collection and analysis of data about the drug court participants and use it for program reviews and planning, such as to inform the team about the types of participants who are most and least successful in the program. A list of data important for participant case management, program self-monitoring and evaluation is included in Appendix D.
- **Include representatives from community agencies on the SCDIP advisory committee.** The inclusion of community members, including law enforcement, in this group could result in expanded understanding of, and community support for, the program, and may result in additional services and facilities for the program.
- **For participants with felonies, continue considering the option of reducing the felonies to misdemeanors and consider expunging the participant's record (of the felony or misdemeanor that led to SCDIP participation) once a participant has successfully completed the program.** The SCDIP is encouraged to continue moving toward the goal of reducing felony charges to misdemeanors upon successful program completion. In addition, NPC would encourage SCDIP to expunge the felony or misdemeanor from the record of successful participants. Not only is this likely to function as a carrot to participate in drug court, but it may benefit society by graduating an individual who is more likely to be able to find employment because of the avoidance of a felony record.
- **Assign or hire a drug court coordinator who can help organize and ensure communication between all agency representatives on the team.** SCDIP does not currently have a Drug Court Coordinator. The drug court coordinator is often the "face" of the drug court, along with the judge. As such, it is essential that s/he be perceived as the professional who navigates and manages the clients through the program. Likewise, s/he should have the ability to bring all agency representatives together in a collaborative fashion for day-to-day procedures and policy decisions. In addition, the PSO case managers have little direct communication with the judge or attorneys. It is typically a drug court coordinator's responsibility to organize the various agencies so that they communicate about participants regularly. The role of coordinator could be a function of the PSO supervisor.



*“I want to tell you how drug court is, it’s an alright program, it keeps on your toes. The sanction, going to jail for 3 days, it gets to you, but other than that it’s an okay program.”*

–SCDIP Focus Group Participant

Overall, the SCDIP has implemented a program that follows many guidelines of the 10 Key Components of drug courts. The staff (including the judge, attorneys, and PSOs) should set aside time to discuss the findings and recommendations in this report, both to enjoy the recognition of its accomplishments and to determine how to respond to the recommendations provided.

The following section of the report presents each of the 10 Key Components with the SCDIP practices and recommendations in more detail as well as additional recommendations within each component.

# WASHINGTON D.C. SUPERIOR COURT DRUG INTERVENTION PROGRAM ASSESSMENT RESULTS

## 10 Key Components of Drug Courts Detailed Results

The Washington D.C. Superior Court Drug Intervention Program was founded in 1993 as one of the original drug court programs in the U.S. The program takes an average of 7 months to complete, and admits only pretrial participants. The program population consists of a wide variety of defendants, including those charged with misdemeanor offenses and non-violent felony charges. The program target population is described as adult pretrial defendants assessed as being in need of substance-related treatment.

### **KEY COMPONENT #1: DRUG COURTS INTEGRATE ALCOHOL AND OTHER DRUG TREATMENT SERVICES WITH JUSTICE SYSTEM CASE PROCESSING.**

*Assessment Question: Has an integrated drug court team emerged?*

The focus of this key component is on the integration of treatment services with traditional court case processing. Practices that illustrate an adherence to treatment integration include the role of the treatment provider in the drug court system and the extent of collaboration of all the agencies involved in the program.

In the original monograph on the 10 key components (NADCP, 1997), drug court is described as a collaboration between ALL members of a team made up of treatment, the judge, the prosecutor, the defense attorney, the coordinator, case managers, and other community partners. Each team member sees the participant from a different perspective. Participation from all partners contributes to the strength of this model and is one of the reasons it is successful at engaging participants and changing behavior. It is important to keep team members engaged in the process by ensuring they have input on drug court policies and feel their role and contribution is valued.

#### National Research

Previous research (Carey, Finigan and Pukstas, 2008; Carey et al., 2010; Carey et. al., in process) has indicated that greater representation of team members from collaborating agencies (e.g., defense attorney, treatment, prosecuting attorney) at team meetings and court hearings is correlated with positive outcomes for clients, including reduced recidivism and, consequently, reduced costs at follow-up. Greater law enforcement involvement significantly increases graduation rates, reduces recidivism and reduces outcome costs.

Research has also demonstrated that drug courts with fewer treatment agencies resulted in more positive participant outcomes, including higher graduation rates and lower recidivism costs (Carey et al., 2005; Carey et al., 2008; Carey et al., in process).

#### Washington, D.C. Drug Court Process

- Currently, there is not an assigned public defender to the drug court.
- The PSO case managers have little direct communication with the judge or attorneys. It is typically a drug court coordinator's responsibility to organize the various agencies so that they communicate about participants regularly. SCDIP does not currently have a Drug Court Coordinator.

- Drug court staff members do not hold staffings. The judge receives reports about participant progress from the Pretrial Service Officers (PSOs). Recommendations about responses to participant behavior are contained in the reports. The judge currently conforms closely to the program's four-option sanction grid.
- The drug court staff is composed of the Judge, Pretrial Service Officers (who provide treatment services, case management and supervision), the PSO supervisor, prosecuting attorney, multiple private and appointed defense attorneys, and the court clerk.
- The treatment counseling, case management and supervision roles are combined under the title of Pretrial Service Officer, also called the case manager.
- SCDIP does not currently hold case staffings (pre-court meetings in which participant progress and incentives and sanctions are discussed). Paper reports about participant progress are completed by the PSOs and given to the judge the day before court.
- The judge typically makes decisions about responses to behavior in the court hearings, based upon recommendations outlined in the PSO report.
- The Pretrial Services Agency (PSA) provides treatment to the SCDIP participants. PSA is also responsible for referring clients to other needed treatment services, such as detoxification and residential treatment, which are offered through contracted agencies.

#### Suggestions/Recommendations

- **The SCDIP is commended for using a single agency to oversee treatment and referrals.** Research has demonstrated that drug courts with one or two treatment agencies have nearly half the recidivism rate compared to drug courts with more treatment providers.
- **Assign a single or small number of consistent defense attorney(s) to the drug court program.** It is recommended that SCDIP have a dedicated defense attorney, or small group of defense attorneys, who are interested in and supportive of the drug court concept. Although defendants have the right to be represented by their own private attorneys, there are many downsides to this. The proceedings are delayed while defense lawyers are summoned to the courtroom to represent their clients. Several of the defense attorneys did not seem familiar with the drug court proceedings, or to have specialized knowledge about the nature of addiction or drug court processes. Their input seemed fairly minimal in many cases.

*“My lawyer didn’t know I was sanctioned until it was time to go to court. She said, ‘I told you, I told you. You shouldn’t have gone into this program.’”*

–SCDIP Focus Group Participant

It is generally a good idea to have a trained defense lawyer who is assigned to the drug court and can serve in an advisory capacity for participants and their private counsel. This regularly assigned defense attorney should attend all hearings and staffings to gain information about the program and offer input into the program's processes and operations. According to the National Association of Criminal Defense Lawyers (NACDL), defense attorneys as-

signed to drug courts should be experienced, well trained, and assigned to the program for more than one-year rotations.<sup>3</sup> This is also recommended by NADCP and NDCI.<sup>4</sup> Defense attorneys assigned to drug courts should also be present, whenever reasonably possible, at all staffings and court hearings. The defense attorney(s) should be trained in the drug court model and the defense attorney's role in drug court. Because continuity in team roles strengthens relationships, and consequently team functioning, the program should work to maximize tenure in this position to the extent feasible. Drug court training early on in the defense attorneys' tenure will help ensure understanding and acceptance of the non-traditional roles that distinguish drug courts from usual court processing.

- **Implement regular staffing meetings attended by the full team: judge, defense attorney, prosecutor, and PSO/treatment representative(s).** In these meetings, participants' progress should be discussed prior to the court sessions, and tentative decisions reached about potential responses to participant behavior. Each professional who interacts with the participants observes them from a unique perspective, at different times of the day or week, and under varied circumstances. This offers holistic, useful information for the team to draw upon in determining court responses that will change participant behavior. Representatives from all agencies should attend pre-hearing meetings for the entire team to be unified in its understanding of the cases, and to have the most current information about participants and the decisions arising from these meetings. These meetings also allow status review hearings to be more efficient and focused on the specific behaviors that need attention in court. Best practices research shows that programs that include all team members (judge, prosecutor, defense attorney, case manager, treatment provider) at staffing meetings have 33% lower recidivism (Carey et al., in process).
- **Invite a representative from law enforcement (police and/or sheriff) onto the team or as a member of the advisory committee.** The SCDIP could benefit from having a law enforcement (e.g., police or sheriff) representative on the drug court team or advisory committee. Research has shown that drug courts that include law enforcement as an active team member have significantly higher graduation rates, lower recidivism and higher cost savings (Carey et al., in process). Attendance of law enforcement at graduation and other SCDIP events can be gratifying for drug court participants to demonstrate their success and can be a learning experience for law enforcement as they see that this population can change their lives and how the program helps this process.
- **Assign or hire a drug court coordinator who can help organize and ensure communication between all agency representatives on the team.** SCDIP does not currently have a Drug Court Coordinator. The drug court coordinator is often the "face" of the drug court, along with the judge. As such, it is essential that s/he be perceived as the professional who navigates and manages the clients through the program. Likewise, s/he should have the ability to bring all agency representatives together in a collaborative fashion for day-to-day procedures and policy decisions. In addition, the PSO case managers have little direct communication with the judge or attorneys. It is typically a drug court coordinator's responsibility to

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<sup>3</sup>National Association of Criminal Defense Lawyers. (2009). *America's problem-solving courts: The criminal costs of treatment and the case for reform*. Washington DC: Author.

<sup>4</sup>NAT'L DRUG CT. INST., CRITICAL ISSUES FOR DEFENSE ATTORNEYS IN DRUG COURT (Monograph Series No. 4, 2003), available at [www.ALLRISE.org](http://www.ALLRISE.org).

organize the various agencies so that they communicate about participants regularly. The role of coordinator could be a function of the PSO supervisor.

**KEY COMPONENT #2: USING A NON-ADVERSARIAL APPROACH, PROSECUTION AND DEFENSE COUNSEL PROMOTE PUBLIC SAFETY WHILE PROTECTING PARTICIPANTS' DUE PROCESS RIGHTS.**

*Assessment Question: Are the Defense Attorney and Prosecuting Attorney satisfied that the mission of each has not been compromised by drug court?*

This key component is concerned with the balance of three important issues. The first issue is the nature of the relationship between the prosecution and defense counsel in drug court. Unlike traditional case processing, drug court case processing favors a non-adversarial approach. The second issue is to ensure the drug court remains responsible for promoting public safety. The third issue is to ensure the protection of participants' due process rights.

National Research

Research by Carey et al. (2008) and Carey et al. (2010) found that participation by the prosecution and defense attorneys in team meetings and at drug court status review hearings had a positive effect on graduation rates and recidivism<sup>5</sup> costs.

In addition, drug courts that allowed non-drug-related charges also showed lower recidivism costs. Allowing participants into the drug court program only post-plea was associated with lower graduation rates and higher investment<sup>6</sup> costs while drug courts that mixed pretrial and post-trial defendants had similar outcomes as drug courts that keep those populations separate (Carey, et. al., in process).

Washington, D.C. Drug Court Process

- The prosecuting attorney, defense attorneys and the judge may identify and refer potential participants to the program.
- The program accepts only pretrial participants.
- Defendants with current and prior violent charges are not allowed into the program.
- Prosecution and defense counsel are included as part of SCDIP. However, there are many private and public defense attorneys who participate at the drug court hearings. There is one dedicated State's Attorney for the drug court.
- The public defender's office typically handles more serious cases than those involving drug charges. Criminal Justice Act (CJA) defense attorneys are more likely to work on drug cases. However, there is always a defense attorney at sanction and challenge hearings, and generally this is a public defender.

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<sup>5</sup> Recidivism costs are the expenses related to the measures of participant outcomes, such as re-arrests, jail time, probation, etc. Successful programs result in lower recidivism costs, due to reductions in new arrests and incarcerations, because they create less work for courts, law enforcement, and other agencies than individuals who have more new offenses.

<sup>6</sup> Investment costs are the resources that each agency and the program overall spend to run the drug court, including program and affiliated agency staff time, costs to pay for drug testing, etc.

- Observations by NPC staff revealed that the defense attorneys who attend SCDIP hearings do not appear to have particular expertise or training on the drug court model, effective behavior modification techniques, or addiction science. Perhaps for this reason, they often did not appear to make persuasive or informative arguments on behalf of their clients (for example, to reduce the severity of sanctions).
- The absence of defense counsel membership or involvement on the SCDIP team seems to create unnecessary complexity and duplication of effort. Sanctions and challenges must take place at adversarial hearings separate from regular status hearings, which needlessly delays the resolution of matters, weakens behavioral contingencies, and duplicates efforts.
- Decisions about responses to participants' behavior are typically made during the drug court hearing. The defense attorneys and the previous SCDIP judge sometimes disagreed, presenting an adversarial relationship in front of the participants.
- The prosecutor was continuously present for all of the court hearings; however, his involvement in the proceedings was minimal and pro forma. The intended role and stature of the prosecutor in the courtroom was not clear to the assessment team during court observations.

#### Suggestions/Recommendations

- **Commendation: SCDIP has a single dedicated prosecuting attorney assigned to the program.** Best practices research indicates that this results in more positive participant outcomes, including lower recidivism and increased cost savings (Carey, Finigan and Pukstas, 2008). The SCDIP should continue to foster and expand this role as a part of the drug court team.
- **Assign a single or small number of consistent defense attorney(s) to the drug court program.** This recommendation is described in detail above under Key Component #1.
- **Have the drug court attorneys trained in the drug court model and non-adversarial approach.** In order to fully develop a non-adversarial team environment, attorneys are encouraged to attend training specific to the drug court model as well as role-specific training. Counsel roles on the drug court team differ from traditional attorney roles. As described under Key Component #1, according to the National Association of Criminal Defense Lawyers (NACDL), defense attorneys assigned to drug courts should be experienced, well trained, and assigned to the program for more than one-year rotations.<sup>7</sup> This is also recommended by NADCP and NDCI.<sup>8</sup> Defense attorneys assigned to drug courts should also be present, whenever reasonably possible, at all staffings and court hearings.

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<sup>7</sup>National Association of Criminal Defense Lawyers. (2009). *America's problem-solving courts: The criminal costs of treatment and the case for reform*. Washington DC: Author.

<sup>8</sup>NAT'L DRUG CT. INST., CRITICAL ISSUES FOR DEFENSE ATTORNEYS IN DRUG COURT (Monograph Series No. 4, 2003), available at [www.ALLRISE.org](http://www.ALLRISE.org).

**KEY COMPONENT #3: ELIGIBLE PARTICIPANTS ARE IDENTIFIED EARLY AND PROMPTLY PLACED IN THE DRUG COURT PROGRAM.**

*Assessment Questions: Are the eligibility requirements being implemented successfully? Are potential participants being placed in the program quickly? Is the original target population being served?*

The focus of this component is on the development and effectiveness of the eligibility criteria and referral process. Different drug courts have different eligibility and exclusion criteria. Some drug courts include criteria unrelated to the defendant's criminal history or addiction severity, such as requiring that participants admit to a drug problem or meet other "suitability" requirements. Research reveals that the most effective drug courts have clearly defined eligibility criteria. It is advisable to have these criteria written and provided to all potential referral sources. Drug courts also differ in how they determine if a client meets entry criteria. While drug courts are always targeting clients with a substance use problem, the drug court may or may not use a substance abuse screening instrument to determine eligibility. The same may apply to mental health screens. A screening process that includes more than just an examination of legal eligibility may take more time, but also results in more accurate identification of individuals who are appropriate for the services provided by the drug court.

Related to the eligibility process is how long it takes a drug court participant to move through the system from arrest to referral to drug court entry. The goal is to implement an expedient process. The length of time that passes between arrest to referral and referral to drug court entry, the key staff involved in the referral process, and whether there is a central agency responsible for treatment intake, are all factors that impact the expediency of program entry.

National Research

Carey et al. (2008) found that courts that accepted pre-trial defendants and included misdemeanors as well as felonies had both lower investment and outcome costs. Courts that accepted non-drug-related charges also had lower outcome costs, although their investment costs were higher.

Those courts that expected 20 days or less from arrest to drug court entry had higher savings than those courts that had a longer time period between arrest and entry (Carey et al., 2008).

Other research found that drug courts that included a screen for suitability and excluded participants who were found unsuitable had the same outcomes (e.g., the same graduation rates) as drug courts that did not screen for suitability and did not exclude individuals based on suitability (Carey & Perkins, 2008).

Washington, D.C. Drug Court Process

- The SCDIP program eligibility requirements are written. All referring team agencies have copies of the eligibility criteria.
- Defendants charged with misdemeanors or felonies are considered for participation in the program. Drug possession, property offenses, prostitution, forgery and status offenses are some of the charges that are accepted. Defendants charged with driving under the influence or violent offenses are not eligible unless allowed by the judge or USAO.
- The Addiction Severity Index (ASI) is used to assess participant level of treatment. A separate branch of the PSA, the Social Services Unit, is responsible for administering the

ASI and recommending level of treatment. The PSA has a custom risk assessment that they administer to participants for decisions about supervision level.

- SCDIP targets adult pretrial defendants assessed to need substance-use treatment.
- Typically, people are not sent directly to SCDIP upon arrest but go to general supervision until a defense attorney is ready to sign on to take the case in drug court – usually within a week to a month.
- The estimated time between arrest and referral to the drug court program is 31 to 60 days. The estimated time between drug court referral and program entry is 8 to 14 days, for a total estimated time from arrest to drug court entry of 39 to 74 days.
- Participants may exit the program any time, at their request. Some participants request re-admission once they have exited the program.
- The drug court’s capacity is reported to be approximately 375 participants. As of December 2010, the program had 350 active participants.
- The SCDIP would like to increase the program’s number of felony participants. Discussions center around offering defendants charged with a felony a more appealing incentive upon graduation, such as a reduction of the charge to a misdemeanor.

#### Suggestions/Recommendations

- **Commendation: SCDIP accepts a variety of charges into the program.** The best practices research has demonstrated that programs that accept a variety of charges have similar or better outcomes than programs that focus on a narrow range of drug charges (Carey et. al., in process).
- **Commendation: SCDIP is one of the few remaining pretrial/pre-plea drug court programs in the U.S.** The original intention behind the drug court model was to divert defendants pre-plea into intense supervision and treatment services. This model allows participants who successfully complete the program to continue their lives without having the conviction on their record. This allows these defendants a better opportunity to obtain employment and become contributing members of society. The SCDIP should continue to demonstrate this as a viable model for drug courts.

*“Wasn’t taking the chance of being locked up, that’s the reason I’m participating in this program. Other than that, what I learned from the program since I’ve been in it, it’s helping me in life experiences, in what I do.”*

–SCDIP Focus Group Participant

- **For participants with felonies, continue considering the option of reducing the felonies to misdemeanors and consider expunging the participant’s record (of the felony or misdemeanor that led to SCDIP participation) once a participant has successfully completed the program.** The SCDIP is encouraged to continue moving toward the goal of reducing felony charges to misdemeanors upon successful program completion. In addition,



NPC would encourage SCDIP to expunge the felony or misdemeanor from the record of successful participants. Not only is this likely to function as a carrot to participate in drug court, but it may benefit society by graduating an individual who is more likely to be able to find employment because of the avoidance of a felony record.

- **Consider waiting to increase the number of participants in the program until a determination is reached about available resources.** Drug court team members have expressed a desire to increase the number of felony participants in the program. The drug court steering committee should determine whether the program has the appropriate resources for a larger number of (potentially more serious) clients, and that all team members feel prepared to provide services to this expanded population. Once a determination about the amount of time PSOs should be spending doing their required duties is made, there can be a better estimation of the actual capacity of the program and what additional resources would be necessary to effectively treat a larger number of clients.
- **Consider ways to shorten arrest to entry time for eligible participants.** The program may want to conduct a review of the referral and assessment process to determine if there are places where time could be saved between arrest and entry into drug court. An analysis of case flow to identify bottlenecks or structural barriers, and points in the process where potential adjustments to procedures could facilitate quicker placement into drug court, would be helpful.

#### **KEY COMPONENT #4: DRUG COURTS PROVIDE ACCESS TO A CONTINUUM OF ALCOHOL, DRUG AND OTHER TREATMENT AND REHABILITATION SERVICES.**

*Assessment Question: Are diverse and specialized treatment services available?*

The focus of this key component is on the drug court's ability to provide participants with a range of treatment services appropriate to their clinical needs. Success under this component is highly dependent on success under the first component (i.e., ability to integrate treatment services within the program). Compliance with Key Component #4 requires having a range of treatment modalities or types of service available. However, drug courts still have decisions about how wide a range of treatment and habilitation services to provide, available levels of care, and which services are important for their target population.

#### National Research

Programs that have requirements for the frequency of group and individual treatment sessions (e.g., group sessions 3 times per week and individual sessions 1 time per week) have lower investment costs (Carey et al., 2005) and substantially higher graduation rates and improved recidivism costs (Carey et al., 2008). Clear requirements of this type may make compliance with program goals easier for participants and also may facilitate program staff in determining if participants have been compliant. They also ensure that participants are receiving the optimal dosage of treatment determined by the program as being associated with future success.

Research has found that clients who participate in group treatment sessions 2 or 3 times per week have better outcomes (Carey et al., 2005). Programs that require more than three treatment sessions per week may create a hardship for clients (such as with transportation, childcare, or employment), and may lead to clients having difficulty complying with program requirements and completing the program. Conversely, it appears that one or fewer sessions per week is too little

service to demonstrate positive outcomes. In addition, drug courts that include a focus on relapse prevention were shown to have higher graduation rates and lower recidivism than drug courts that did not (Carey et al., 2010).

The American University National Drug Court Survey (Cooper, 2000) showed that most drug courts have a single treatment provider agency. NPC, in a study of 18 drug courts in four different states (Carey et al., 2008), found that having a single provider or an agency that oversees all the providers is correlated with more positive participant outcomes, including lower recidivism and lower recidivism related costs. More recent research supported this finding, revealing that reductions in recidivism decrease as the number of treatment agencies increase (Carey, et. al., in process).

Discharge and transitional services planning is a core element of substance abuse treatment (SAMHSA/CSAT, 1994). The longer drug-abusing defendants remain in treatment and the greater the continuity of care following treatment, the greater their chance for success (e.g., Lurigio (2000).

#### Washington, D.C. Drug Court Process

- The Pretrial Services Agency provides outpatient and intensive outpatient treatment to most of the drug court participants. They refer participants out to contracted providers for residential and detoxification services. When caseload numbers are high, PSA case managers will sometimes refer participants to contracted vendors for outpatient and intensive outpatient treatment.
- The SCDIP program consists of four phases, and incorporates some individual and group counseling sessions in the first phase. Participants are required to attend 36 group sessions in the first phase if they are assigned to intensive outpatient treatment (IOP) and 20 group sessions if assigned to regular outpatient treatment. IOP participants are required to attend 36 groups in the 2<sup>nd</sup> and 3<sup>rd</sup> phases, and drop down to 16 sessions in the last phase. Non-IOP participants must attend 18 sessions in Phases 2 and 3, and 8 sessions in Phase 4. Participants are required to attend individual meetings with their PSO once monthly in the first phase. Frequency of attendance at individual sessions is determined on a case-by case basis in the last phase. Participants are not required to attend self-help groups. There are no sanctions from the judge for not attending a particular number of group sessions per week. Participants must continue in each phase until they have attended their assigned number of groups. Participants who do not attend sessions frequently spend longer over-all time in the program.
- The program has a phase when participants learn relapse prevention.
- *Services required for all participants are based on assessed level of care and include:* outpatient group treatment sessions, health education and gender-specific treatment sessions. *Services required for some participants include:* detoxification, outpatient individual treatment, residential treatment, mental health counseling and psychiatric services. *Services offered to participants but not required include:* language-specific or cultural-specific programs, self-help meetings, parenting classes, anger management classes, job training, employment assistance, family counseling, education assistance, housing assistance, health care, dental care, trauma recovery groups and nutrition groups.
- The court has twelve PSO case managers who see 350 participants. Group sessions can sometimes be as large as 40 participants or more. *Participants reported that they get the*

*most out of their Phase 4 groups, because they are so small. Groups in the earlier phases can sometimes have as many as 50 clients, according to SCDIP participants. One participant explained that the groups “are all big except the classes in Phase 4 because a lot of people don’t make it to Phase 4.” This participant said that in the smaller groups “you, get some stuff off your chest ... last night’s group was excellent. It was phase 4 and I got something out of it. I left feeling good.”*

Suggestions/Recommendations

- **Commendation: Continue coordinating treatment through a single organization.** Research shows that having one to two treatment providing agencies is significantly related to better program outcomes including higher graduation rates and lower recidivism (Carey, et. al., in process). The SCDIP should be commended for following best practices in this area, by having an umbrella organization that coordinates an array of treatment services.

*“I like the nutrition groups because what you’re really talking about is what that drug is doing to you. Fruit clears you out, milk cleans your system.”*

–SCDIP Focus Group Participant

- **Consider assigning only one role to the PSO case managers.** It is unusual to have supervision staff serve so many different functions, including provision of treatment, pretrial supervision, and reviewing progress reports during court hearings. Research does not offer much guidance on the effects of such an approach, but there could be concerns about potential role conflicts, the PSOs’ competence in so many different functions, and whether the participants understand or object to this practice. The team may want to discuss the logistics of assigning some of the case managers to treatment and others to supervision, and/or contracting out some of the treatment services. Participants usually perceive and relate to their treatment counselors in a different way than they do the persons responsible for supervising their adherence to program requirements. Separating these roles might help foster the therapeutic relationship that is needed in drug treatment. It may also be a more effective way to make use of the PSOs’ education, interests and experience. Alternatively, if separating the roles is not feasible, the PSA leadership has discussed implementing some more specific training for all PSO’s on what is expected of them to help them prioritize their tasks and be more consistent in their work with participants across PSO’s.

*“I like [my PSO]. She is no nonsense, down to earth. Shoots from the hip.”*

–SCDIP Focus Group Participant

- **Determine the amount of time PSOs should be performing their assigned duties, ensure those duties are clearly defined, and establish appropriate caseloads for the PSOs based on a 40 hour work week.** Given the multiple duties performed by the PSOs, the large size of the group sessions/classes, and the stress levels expressed by some of the PSOs, there are indications that the caseload for PSOs may be too high. The PSA should work to better define the specific duties the PSOs are expected to perform, and determine what a reasonable amount of time is required to perform those duties. This information can then be used to calculate a caseload size that would allow the PSOs to accomplish their duties within a 40 hour work week. This is also related to treatment capacity which is discussed further below.
- **Explore options for increasing treatment capacity.** PSA should consider contracting more treatment outside of the agency and also determine if it is possible to increase the number of PSA treatment counselors. Therapy groups that number over 12 participants can be ineffective and become classrooms, rather than therapeutic sharing groups. The large number can also pose safety issues for treatment counselors trying to facilitate the groups, and for group participants who may not have enough space to easily exit the room.

*Participants reported that they would like to see more interactive, addiction-related curricula. One focus group participant explained that, “[staff] have changed it so that they pick the subject and it doesn’t have anything to do with our recovery.” Another participant added that s/he would like, “more interactive curriculum – like the jeopardy game – that was cool. [It should be] motivating curriculum for people that want the help.”*

- **Implement an aftercare component.** Aftercare is a clinical best practice, supporting individuals in their transition to a drug-free lifestyle. The program should consider encouraging or requiring a routine aftercare phase or component after graduation, to support participants in their transition to the community and enhance their ability to maintain the behavioral changes they have accomplished during participation in SCDIP. Some courts have used alumni support groups as a cost-effective tool in aftercare planning. The SCDIP currently does have an alumni group with former treatment participants and one of their focuses is on job readiness and employment. However, it appears that not all participants know that this alumni group exists. *A focus group participant reported, “if they’re talking about helping us move on after the program, I think they need some formal kind of aftercare...to find out how a person is doing. We could come back one or two days out of the month on a volunteer basis.”* Some programs have required the participants in the last phase of the drug court to attend alumni meetings as a way to ensure continuing support for the participants as they transition out of the program.

*“It’s not easy. It’s really hard staying clean. The program helps, coming to groups. These groups help.”*

–SCDIP Focus Group Participant

## **KEY COMPONENT #5: ABSTINENCE IS MONITORED BY FREQUENT ALCOHOL AND OTHER DRUG TESTING.**

*Assessment Question: Compared to other drug courts, and to research findings on effective testing frequency, does this court test frequently?*

The focus of this key component is on the use of alcohol and other drug testing as a part of the drug court program. Drug testing is important both for court supervision and for participant accountability. It is generally seen as a key practice in participants' treatment process. This component encourages frequent testing but does not define the term "frequent" so drug courts develop their own guidelines on the number of tests required. Related to this component, the drug court must assign responsibility for these tests and the method for collection.

### National Research

Research on drug courts in California (Carey et al., 2005) found that drug testing that occurs randomly, at least 2 times per week, is the most effective model. If testing occurs more frequently (that is, more than 3 times per week), the random component becomes less important as it is difficult to find time to use in between frequent tests.

In addition to frequency of testing, it is important to ensure that drug testing is random, unexpected, and fully observed during sample collection, as there are numerous ways for individuals to predict when testing will happen and therefore use in between tests or submit a sample that is not their own. In focus groups with participants after they left their programs, individuals have reported many ways they were able to "get around" the drug testing process, including sending their cousin to the testing agency and bringing their 12-year-old daughter's urine to submit.

### Washington, D.C. Drug Court Process

- Drug testing is performed twice per week on Mondays and Thursdays in Phases 1 and 2, once per week on a designated day in Phase 3. In the last phase testing occurs randomly once per week. Participants are also required to submit to drug testing if they are suspected of being under the influence.
- Drug testing is performed through urinalysis (UAs) in-house and confirmation tests are sent to the on-site lab. Breath tests and oral swab tests are also used.
- A specialist is available to interpret lab test results in court.
- Participants are tested by their treatment provider and results are shared with the appropriate PSO. The judge receives a report that includes drug testing results.
- All UAs are fully observed by same-gendered staff. UAs are usually conducted by the treatment provider, case managers and the court.

### Suggestions/Recommendations

- **Commendation: Rapid results from drug testing.** Research has shown that obtaining drug testing results within 48 hours of submission is associated with higher graduation rates and lower recidivism (Carey et al., 2008). The SCDIP is commended for adhering to this best practice.

*“What keeps you clean? Drug testing twice a week.”*

–SCDIP Focus Group Participant

- **Commendation: The SCDIP has specialists available to interpret drug test results and to testify to the results in court.** Most drug courts do not have lab testing onsite and do not have staff trained on interpreting UA test results. The availability of trained staff at PSA to interpret test results allows the program to feel more confident in providing sanctions for proven use and reduces the possibility of sanctioning someone who truly did not use.
- **Implement random drug testing.** Since random drug testing is a best practice for programs testing two times per week or less, the program should consider implementing a random testing process. Although a prior RAD study showed little difference between participants tested randomly compared to those tested twice weekly on a regular schedule, it is possible that those on random testing were motivated to use less often because they were more likely to be caught. This is supported by findings in the focus groups, in which participants reported that they knew they could use on certain days because there were four days between their last test and their next one. They also reported that they would find it more difficult to use drugs if the tests were conducted randomly. It is strongly recommended that the SCDIP work to develop random testing procedures for all program phases. There are many models for best practices in this area and it is likely that the program will be able to identify one that fits its particular needs, particularly if this is focused on during the TA phase of this project.

*“[With random drug testing] if you doing something, it’s like playing Russian roulette. You drawing straws.”*

–SCDIP Focus Group Participant

#### **KEY COMPONENT #6: A COORDINATED STRATEGY GOVERNS DRUG COURT RESPONSES TO PARTICIPANTS’ COMPLIANCE.**

*Assessment Questions: Do program staff work together as a team to determine sanctions and rewards? Are there standard or specific sanctions and rewards for particular behaviors? Is there a written policy on how sanctions and rewards work? How does this drug court’s sanctions and rewards compare to what other drug courts are doing nationally?*

The focus of this component is on how the drug court team responds to client behavior during program participation, including how the team works together to determine an effective, coordinated response. Drug courts have established a system of rewards and sanctions that determine the program’s response to acts of both non-compliance and compliance with program requirements. This system may be informal and implemented on a case-by-case basis, a formal system applied evenly to all clients, or a combination of both. The key staff involved in decisions about

appropriate responses to participant behavior varies across courts. Drug court team members may meet and decide on responses, or the judge may decide on the response in court. Drug court participants may (or may not) be informed of the details on this system of rewards and sanctions, so their ability to anticipate a response from their team may vary significantly across programs.

### National Research

The drug court judge is legally and ethically required to make the final decision regarding sanctions or rewards, based on expert and informed input from the drug court team. All drug courts surveyed in an American University study reported that they had established guidelines for their sanctions and rewards policies, and nearly two-thirds (64%) reported that their guidelines were written (Cooper, 2000).

Drug courts that responded to infractions immediately, particularly by requiring participants to attend the next scheduled court session, had twice the cost savings. In addition, research has found that drug courts that had their guidelines for team responses to participant behavior written and provided to the team had higher graduation rates and higher cost savings due to lower recidivism (Carey et al., 2008; Carey et al., 2010).

### Washington, D.C. Drug Court Process

- Participants receive rewards, which are given in a standardized way for specific behaviors. Rewards are both intangible (such as applause and praise from the judge) and tangible (such as certificates, key chains and sobriety coins). The drug court team members are given written guidelines about sanctions and rewards or other responses to participant behavior that are to be used in the program.
- Sanctions are always standardized. There are four infraction levels and a corresponding sanction for each level. Jail is used as a sanction for the 4<sup>th</sup> infraction and any subsequent infractions.
- Participants are typically sanctioned for positive UA tests (except for alcohol – which is handled administratively by the PSO). Failure to attend treatment sessions is not sanctioned by the court but is addressed by the PSO case manager.
- Sanctions are imposed at the first court session after the non-compliant behavior, which can be as little as one day and as long as 1½ weeks if the sanction is challenged. A jail sanction can be delayed or split up to accommodate a participant’s work or family needs.
- Sanctions are graduated so that the severity increases with more frequent or more serious infractions. Program responses to participant non-compliance are reorientation, redirection groups, sitting in the jury box, and 3 days jail. In addition, participants can be returned to an earlier phase or to the beginning of their current phase.
- Sometimes the former judge followed recommendations for sanctions written in the PSO case manager reports. However, he also sent clients back to their case manager to discuss the recommendation.
- Most of the charges that led participants to drug court are dismissed upon graduation for those charged with a misdemeanor. Participants charged with a felony offense are likely to receive probation instead of incarceration upon graduation.
- The SCDIP holds a separate graduation event, the “Progression and Commencement Ceremony.” Program graduates and participants advancing from one phase to the next are

acknowledged at these ceremonies. All drug court participants are encouraged to attend, and attendance functions as an incentive because it is counted as completion of two group sessions. Progression Ceremony participants are given tangible rewards, such as certificates, key chains, sobriety coins, and books with inspirational themes.

### Suggestions/Recommendations

- **Commendation on Progression Ceremony.** The SCDIP held a model ceremony to acknowledge the successes of current participants as well as graduating participants. Rewards given were thoughtful and appropriate, attendance was impressive and the guest speaker was powerful, offering hope and inspiration to drug court participants and graduates alike. The court clerk sang an inspirational song and had a beautiful voice. The drug court team did an excellent job of reviewing the criteria for advancement and graduation, delivering concrete rewards, giving lavish praise and making informative and uplifting speeches.
- **Implement a greater variety of sanctions and rewards.** In the hearings that were observed, a limited range of sanctions and rewards were routinely meted out, without much comment about the purpose and rationale behind the consequences. Programs tend to have better outcomes when they have at their disposal a wide range of graduated rewards and sanctions that they can apply in an escalating fashion over time. Also, it is a superior learning experience for the participants and court observers when they hear a clearly articulated explanation of what specific behavior elicited the sanction, why a particular type of sanction was chosen, and what the participant is expected to learn from the experience. Appendix B provides examples of possible incentives and sanctions, and Appendix C provides a sample sanction structure with ranges in sanctions for different types of infractions. The National Drug Court Institute (NDCI) maintains a list of sanctions and incentives that have been collected from around the country. In addition, NDCI offers one- and two-day trainings on how to most effectively apply sanctions, incentives and therapeutic consequences in drug courts.
- **Limit the use of jail as a sanction.** Jail can be an expensive use of resources. The program reports the use of jail as a sanction for each infraction beyond the third. If the recommendation to implement a greater variety of sanctions is put into practice, the consistent use jail after the 3<sup>rd</sup> infraction may naturally decrease. Although the option to use jail as a sanction is an integral component of an effective drug court (e.g., Carey et al., 2008), it is important to use jail judiciously both because of the expense and because it may not be the most effective sanction in some circumstances. For example, there are some goals that are extremely difficult for truly dependant individuals to accomplish during the early phases of the program, particularly abstinence. For addicted participants, positive drug tests in the first phase of the program should ordinarily receive treatment-oriented consequences, and not high-magnitude punitive sanctions, even after the third infraction. Using jail sanctions for drug use in the first phase may leave the court with no harsher alternatives (called a “ceiling effect”) before treatment has had a chance to take effect. However, even for participants with true drug dependence it can be appropriate to impose jail for some non-compliant behavior such as tampered urine specimens (as is done in SCDIP) or nonattendance at appointments as these are behaviors that even dependant participants can be expected to engage in immediately. It is recommended that the drug court team attend a scientifically informed training program on effective behavior modification techniques for drug defendants.



- **Increase the focus on rewards for participants who are doing well.** The program may want to discuss expanding its use of incentives and strength-based practices. Identifying the strengths of each participant and using them to build on can increase program engagement, identify individualized incentives to participation, and contribute to greater success. Incentives are key to shaping participant behavior, and it is important that the program find incentives that are meaningful to its participants. For ideas and examples, please see Appendix B, which is a sample list of rewards and sanctions used by drug courts across the United States. Other examples can be found at this BJA Web site: [http://www.dcpj.ncjrs.org/dcpj/dcpj\\_adult.html#ias](http://www.dcpj.ncjrs.org/dcpj/dcpj_adult.html#ias) and at the NADCP/NDCI website.

“They could give me a penny – as long as you acknowledge what I’ve done.”

*-SCDIP Focus Group Participant*

- **Decide on rewards and sanctions as a team.** The drug court model involves an integrated team of professionals from various agencies working together to plan services and responses to participant behavior. Usually, this means that team members meet regularly to discuss participant progress and to agree on the most appropriate rewards and sanctions for each individual. A staffing meeting that includes representatives from all participating agencies would ensure that all members of the team have an opportunity to discuss and staff each participant prior to court. For those participants who are doing well, team members have an opportunity to agree on rewards. For those individuals whose behavior necessitates a treatment response and/or sanction, each team member will have the opportunity to contribute his/her unique perspective. During the drug court session, based on what the participant shares during court and on the team’s recommendation in staffing, the judge reserves the right to make the final decision and impart that decision to the participant. Because the SCDIP program has multiple PSO case managers, they can’t all be expected to attend staffing meetings to discuss rewards and sanctions. SCDIP PSOs already put their recommendations in their written report. We suggest that they highlight these recommendations to make it easy for the judge to find in the report and that they talk or email the PSO who serves as the court liaison about anything they particularly want to emphasize for specific participants.

*“I think it’s bad that the case manager only show up when you do something wrong. They need to have influence over the judge when you do something positive as well, not just when negative.”*

*-SCDIP Focus Group Participant*

- **Consider requiring participants to incur the cost of the test or receive some other sanction for challenging positive drug tests, if the confirmation test comes back positive.** Currently, there is no consequence for challenging a positive drug test which is subsequently confirmed by GCMS. As a result, participants often challenge the tests because they can do so without incurring any additional burden, resulting in a large number of participants on the challenge docket. This takes up the court’s time and substantial resources must be expended to cover the cost of re-testing. Requiring participants to incur the costs of confirmed tests, or

receive a sanction for failing to admit use, would discourage participants who know they have used drugs from challenging positive results. Consequences for dishonesty are commonly imposed in drug courts and are associated with better outcomes in treatment.

**KEY COMPONENT #7: ONGOING JUDICIAL INTERACTION WITH EACH PARTICIPANT IS ESSENTIAL.**

*Assessment Question: Compared to other drug courts, and to effective research-based practice, do this court's participants have frequent contact with the judge? What is the nature of this contact?*

The focus of this component is on the judge's role in drug court. The judge has an extremely important function for drug court in monitoring client progress and using the court's authority to promote positive outcomes. While this component encourages ongoing interaction, drug courts must still decide more specifically how to structure the judge's role. Courts need to determine the appropriate amount of courtroom interaction between the participant and the judge, including the frequency of status review hearings, as well as how involved the judge is to be with the participant's case. Outside of the court sessions, depending on the program, the judge may or may not be involved in team discussions, progress reports and policy making. One of the key roles of the drug court judge is to provide the authority to ensure that appropriate treatment recommendations from trained treatment providers are followed.

National Research

From its national data, the American University Drug Court Survey (Cooper, 2000) reported that most drug court programs require weekly contact with the judge in Phase I, contact every 2 weeks in Phase II, and monthly contact in Phase III. The frequency of contact decreases for each advancement in phase. Although most drug courts follow the above model, a substantial percentage reports less court contact.

Research in California, Oregon, Michigan, Maryland, Missouri and Guam (Carey et al., 2005; 2008; 2010; in process) demonstrated that, on average, participants have the most positive outcomes if they attend approximately one court appearance every 2 weeks in the first phase of their involvement in the program. Marlowe et al. (2006) also demonstrated that bi-weekly court sessions were more effective for high risk defendants, whereas less frequent sessions (e.g., monthly) were as effective for lower risk defendants.

In addition, programs in which the judge remained on the bench for at least 2 years had the most positive participant outcomes. It is recommended that drug courts either avoid fixed terms, or require judges with fixed terms to serve 2 years or more, and that courts with fixed terms consider having judges rotate through the drug court more than once, as experience and longevity are correlated with more positive participant outcomes and cost savings (Carey et al., 2005; Finigan, Carey, & Cox, 2007).

### Washington, D.C. Drug Court Process

- Participants appear at drug court sessions once per month throughout the program unless they are being sanctioned in which case they will appear more often.
- There is one judge at a time assigned to the drug court docket.
- The drug court judge rotates approximately every 2 years. Judges typically volunteer for drug court and a sitting judge may request to stay longer than 2 years.
- The former judge spent varying amounts of time during status review hearings speaking with drug court participants. The majority of the time in court was spent waiting for the defense attorney, performing paperwork and listening to the PSO court representative read the participant's PSO report. The current judge reads the PSO reports the day before the court sessions and now spends more time speaking directly to participants.
- The former drug court judge received training by other drug court judges. In addition, he has attended professional drug court-related conferences. The current drug court judge formerly served as the original SCDIP judge.
- At the time of the observations, during status review hearings the PSO court liaison sat adjacent to the bench facing the courtroom. The impression was that the PSO worked for the judge or the prosecution and not for treatment or supervision.
- The SCDIP currently has four different types of drug court hearings – status hearings, admission hearings, sanction hearings and sanction challenge hearings.
- From observation, it appears that the majority of the important interactions in SCDIP take place outside of status review hearings. Phase advancements (and administration of rewards for phase advancement) take place at the Progression and Commencement Ceremony. Sanctions are administered at sanction hearings, and challenges to sanctions occur at challenge hearings.
- In some instances, there was insufficient information available to make a final determination about the sanction. This underscores the need to have all relevant parties available at the status hearing or at a pre-staffing to provide the necessary information to the court.

### Suggestions/Recommendations

- **Commendation: The current judge has already made changes to the status review hearing process, which have increased efficiency and resulted in more positive interactions with clients.** The current judge was recently assigned to the drug court bench for the second time. (He was also the original drug court judge). His term started about half way through this assessment process. One change that this judge immediately put into effect was to read PSO reports on each client the day before the status review hearings, so he was already familiar with the case before speaking to the participant in court. In addition, the current judge has begun processes that discourage participants from requesting unnecessary challenge hearings. Both of these changes have resulted in several positive outcomes, including more efficient court hearings, less frequent challenge hearings, more positive and meaningful interactions with participants in court, and PSOs feeling their reports are valuable to the judge.

*“[It’s a] different environment, when you step in to courtroom. More of a serious note when you step in front of the judge. It does help, when you talk to your case manager but she doesn’t have authority. The judge has all the power over your case.”*

- **Where possible, combine sanction and challenge hearings into regular status hearings, and use staffings to engage in the background discussions that are typically being conducted at the status hearings.** Currently, the majority of the important interactions in SCDIP take place outside of the status hearings. This is inconsistent with the drug court model, which focuses on status hearings as the central gathering for drug court rituals and interventions. Phase advancements and administration of rewards for phase advancement take place at the Progression and Commencement Ceremony. Sanctions are administered at sanction hearings, and challenges to the factual bases of sanctions occur at challenge hearings. This breaks up the flow of the process, delays the resolution of factual issues, delays the imposition of sanctions and rewards, and requires defendants and their attorneys to attend multiple court hearings.

Rewards and phase advancements could be administered at status hearings, and could be further ritualized at the Progression and Commencement Ceremony. Sanctions that stop short of a loss of liberty could be handled during status hearings, so long as defense counsel has had sufficient notice and opportunity to respond. Procedural due process does not necessarily require a separate hearing. Even jail sanctions and challenges to the factual bases underlying infractions could be handled after a relatively brief hearing the same day, with reasonably relaxed procedural formalities. These recommendations will be more feasible if there is an assigned defense attorney(s) who attends staffings and is apprised of upcoming sanctions.

An additional benefit to this arrangement is the “courtroom as theater” aspect of drug court sessions. The courtroom can be a theater or classroom where participants learn at an accelerated pace by observing the experiences of other participants. If all participants observe sanctions, incentives and challenges, then the judge and team can use this variety of interactions to teach not only the participant in front of the judge, but also others in the courtroom awaiting their hearings.

- **Increase the frequency of status hearings.** Once the SCDIP has consolidated multiple types of court hearings, more time should be available to increase the frequency of status reviews. Best practices research has shown that programs that hold status review hearings every two weeks in the first phase have 33% greater reductions in recidivism than those that see participants less often. It is recommended that SCDIP participants attend status hearings once every two weeks during the first phase of the program. At a minimum, the program should consider having participants who are in need of more intense supervision attend hearings every two weeks. For example, those assessed as being high risk and in need of more intense supervision could appear weekly or every two weeks, whereas those who require only moderate to low supervision may attend hearings monthly. Although participants should start out by attending court sessions every two weeks, if they are in compliance with the program they may be incentivized by gradually reducing the frequency of court appearances.

- **Take full advantage of the court hearing as a learning experience for participants.** Because drug court hearings are a forum for educating all participants and impacting their behavior, it is recommended that the court require all participants in Phase 1 to stay for the entire hearing both to observe consequences (good and bad) and to see how some people who have as many challenges as they have are able to succeed and make positive, healthy choices and changes in their lives. In programs with longer court appearances, drug court judges typically offer a synopsis of each participant’s progress as gleaned from the staffing meeting and provides rewards or sanctions as appropriate with explanations for each.
- **Extend judge tenure to the drug court.** It is recommended that the drug court continue to keep the judge on the drug court bench for at least 2 years and ideally longer, rather than having this be a frequently rotating assignment. When the position rotates, the judge should serve at least 2 years and the court should consider having the same judges rotate through the drug court assignment more than once, as judge experience and longevity are correlated with more positive participant outcomes and greater cost savings (Carey, Pukstas, & Finigan, 2008). (OR: Lane Co. Adult Drug Court, 8/09)
- **The judge and other staff should engage in more current formal training.** Research has shown that drug courts that have formal training for all team members have higher graduation rates and lower recidivism (Carey, Finigan, & Pukstas, 2008; Carey, Waller, & Weller, 2009). We highly recommend that the judge (and other team members, see Key Component #9) attend formal drug court trainings when time and funding permit. The National Association of Drug Court Professionals’ Annual Training Conference is being held in Washington D.C. in July of this year and would be easily accessible for the team members to attend if time permits. There are also informal (and free) methods of training that can be engaged in more immediately. The National Drug Court Institute has training materials available at [http://www.dcpj.ncjrs.org/dcpj/dcpj\\_family.html](http://www.dcpj.ncjrs.org/dcpj/dcpj_family.html).

*“I think he a nice judge, a good judge, because he’s reasonable. I have 4 sentences and he gave me a break when I went, got the 4<sup>th</sup>. He gave me a break, he gave me 2 days.”*

–SCDIP Focus Group Participant

**KEY COMPONENT #8: MONITORING AND EVALUATION MEASURE THE ACHIEVEMENT OF PROGRAM GOALS AND GAUGE EFFECTIVENESS.**

*Assessment Question: Are evaluation and monitoring integral to the program?*

This component encourages drug court programs to monitor their progress towards their goals and evaluate the effectiveness of their practices. The purpose is to establish program accountability to funding agencies and policymakers as well as to themselves and their participants. Further, regular monitoring and evaluation provides programs with the feedback needed to make adjustments in program practices that will increase effectiveness. Finally, programs that collect data and are able to document success can use that information to gain additional funding and community support. Monitoring and evaluation require the collection of thorough and accurate records. Drug courts may record important information electronically, in paper files or both. Ideally, drug courts will partner with an independent evaluator to help assess their progress. Lastly, it is important to determine how receptive programs are to modifying their procedures in response to feedback.

National Research

Carey et al. (2008) and Carey et al. (2010) found that programs with evaluation processes in place had better outcomes. Four types of evaluation processes were found to save the program money with a positive effect on outcome costs: 1) maintaining electronic records that are critical to participant case management and to an evaluation, 2) the use of program statistics by the program to make modifications in drug court operations, 3) the use of program evaluation results to make modification to drug court operations, and 4) the participation of the drug court in more than one evaluation by an independent evaluator.

Washington, D.C. Drug Court Process

- The Washington D.C. Superior Court Drug Intervention Program collects data electronically for participant tracking. These data include treatment information entered by the PSOs. RAD at PSA has been working to improve the data system and to train staff on data definitions and appropriate data entry procedures. The SCDIP PSO's have been moved off of their old data system and are now all using the most recent case management system available at PSA.
- Data entry has improved markedly in the last one to two years. Before this time there was more inconsistency in where and how case management data was entered.
- According to stakeholders, more efficient data collection would strengthen the program. Prior to this fiscal year, data on participants who had entered the program, graduated or left unsuccessfully is either unavailable or inaccurate.
- The SCDIP program has been evaluated by an outside evaluator and has used the results to change program policies, procedures and practices.

Suggestions/Recommendations

- **Commendation: Staff at RAD within PSA has been working hard to update the data system and data entry procedures to make data entry more consistent, more specific to SCDIP program needs and more user friendly.** Due to these changes, the quality of the data entered has improved markedly.
- **Commendation: The SCDIP/PSA leadership has already begun the process of sharing the assessment results.** The team and steering committee members should continue to set aside time to discuss the overall findings and recommendations in this report, both to make a note of their accomplishments and to determine what program adjustments will be made. In addition, the assessment and past evaluation results can be very beneficial to the program if they are looking to apply for grants to fund additional positions, or for local funders/agencies to help them access resources. These results can document needs as well as show how well the program has performed in some areas.
- **Continue work to streamline data collection on program participants.** PSA's RAD has been modifying and updating the data collection process for SCDIP and other PSA programs. The drug court team should continue to work to improve collection and analysis of data about the drug court participants and use it for program reviews and planning, such as to inform the team about the types of participants who are most and least successful in the program. A list of data important for participant case management, program self-monitoring and evaluation is included in Appendix D.
- **Implement entry and exit interviews.** These interviews should include short-term performance outcomes – such as employment status, housing status, and education level/status at entry and exit (both graduates and non-graduates if possible). These data elements are included in the data list in Appendix D.

**KEY COMPONENT #9: CONTINUING INTERDISCIPLINARY EDUCATION PROMOTES EFFECTIVE DRUG COURT PLANNING, IMPLEMENTATION, AND OPERATIONS.**

*Assessment Question: Is this program continuing to advance its training and knowledge?*

This component encourages ongoing professional development and training of drug court staff. Team members need to be updated on new procedures and maintain a high level of professional and technical knowledge. Drug courts must decide who receives this training and how often. This can be a challenge during implementation as well as for courts with a long track record. Drug courts are encouraged to continue organizational learning and share lessons learned with new hires.

National Research

Carey et al. (2008; in process) found that drug court programs requiring all new hires to complete formal training or orientation, and requiring *all* drug court team members to attend regular trainings were associated with higher graduation rates and greater cost savings due to lower recidivism.

### Washington, D.C. Drug Court Process

- In addition to on-the-job training, the judge, PSO supervisor and some PSO case managers have received past training or education specifically on the drug court model.
- It was reported that PSO staff have received training specifically about the population of the program including age, gender, race/ethnicity and drugs of choice. Some have also received training specific to their roles, and on strength-based philosophy and practices.

### Suggestions/Recommendations

- **Train all team members on the drug court model, incentives and sanctions, collaboration and drug court roles.** Several of the current SCDIP staff members have not attended specialized drug court training workshops, or it has been many years since their last attendance at a workshop. The drug court model requires specialized training for all staff members to understand their new roles, and the behavioral science underlying effective treatment of addiction. Team member training has been demonstrated to produce significantly lower recidivism and greater program completion rates, and to save criminal justice system resources that can then be used to support the processing of greater numbers of defendants (Carey, Finigan and Pukstas, 2008; Carey et. al., in process). The NDCI offers many excellent training opportunities, and is located nearby in a Virginia suburb of Washington D.C. In addition, the NADCP Annual Training Conference will be held in Washington D.C. this July. It is strongly encouraged that the SCDIP send as many staff members as possible to the training workshops available at this conference.
- **Drug court attorneys should have training.** In order to fully develop a non-adversarial team environment, attorneys are encouraged to attend training specific to the drug court model as well as role-specific training. Counsel roles on the drug court team, in particular, differ from traditional attorney roles.

### **KEY COMPONENT #10: FORGING PARTNERSHIPS AMONG DRUG COURTS, PUBLIC AGENCIES, AND COMMUNITY-BASED ORGANIZATIONS GENERATES LOCAL SUPPORT AND ENHANCES DRUG COURT PROGRAM EFFECTIVENESS.**

*Assessment Question: Compared to other drug courts, has this court developed effective partnerships across the community?*

This component encourages drug courts to develop partnerships with other criminal justice, service, nonprofit and commercial agencies. For these collaborations to be true “partnerships,” regular meetings and collaborations with the partners should occur. If successful, the drug court will benefit from the expertise that resides in all of the partner agencies and participants will enjoy greater access to a variety of services. Drug courts must still determine what partners are available and decide with whom to partner and how formal to make these partnerships. Other important factors to weigh include who will be considered as part of the main drug court team; who will provide input primarily through policymaking; and what types of services will be available to clients through these partnerships.

### National Research

Responses to American University’s National Drug Court Survey (Cooper, 2000) show that most drug courts are working closely with community groups to provide support services for their drug court participants. Examples of community resources with which drug courts are connected



include self-help groups such as AA and NA, medical providers, local education systems, employment services, faith communities, and Chambers of Commerce.

In addition, Carey et al. (2005) and Carey et al. (2010) found that drug courts that had formal partnerships with community agencies that provide services to drug court participants had better outcomes than drug courts that did not have these partnerships.

#### Washington, D.C. Drug Court Process

- The drug court has developed and maintained relationships with organizations that can provide services for participants in the community and refers participants to those services when appropriate. Some of these services include employment assistance/job training, housing assistance and educational services.
- The drug court team does not include representatives from community agencies that work regularly with drug court participants.
- *Focus group comments about case managers were overwhelmingly positive. However, participants felt that access to ancillary services could be improved. They remarked that, “being in this program I thought I would get things like schooling...there would be certain benefits,” and “how can you get down here if you have no income to come down?” Participants report that bus or Metro tokens are not offered.*
- *Employment was an important piece of recovery to participants, who felt there “should be a partnership where [participants] get job readiness and SCDIP partner with certain companies. Some people come in here without skills.” Another person added that they would like to see employment assistance especially for people with felonies.*

#### Suggestions/Recommendations

- **Include representatives from community agencies on advisory committee.** The inclusion of community members in this group could result in expanded understanding of and community support for the program, and may result in additional services and facilities for the program.
- **Invite a representative from law enforcement (police and/or sheriff) onto the team (as suggested in Key Component #1).** The SCDIP could benefit from having a law enforcement (e.g., police or sheriff) representative on the drug court team. Research has shown that drug courts that include law enforcement as an active team member have higher graduation rates, lower recidivism and higher cost savings (Carey et al., 2010 and in process). Law enforcement representatives can learn to recognize participants on the street and can provide an extra level of positive supervision.

*“There should be a partnership where [participants] get job readiness help and they partner with certain companies [employers]. Some people come in here without skills.”*

–Focus Group Participant

## **ADDITIONAL RESOURCES**

The appendices at the end of this document contain resources to assist the program in making any changes based on the feedback and recommendation in this report. Appendix B contains a list of incentives and sanctions used in drug court programs across the country for use in developing new ideas for court and treatment responses that will change participant behavior in more positive directions. Appendix C provides an example from a currently operating drug court of their reward and sanction guidelines. Appendix D provides a list of data elements that programs should collect for case management, self-monitoring and evaluation. Other important and useful resources for drug courts are available at this Web address:

[http://www.dcpincjrs.org/dcpincjrs\\_adult.html#ias](http://www.dcpincjrs.org/dcpincjrs_adult.html#ias)

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## **APPENDIX A: SCDIP ASSESSMENT PROJECT STAFF**



**Shannon M. Carey, Ph.D.**

Dr. Shannon Carey, Vice President of Development and Senior Research Associate at NPC Research, has worked in the areas of criminal justice and substance abuse treatment for over 10 years, particularly in the area of drug courts and cost analyses. Her experience includes managing, designing, and implementing evaluations of programs related to substance abuse prevention and treatment, and adult criminal justice and juvenile justice policy. Altogether, she has been involved in performing process, outcome and/or cost evaluations in over 100 adult, juvenile, family and DWI drug courts in California, Indiana, Michigan, Oregon, Maryland, Missouri, Vermont, and Guam.

Dr. Carey has also performed several NIJ-funded projects including a detailed cost-benefit analysis of the drug court in Portland, Oregon; an examination of 10 years of data from the same Portland drug court; a study investigating changes in drug courts with the implementation of Prop 36 in California; and a paper exploring the 10 Key Components, outcomes, and cost in 18 drug courts in four different states. She is currently involved in building Web-based tools in California and Michigan that drug courts can use to determine their own costs and benefits. Dr. Carey has also acted as consultant for the Portland Police Bureau on economic crime (such as identity theft) and juvenile offender issues.

**Michael W. Finigan, Ph.D.**

Dr. Michael Finigan, Chairman of the Board and Owner of NPC Research, has been involved in research and evaluation in the criminal justice arena since 1986. He also serves as Director of Policy Research and Director of Development, and prior to June 2009 was President of NPC Research. Dr. Finigan's work has focused on substance abuse treatment and prevention for both adolescents and adults, particularly in criminal justice settings. He currently serves as Principal Investigator on a cost benefit evaluation of California drug courts.

Dr. Finigan's previous work includes a national study of Family Treatment Drug Courts, evaluation of the Multnomah County (Oregon) drug court, a study of drug courts and Medicaid managed behavioral health care, evaluation of the effects of Proposition 36 for Santa Clara County in California, an evaluation of CSAP-funded State Incentive Grant for the state of Oregon, an evaluation of a CMHS/CSAT-funded jail diversion programs for individuals with co-occurring disorders, and a study of a CSAT-funded juvenile justice network intervention for adolescents with substance abuse problems. Additionally, he directed an evaluation of the STOP Drug Court Diversion Program and an evaluation of societal outcomes and cost savings of drug and alcohol treatment in the state of Oregon.

Dr. Finigan earned a Ph.D. in Sociology in 1979, founded the Social Science Research Center at the University of Wisconsin in 1982, and was a professor in Sociology at Willamette University from 1984 to 1990. In 1990, he founded Northwest Professional Consortium, Inc. (NPC Research), an Oregon-based research and evaluation firm.

**Douglas B. Marlowe, J.D., Ph.D.**

Douglas B. Marlowe is the Chief of Science & Policy for the National Association of Drug Court Professionals. He is also a Senior Scientist at the Treatment Research Institute (TRI) and an Adjunct Associate Professor of Psychiatry at the University of Pennsylvania's School of Medicine. A lawyer and clinical psychologist, Dr. Marlowe's research focuses on the role of coercion in drug abuse treatment, the effects of drug courts and other diversion programs for drug-abusing offenders, and behavioral treatments for substance abusers and criminal offenders. He has published over 130 professional articles and book chapters on the topics of crime and drug abuse. He is the Editor-in-Chief of the *Drug Court Review* and is on the editorial board of *Criminal Justice & Behavior*.

**Theresa Herrera Allen, Ph.D.**

Theresa Herrera Allen, joined NPC Research in April 2006 for the Washington County Oxford House evaluation. The project examined the impact (including improvements in self-sufficiency and community adjustment along with reductions in subsequent drug use and criminal offending) and cost-benefit of transitional housing in a local community corrections system. Since then, she has worked on evaluations of drug courts in Oregon and Maryland, substance abuse treatment and suicide prevention in Native American communities, college access programs in Oregon high schools and child abuse prevention programs. Dr. Herrera Allen has more than 10 years experience as a research assistant and evaluator for programs related to substance abuse, at-risk youth and gang intervention.

Dr. Herrera Allen earned a Master of Arts in Sociology from the University of Southern California, with an emphasis in Criminology. In April 2007 she completed her doctoral degree in Sociology at USC.



**APPENDIX B: LIST OF POSSIBLE PROGRAM REWARDS  
AND SANCTIONS**



## Examples of Rewards and Sanctions Used By Other Drug Courts

### Drug Court Responses to Participant Behavior (Rewards and Sanctions) Ideas and Examples

The purpose of rewards and sanctions in drug court programs is to help shape participant behavior in the direction of drug court goals and other positive behaviors. That is, to help guide offenders away from drug use and criminal activity and toward positive behaviors, including following through on program requirements. Drug court teams, when determining responses to participant behavior, should be thinking in terms of behavior change, not punishment. The questions should be, “What response from the team will lead participants to engage in positive, pro-social behaviors?”

Sanctions will assist drug court participants in what *not* to do, while rewards will help participants learn they *should* do. Rewards teach that it can be a pleasant experience to follow through on program requirements and in turn, to follow through on positive life activities. It is important to incorporate both rewards and sanctions.

Below are some examples of drug court team responses, rewards and sanctions that have been used in drug courts across the United States.

#### **Rewards**

##### *No cost or low cost rewards*

- ❑ Applause and words of encouragement from drug court judge and staff
- ❑ Have judge come off the bench and shake participant’s hand.
- ❑ Photo taken with Judge
- ❑ A “Quick List.” Participants who are doing well get called first during court sessions and are allowed to leave when done.
- ❑ A white board or magnetic board posted during drug court sessions where participants can put their names when they are doing well. There can be a board for each phase so when participants move from one phase to the next, they can move their names up a phase during the court session.
- ❑ Decrease frequency of program requirements as appropriate—fewer self-help (AA/NA) groups, less frequent court hearings, less frequent drug tests.
- ❑ Lottery or fishbowl drawing. Participants who are doing well have their names put in the lottery. The names of these participants are read out in court (as acknowledgement of success) and then the participant whose name is drawn receives a tangible reward (candy, tickets to movies or other appropriate events, etc.)
- ❑ Small tangible rewards such as bite size candies.
- ❑ Key chains, or other longer lasting tangible rewards to use as acknowledgements when participants move up in phase.
- ❑ More visitation with children

### *Higher cost (generally tangible) rewards*

- ❑ Fruit (for staff that would like to model healthy diet!)
- ❑ Candy bars
- ❑ "The Basket" which is filled with candy bars—awarded drug court session when participant is doing *everything* "right"
- ❑ Coffee bucks
- ❑ Gift certificates for local stores.
- ❑ Scholarships to local schools.
- ❑ Tokens presented after specified number of clean days given to client by judge during court and judge announces name and number of clean days.
- ❑ Swimming pass to local pool

### ***Treatment Responses to (and Sanctions for) Non-Compliant Behavior***

- ❑ Increasing frequency of self-help groups, (for example, 30 AA/NA meetings in 30 days or 90 AA/NA meetings in 90 days). [Treatment Response]
- ❑ Increasing frequency of treatment sessions [Treatment Response]
- ❑ Residential treatment. [Treatment Response]
- ❑ Require participants to write papers or paragraphs appropriate to their non-compliant behavior and problem solve on how they can avoid the non-compliant behavior in the future.
- ❑ "Showing the judge's back." During a court appearance, the judge turns around in his or her chair to show his/her back to the participants. The participant must stand there waiting for the judge to finish their interaction. (This appears to be a very minor sanction but can be very effective!)
- ❑ Being reprimanded by the judge
- ❑ "Sit sanctions." Participants are required to come to drug court hearings (on top of their own required hearings) to observe. Or participants are required to sit in regular court for drug offenders and observe how offenders are treated outside of drug court.
- ❑ Increasing frequency of drug court appearances
- ❑ One day or more in jail. (Be careful, this is an expensive sanction and is not always the most effective!)
- ❑ "Impose/suspend" sentence. The judge can tell a participant who has been non-compliant that he or she will receive a certain amount of time in jail (or some other sanction) if they do not comply with the program requirements and/or satisfy any additional requirements the staff requests by the next court session. If the participant does not comply by the next session, the judge imposes the sentence. If the participant does comply by the next session, the sentence is "suspended" and held over until the next court session, at which time, if the participant continues to do well, the sentence will continue to be suspended. If the participant is non-compliant at any time, the sentence is immediately imposed.
- ❑ Community service. The best use of community service is to have an array of community service options available. If participants can fit their skills to the type of service they are providing and if they can see the positive results of their work, they will have the opportunity to learn a positive lesson on what it can mean to give back to their communities.

Examples of community service that other drug courts have used are: helping to build houses for the homeless (e.g., Habitat for Humanity), delivering meals to hungry families, fixing bikes or other recycled items for charities, planting flowers or other plants, cleaning and painting in community recreation areas and parks. Cleaning up in a neighborhood where the participant had caused harm or damage in the past can be particularly meaningful to the participants.

- ❑ Rather than serve jail time, or do a week of community service, the participant works in the jail for a weekend.



## **APPENDIX C: SAMPLE OF DRUG COURT REWARD AND SANCTION GUIDELINES**





## SANCTIONS

### I. Testing positive for a controlled substance

- Increased supervision
- Increased urinalysis
- Community service
- Remand with a written assignment
- Incarceration (1 to 10 days on first; 1 week on second)
- Discharge from the program

#### TREATMENT RESPONSE:

- Review treatment plan for appropriate treatment services
- Write an essay about your relapse and things you will do differently
- Write and present a list of why you want to stay clean and sober
- Write and present a list of temptations (people, objects, music, and locations) and what you plan to put in their place.
- Make a list of what stresses you and what you can do to reduce these stresses.
- Residential treatment for a specified period of time (for more than 2 positive tests)
- Additional individual sessions and/or group sessions
- Extension of participation in the program
- Repeat Program Phase

#### GOAL:

- Obtain/Maintain Sobriety

### II. Failing or refusing to test

- Increased supervision
- Increased urinalysis
- Remand with a written assignment
- Increased court appearances (If in Phase II-IV)
- Incarceration (1 to 10 days on first; 1 week on second)
- Discharge from the program

#### TREATMENT RESPONSE:

- Review treatment plan for appropriate treatment services
- Residential treatment for a specified period of time
- Extension of participation in the program
- Repeat Program Phase

**GOAL:**

- Obtain/Maintain Sobriety and Cooperation to comply with testing requirements

**III. Missing a court session without receiving prior approval for the absence**

- Community service
- "Jury-box duty"
- Remand with a written assignment
- Increased court appearances
- Extension of participation in the program

**GOAL:**

- Responsible Behavior and Time Management

**IV. Being late to court, particularly if consistently late with no prior approval from the Court or Case Manager**

- Community service
- "Jury-box duty"
- Increased court appearances
- Extension of participation in the program

**GOAL:**

- Responsible Behavior

**V. Failure to attend the required number of AA/NA meetings or support group meetings**

- Increased supervision
- Community service
- "Jury-box duty"
- Increased court appearances
- Extension of participation in the program
- Written Assignment

**TREATMENT RESPONSE:**

- Review treatment plan for appropriate treatment services
- Written assignment on the value of support groups in recovery.
- Additional individual sessions and/or group sessions

**GOAL:**

- Improved Treatment Outcome

## **VI. Failure to attend and complete the assigned treatment program**

- Increased supervision
- Community service
- Remand with a written assignment
- Extension of participation in the program
- Repeat Program Phase

### **TREATMENT RESPONSE:**

- One or more weeks set back in previous Phase for additional support
- Attend Life Skills Group
- Residential treatment for a specified period of time (consistent occurrence)
- Additional individual sessions and/or group sessions

### **GOAL:**

- Improved Treatment Outcome

## **VII. Demonstrating a lack of response by failing to keep in contact and/or cooperate with the Case Manager or Counselor**

- Community service
- "Jury-box duty"
- Remand with a written assignment
- Extension of participation in the program
- Repeat Program Phase

### **TREATMENT RESPONSE:**

- Make up missed sessions
- Review treatment plan to ensure clients needs are being met
- Additional individual sessions and/or group sessions

### **GOAL:**

- Demonstrate respect and responsibility

## **VIII. Convicted of a new crime**

- Increased supervision
- Remand with a written assignment
- Increased court appearances
- Extension of participation in the program
- Repeat Program Phase
- Incarceration

- Discharge from the program

**TREATMENT RESPONSE:**

- Additional individual sessions and/or group sessions

**GOAL:**

- To promote a crime free lifestyle

**IX. Violence or threats of violence directed at any treatment staff or other clients**

- Discharge from the program

**X. Lack of motivation to seek employment or continue education**

- "Jury-box duty"
- Remand with a written assignment
- Increased court appearances
- Extension of participation in the program

**TREATMENT RESPONSE:**

- Additional individual sessions and/or group sessions

**GOALS:**

- Graduation and Job Preparedness

**XI. Refusing to terminate association with individuals who are using**

- Increased supervision
- Community service
- "Jury-box duty"
- Increased court appearances
- Extension of participation in the program
- Written Assignment

**TREATMENT RESPONSE:**

- Additional individual sessions and/or group sessions

**GOALS:**

- Develop a social network with clean and sober friends

## **XII. Failure to comply with court directives**

- Increased supervision
- Community service
- "Jury-box duty"
- Remand with a written assignment
- Increased court appearances
- Extension of participation in the program
- Repeat Program Phase
- Remand into custody all free time
- Written assignment

### **GOALS:**

- Develop a social network with clean and sober friends

## **XIII. Lack of motivation to seek safe housing**

- Increased supervision
- Community service
- Written assignment

## **XIV. Forging documentation required by the court for proof of compliance**

- Incarceration
- Discharge from the program

(If it appears to the prosecuting attorney, the court, or the probation department that the defendant if convicted of a misdemeanor that reflects the defendant's propensity for violence, or the defendant is convicted of a felony, or the defendant has engaged in criminal conduct rendering him or her unsuitable for participation in Drug Treatment Court, the prosecuting attorney, the court on its own, or the probation department may make a motion to terminate defendant's conditional release and participation in the Drug Treatment Court. After notice to the defendant, the court shall hold a hearing. If the court finds that the defendant has been convicted of a crime as indicated above, or that the defendant has engaged in criminal conduct rendering him or her unsuitable for continued participation in Drug Treatment Court, the court shall revoke the defendant's conditional release, and refer the case to the probation department for the preparation of a sentencing report.)

## REWARDS

If the participant complies with the program, achieves program goals and exhibits drug -free behavior, he/she will be rewarded and encouraged by the court through a series of incentives. Participants will be able to accrue up to 50 points to become eligible to receive a reward. After accruing 50 points, the participant will start over in point accrual until he/she reaches 50 points again. The points are awarded as follows:

<b>Achievement</b>	<b>Points Awarded</b>
• Step Walking (12 step)	3
• All required AA/NA Meetings Attended	1
• AA/NA Sheet turned in on time	1
• Attended all required treatment activities at the program	1
• Phase Change	5
• 3 Month Chip	2
• 6 Month Chip	4
• 9 Month Chip	6
• 1 year Chip	8
• Obtained a job (part time)	3
• Obtained a job (full time)	5
• Graduated from Vocational Training	5
• Obtained a GED	5
• Graduated from Junior College	5
• Obtained a Driver's License	4
• Bought a Car	4
• Obtained Safe Housing (Renting)	4
• Obtained Safe Housing (Buying)	5
• Taking Care of Health Needs	3
• Finding A Sponsor	3
• Helping to interpret	1
• Promotion/raise at work	3
• Obtaining MAP/Medi-Cal/Denti-Cal	3
• Parenting Certificate	2
• Judge's Discretion	1 to 5

Incentive items that are given to the participants (upon availability) include but are not limited to:

- Bus passes
- A donated bicycle that may be kept for the duration of time in Drug Court. After completion of drug court, the bicycle must be returned. (A terminated participant must return the bicycle forthwith.)
- Pencils, key chains: awarded for Phase changes
- Personal hygiene products
- Framing any certificate of completion from other programs, or certificates showing length of sobriety
- Haircuts
- Eye Wear
- Movie Passes
- Food Coupons





## **APPENDIX D: LIST OF DATA ELEMENTS FOR PROGRAM SELF-MONITORING**



## NPC Data Elements Worksheet

### DRUG COURT PROGRAM DATA

	Variable/Data element	Where located/ who collects? (electronic/ written records?)	When agency began collecting or plans to begin?	Notes
	<b>DEMOGRAPHICS &amp; ID</b> (collect from all possible sources)			
1a	Name			
2	SSN, state ID, FBI ID, DL#, DC case number, state TX number			
2a	○ Birth Date			
2b	○ Gender			
2c	○ Race/Ethnicity			
	<b>CLIENT INFORMATION</b>			
2d	○ Employment status at drug court entry			
2e	○ Employment status at drug court exit			
2f	○ Highest grade of school completed at time of drug court entry			
2g	○ Number and ages of children			
2h	○ Housing status at entry			
2i	○ Housing status at exit			
2j	○ Income at entry (if self-supporting)			
2k	○ Income at exit (if self-supporting)			
2l	○ Other demographics			

	<b>Variable/Data element</b>	<b>Where located/ who collects? (electronic/ written records?)</b>	<b>When agency began collecting or plans to begin?</b>	<b>Notes</b>
	<b>DRUG COURT SPECIFIC DATA</b>			
3	Drug court entry date			
4	Drug court exit date			
5	Date of drug court eligible arrest			
5a	Charge for DC arrest			
5b	Arresting agency			
6	Court case number for case leading to drug court participation			
7	Date of referral to drug court program and referral source			
8	Drug court status on exit (e.g., graduated, revoked, terminated, dropped out)			
9	If participation in drug court is revoked or terminated, reason			
10	Dates of entry into each phase			
11	Criminal/Juvenile justice status on exit (e.g., on probation, charge expunged, etc.)			
12	Dates of UAs			
13	Dates of positive UAs			

	<b>Variable/Data element</b>	<b>Where located/ who collects? (electronic/ written records?)</b>	<b>When agency began collecting or plans to begin?</b>	<b>Notes</b>
14	Dates of other drug tests			
15	Dates of other positive drug tests			
15a	Agency provided test results			
16	Drugs of choice (primary and secondary)			
17	Dates of drug court sessions			
18	Attitude toward treatment/readiness to change at entry			
19	Dates of services received with types of service received (see examples below) [Note: If dates not available, at least need different types of services rec'd and approximate time periods or the # of times the individual received a particular service].			
19a	○ Group A&D sessions			
19b	○ Individual A&D sessions			
19c	○ Mental health services			
19e	Agency providing TX			
20	Mental health or A&D diagnoses			
21	Aftercare services (dates and types), if applicable			

	<b>Variable/Data element</b>	<b>Where located/ who collects? (electronic/ written records?)</b>	<b>When agency began collecting or plans to begin?</b>	<b>Notes</b>
22	Dates of re-arrests/re-referrals during program participation			
23	Charge(s)/allegation(s) associated with re-arrests/re-referrals during program participation			
24	Outcome(s) of re-arrests/re-referrals (conviction, dismissed, etc.) during program participation			
25	Other noncompliant behavior (types, dates) during program participation			
26	Probation violations during program participation			
27	Rewards and sanctions (dates, types, and duration)			
27a	Detention/jail time as a sanction			