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Standards and Research

The Operationalization of the Ten Key Components

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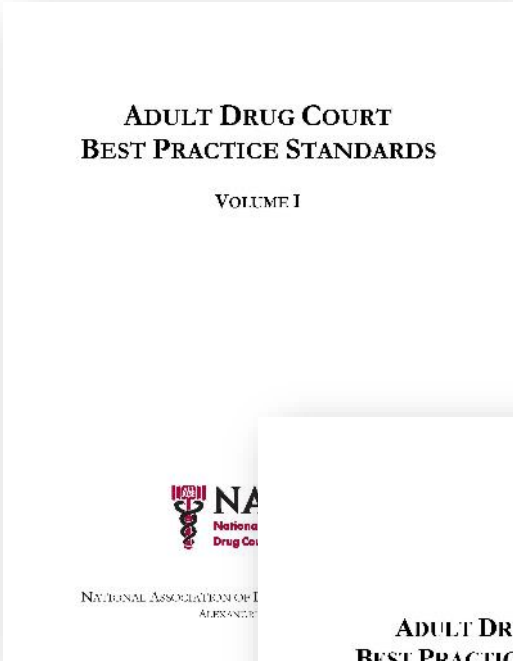
Disclosure

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Course Description

“The NADCP Adult Drug Court Best Practice Standards outline all the practices associated with decreased recidivism, cost savings, and other positive outcome. Are there practices that are so essential to the drug court model that failure to adhere to the Standards in these areas disqualifies the program from being a legitimate treatment court?”



ADULT DRUG COURT
BEST PRACTICE STANDARDS

VOLUME I



NATIONAL ASSOCIATION OF
ALEXANDRIA, VIRGINIA



ADULT DRUG COURT
BEST PRACTICE STANDARDS

VOLUME II

NATIONAL ASSOCIATION OF DRUG COURT PROFESSIONALS
ALEXANDRIA, VIRGINIA

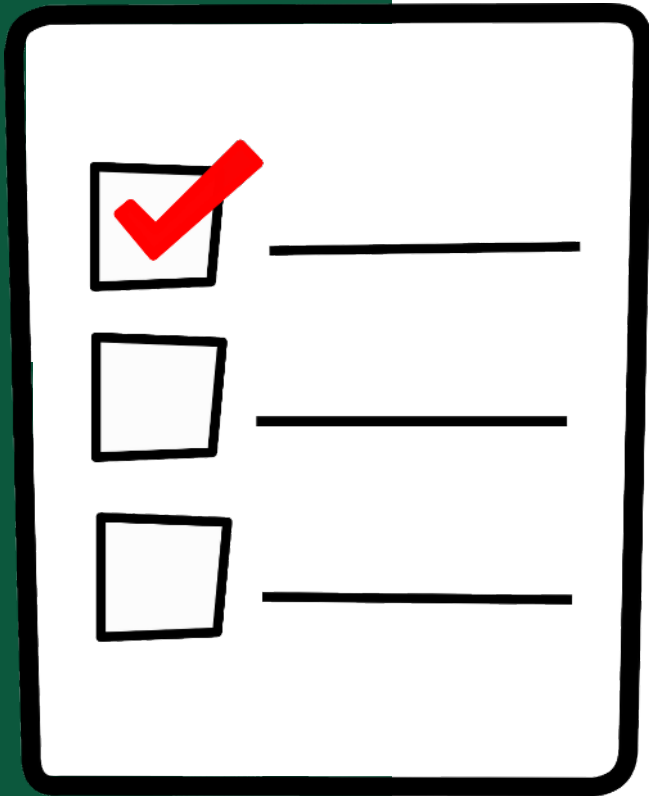


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The Answer is:



Objectives



- **Identify and adhere to best practices in the management of a treatment court**
- **Learn the research that supports the Standards**
- **Focus on:**
 - Judge's role
 - Partnership with supervision



Activity

Coordinator is in charge

- Introduction
- Identify discipline
- Answer questions
- Give to coordinator
- As a team, decide on one question and develop information to
- Report out

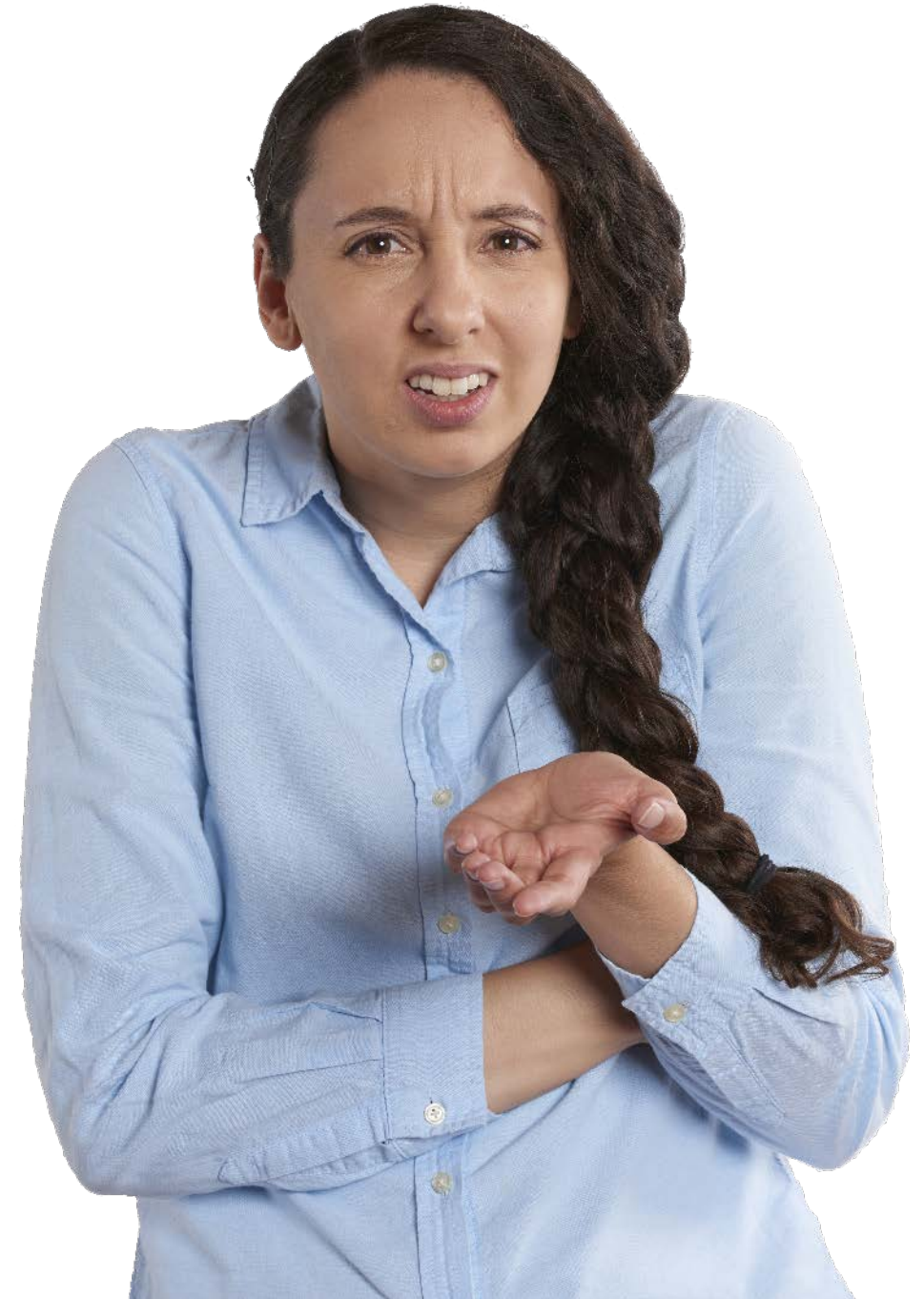




The Standards Operationalize

The Key Components

How can you incorporate best practices into your treatment court procedures?



Ten Key Components



Best Practice Standards

ADULT DRUG COURT BEST PRACTICE STANDARDS

VOLUME I



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ALEXANDRIA, VIRGINIA

ADULT DRUG COURT BEST PRACTICE STANDARDS

VOLUME II

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The Best Practice Standards are based on which of the following?



- A. Antidotal reports on effective practices in local treatment courts
- B. Reliance on treatment services that are available in the local community
- C. Supervision focused on catching the participant and holding the participant immediately accountable
- D. Learning how to make do with what you have
- E. Practices supported by reliable and convincing evidence that the practice improves outcomes



Key Component #1: Justice and Treatment Integration

STANDARDS

- 2: Equity and inclusion
- 3: Roles and responsibility of the judge
- 4: Incentives, sanctions, and therapeutic adjustments
- 5: Substance use disorder treatment
- 8: Multidisciplinary team
- 9: Census and caseload

TAKE AWAY

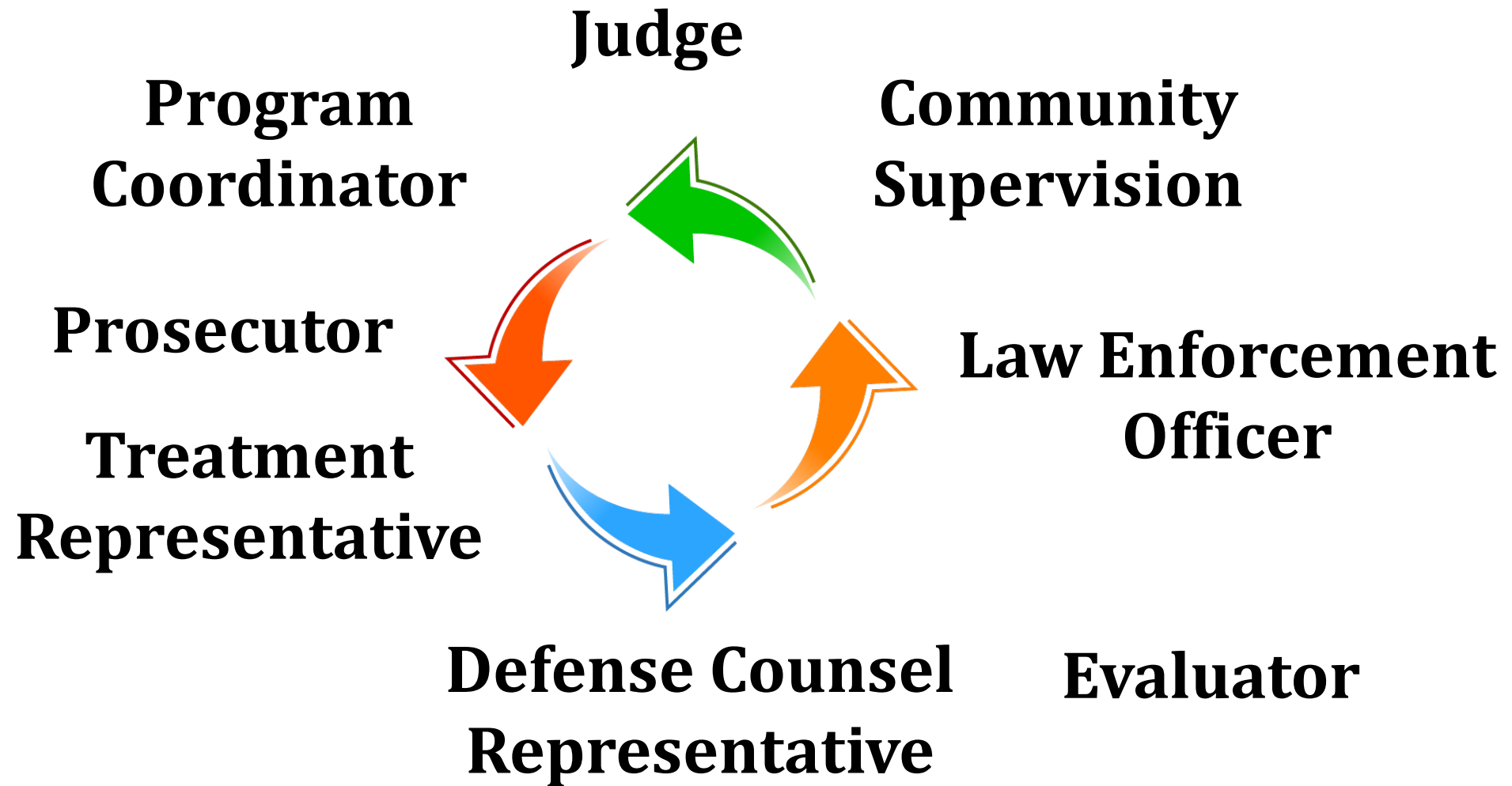
- Promote recovery through a coordinated response by utilizing a team approach.
- Planning
- Documentation

Key Component #1: Best Practices



- Team MOU specifying team roles, what info will be shared
- Team has a Policy & Procedure manual
- All key team members attend staffing and court: judge, prosecutor, defense attorney, treatment, law enforcement, supervision and coordinator
 - Collaboration
 - Legal requirements
 - Effect on participant outcomes
- Team communicates via email throughout the week
 - Promotes behavior modification, due process

Team Composition



Prosecutor - Research



Recidivism reduction and cost savings relative to courts that do not follow these practices.



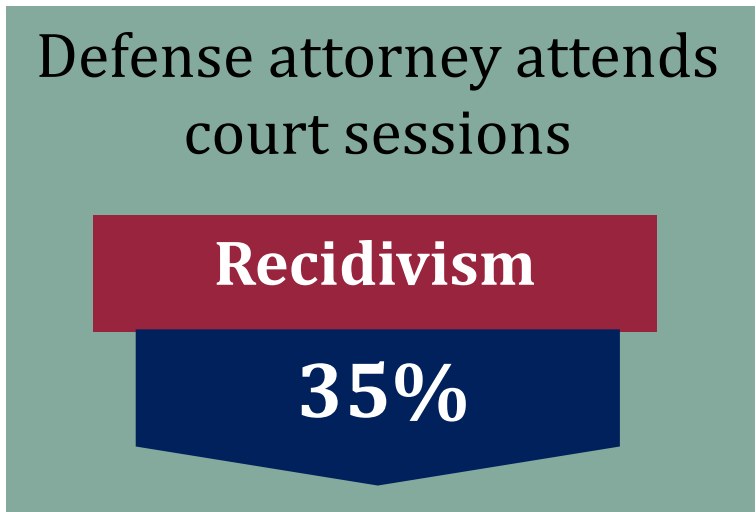
NPC Research Key Components Study 2008



Defense Attorney - Research



Recidivism reduction and cost savings relative to courts that do not follow these practices.



NPC Research Key Components Study 2008

Treatment Representative - Research

Treatment communicates with court via email

Recidivism

119%

Treatment court works with two or fewer treatment agencies

Recidivism

76%

Treatment attends court sessions

Recidivism

100%

Treatment court offers mental health treatment

Recidivism

80%

3x greater savings when treatment includes a phase on relapse prevention

Recidivism reduction relative to courts that do not follow these practices.

NPC Research Key Components Study 2008

Law Enforcement - Research

Law enforcement is a member of the treatment court team

Recidivism

88%

Law enforcement attends court sessions

Recidivism

83%

Recidivism reduction and cost savings relative to courts that do not follow these practices.

NPC Research Key Components Study 2008



Key Component #2: Non-adversarial Approach

STANDARDS

- 2: Equity and inclusion
- 3: Roles and responsibility of the judge
- 4: Incentives, sanctions, and therapeutic adjustments
- 8: Multidisciplinary team

TAKE AWAY

- Prosecution
- Defense attorney

Key Component #2: Best Practices

- **Prosecutor attends staffing and court**
 - Primary role: promote public safety
- **Defense attorney attends staffing and court**
 - Primary role: protect participants' due process rights
 - Represents participants, not the team
 - No flexibility re client confidentiality
- **Both work together to resolve issues up front**
- **Share team goals of public safety, health/ well-being of the participants, and program completion**



What Do You Think?

Non-adversarial means that team members should limit their professional contributions during staffing in order to prevent disagreement?

- A. True
- B. False

Non-adversarial does not mean non-advocacy



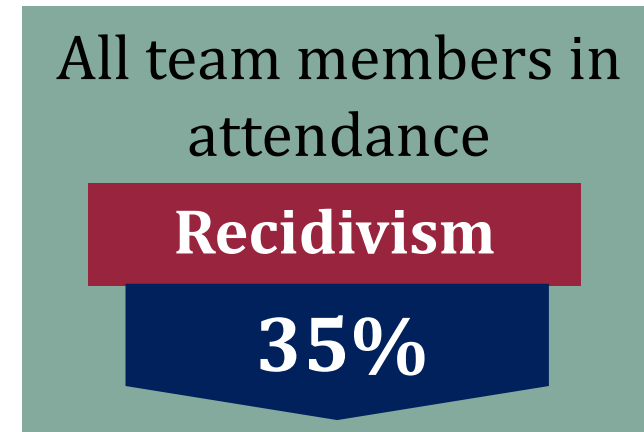
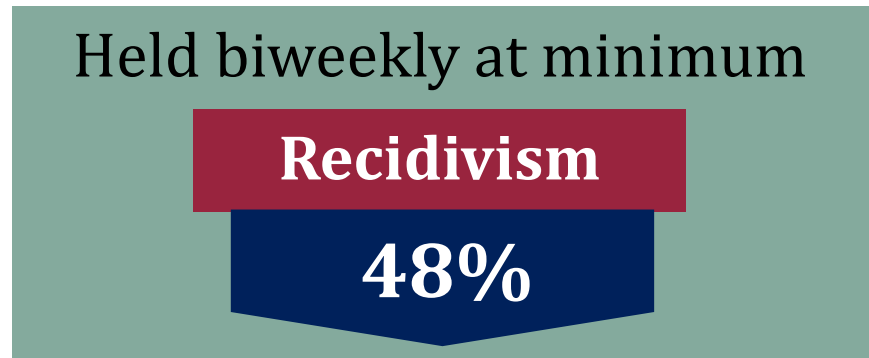
What Do You Think?

Non-adversarial means that team members should limit their professional contributions during staffing in order to prevent disagreement?

- A. True
- B. False**

Non-adversarial does not mean non-advocacy

Status Hearings



Recidivism reduction relative to courts that do not follow these practices

NPC Research Key Components Study 2008

- **Team members may report on participant's progress, offer praise, or answer additional questions from the judge**
- **Mic your participants**
- **Ask open-ended and skill-building questions**



Key Component #3: Early Identification

STANDARDS

- 1: Target population
- 2: Equity and inclusion

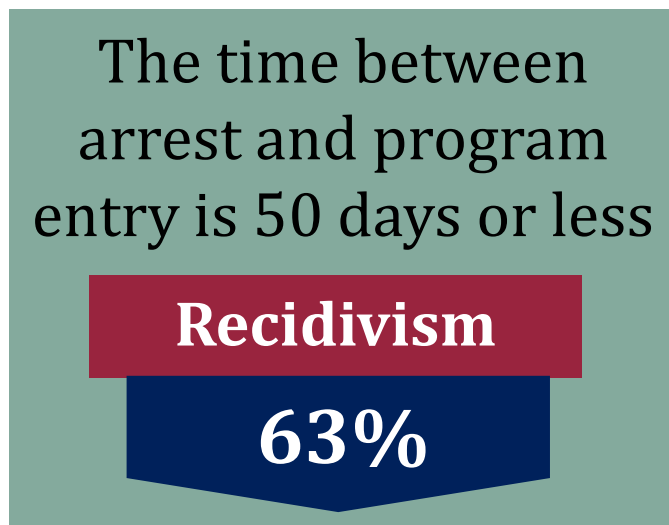
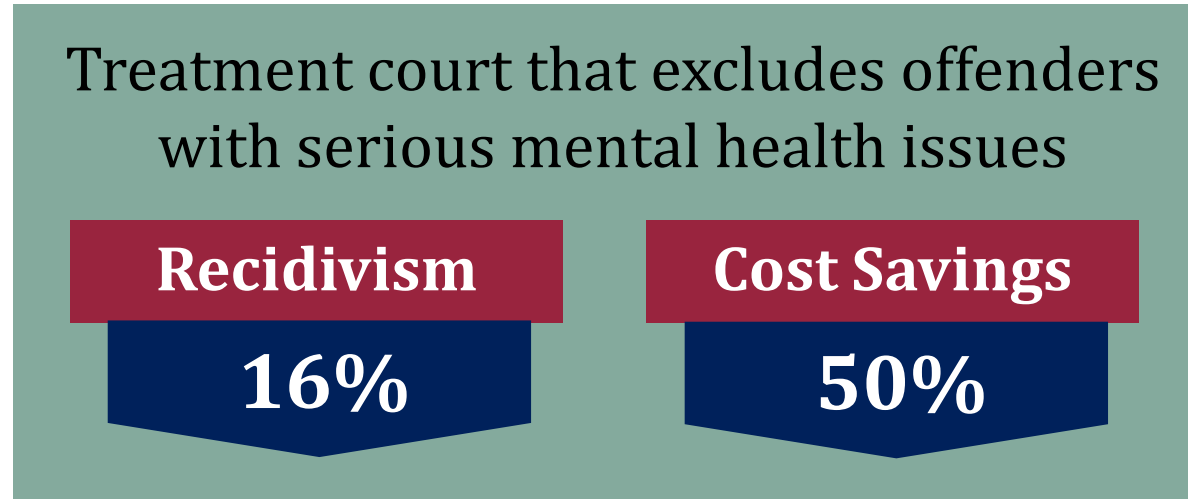
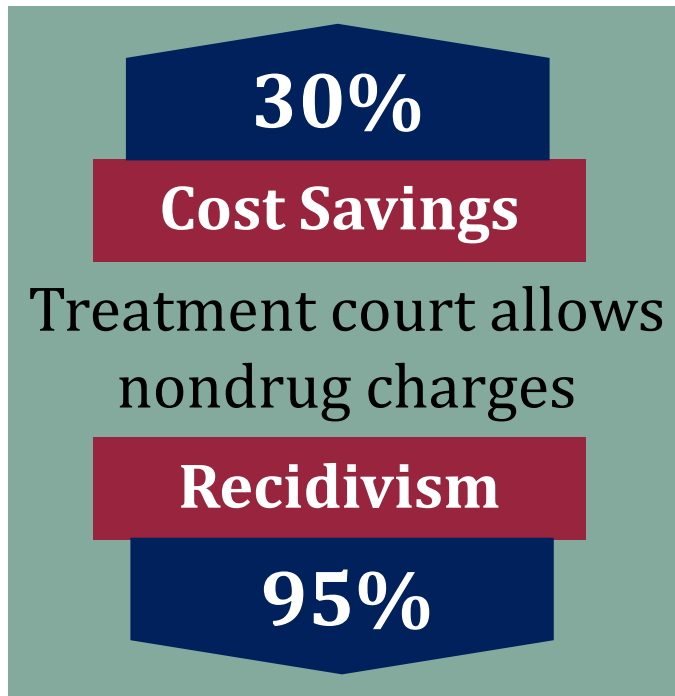
TAKE AWAY

- High risk and high need
- Access for all

Key Component #3: Best Practices

- **Time between arrest and program entry is 50 days or less**
- **Court uses validated, standardized tools to assess risk/ need**
 - HR/ HN, mod – moderate to severe SUD
- **Total active caseload of 125 or less**
- **Court accepts other charges besides drug charges**
- **Court accepts offenders with serious MH disorders (if assesses able to understand and follow program requirements)**
- **Court accepts offenders using medications to treat SUD**

RESEARCH CONSIDERATIONS



Recidivism reduction and cost savings relative to courts that do not follow these practices.



How Are You Doing?

Average time from
identification to entry?

- A. Under 50 days
- B. 51-180 days
- C. 181-365 days
- D. Do not know



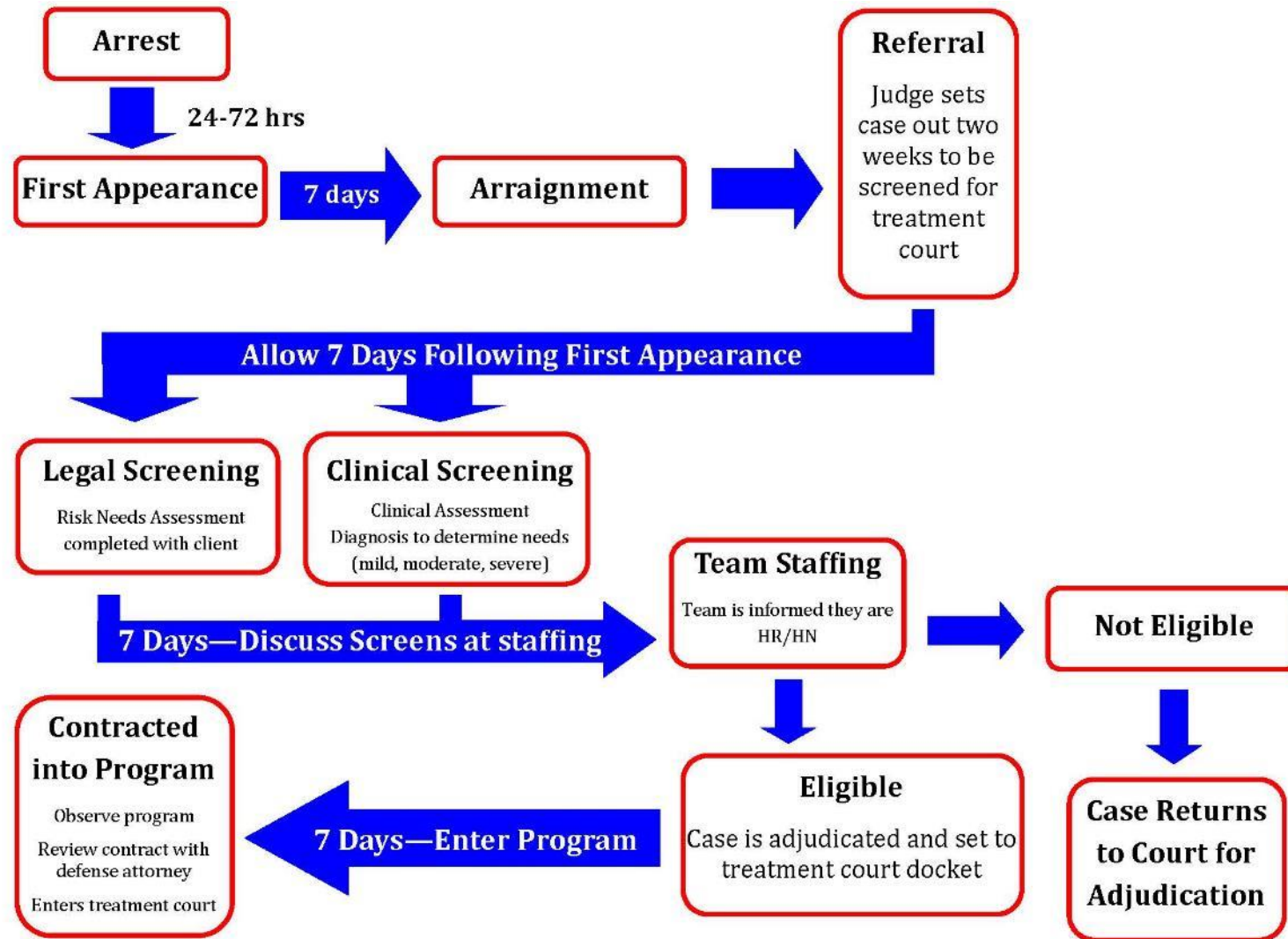
Apples and Oranges?

Pre-disposition

Post-sentencing

Probation violation cases

Entry Process Flow Chart



Key Component #4: Continuum of Services

STANDARDS

- 2: Equity and inclusion
- 4: Incentives, sanctions, and therapeutic adjustments
- 5: Substance use disorder treatment
- 6: Complementary treatment and social services
- 9: Census and caseload

TAKE AWAY

- Case management
- Clinical case management
- Mental health
- Trauma
- Housing
- Transportation
- Medical and dental

Key Component #4: Best Practices

- **No more than 1-2 treatment providers**
- **Evidence based, manualized treatment**
 - About 200 hours over 9 – 12 months
 - Delivered by licensed, trained professionals with experience with the criminal justice population
 - Gender specific services
- **Ph.1: participants meet individually with treatment or clinical case manager once a week (acute stabilization)**
- **Court provides oversight to ensure quality, accountability**
- **Court provides access to MAT**



Key Component #4: Best Practices

Program makes referrals for a continuum of care for :

- Co-occurring MH disorders
- Trauma
- Health care
- Dental care
- Housing assistance
- Transportation
- GED
- Job skills, employment
- Childcare
- Services for children
- Anger management
- Parenting classes
- Criminal thinking
- Crisis intervention
- Relapse prevention



Who Does the Community Supervision?

Probation

Law enforcement

Pre-trial services

Community supervision officers



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RISK-NEED-RESPONSIVITY (RNR)

Model as a guide to Best Practices

RISK

WHO

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

Deliver more intense intervention to higher-*risk* offenders

NEED

WHAT

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

Target criminogenic *needs* to reduce risk of recidivism

RESPONSIVITY

HOW

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

Address the issues that affect *responsivity*



Addressing Risk Factors (*Need*) as Part of Behavioral Health Services

Dynamic Risk Factor (Central 8)	Need/Case management/Services	Service Examples
History of antisocial behavior (Criminal History)		
Antisocial personality pattern (Check trauma history)		
Antisocial cognition		
Antisocial associates		
Family and/or marital discord		
Poor school and/or work performance		
Lack of engagement in leisure activities (prosocial activities)		
Substance abuse		

Addressing Risk Factors (*Need*) as Part of Behavioral Health Services

Dynamic Risk Factor (Central 8)	Need/Case management/Services	Service Examples
History of antisocial behavior (Criminal History)	Build and practice positive/healthy behaviors	By intervening in the 7 below
Antisocial personality pattern (Check trauma history)	Learn problem solving skills, practice anger management	CBT (Seeking Safety)
Antisocial cognition	Develop more pro-social thinking	MRT, Thinking for Change
Antisocial associates	Reduce association with criminal others (learn refusal skills)/increase time with pos peers	Peer Mentors, sober community activities
Family and/or marital discord	Reduce conflict, build positive relationships	Family therapy
Poor school and/or work performance	Work on good employee/study/performance skills	Job skills training, GED, community college
Lack of engagement in leisure activities (prosocial activities)	Connect participants with peer support and prosocial activities in the community	Sober support groups, find community groups that teach new skills
Substance abuse	Reduce use through integrated treatment	SUD treatment. education

Risk and Need Assessment

Adult Risk Assessment (ARA) based on the Ohio Risk Assessment System (ORAS)

ORAS Case Plan Report

NAME: [REDACTED]	D.O.B.: [REDACTED]	DATE OF ASSESSMENT: [REDACTED]
DATE CREATED: [REDACTED]	PRIMARY WORKER: [REDACTED]	INSTRUMENT: Community Supervision Tool
RISK LEVEL: High	OVERRIDE RISK LEVEL: N/A	TITLE IV-E: NO

The purpose of this Case Plan is to provide you with a roadmap to a crime-free lifestyle. We expect that you use this plan to help keep you out of trouble in the future. Our expectation is that you follow the goals, objectives, and tasks throughout the Plan. Our role is to help you meet these goals and in doing so, we will track your progress in meeting each goal/objective.

Risk and Need Assessment

HIGH PRIORITIES

GOAL: Engage in a routine and lifestyle that promotes long term sobriety.

Progress: In Progress

DOMAIN: Substance Abuse	TARGET: Substance Abuse
----------------------------	----------------------------

OBJECTIVE #1:

Obtain business license and develop a plan to start own business.

	START DATE: 10/7/2021	PLANNED END DATE: 2/28/2022
	TECHNIQUE(S):	COMPLETED AT: In progress

OBJECTIVE #2:

Increase service with NA/AA to become involved in the culture and program.

	START DATE: 10/7/2021	PLANNED END DATE: 5/31/2022
	TECHNIQUE(S): Attend three meetings quickly. (In-person and online); Engage with sponsor weekly.; Volunteer at NA/AA events and help organize and plan local meetings.	COMPLETED AT: In progress

OBJECTIVE #3:

██████ will develop of list of positive leisure activities to discuss with PO at next visit.

	START DATE: 10/7/2021	PLANNED END DATE: 10/12/2021
	TECHNIQUE(S):	COMPLETED AT: In progress

What is the plan? Antisocial Cognitions

Examples

Interventions

Goal





Relationship Matters

Relationship quality between probation officers and client

- Quality of the client-officer relationship predicted rule compliance (*e.g., probation violations, probation revocations, and new arrest*)

Officers who use a combination of caring, fairness, trust, and authoritativeness with clients are the *most* likely to influence reductions in offender recidivism

(Skeem, Eno Loudon, Polaschek, & Camp, 2007)



Staff Effectiveness

Only rehabilitation (soft) – *poorer outcome*

Authoritative, punitive (hard) – *poorer outcome*

Hybrid – set limits, be supportive – *best outcome*

(Skeem, Eno Louden, Polasheck, & Camp, 2007;
Kennealy, Skeem, Manchak, & Eno Louden, 2012)



Core Correctional Practices

The following skill sets are designed to complement adherence to the RNR model and should be woven into interactions with probationers.

- Effective reinforcement
- Effective disapproval
- Effective use of authority
- Interpersonal relationships
- Anti-criminal modeling
- Cognitive restructuring
- Structured skill building
- Role clarification
- Problem solving

Use RNR and CCPs to Go Beyond Compliance Monitoring

Research shows that when probation officers spend at least **16 minutes** with supervisees employing behavioral techniques and focusing on criminogenic needs, recidivism rates drop significantly.

(Bonta, Rugge, Scott, Bourgon, & Yessine, 2008)



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Key Component #5: Drug Testing

STANDARDS

- 4: Incentives, sanctions, and therapeutic adjustments
- 7: Drug and alcohol testing

TAKE AWAY

- Random
- Observed
- Twice per week





Key Component #5: Best Practices

- **Testing is conducted by trained staff**
- **Testing also ensures participants are taking approved medications appropriately**
- **Witnessed directly by staff**
- **Results are back in 2 days or less**
- **Participants must have at least 90 days of abstinence determined by testing, before graduation**
 - Not the only success measure
 - Reduction in harm; Improvement in functioning

Key Component #5: Observed Drug Testing



Need male who can pass a urine analysis at tasc. Must be able to use my ID. Text with picture. Pays 20\$ will negotiate



Key Component #6: Coordinated Strategy

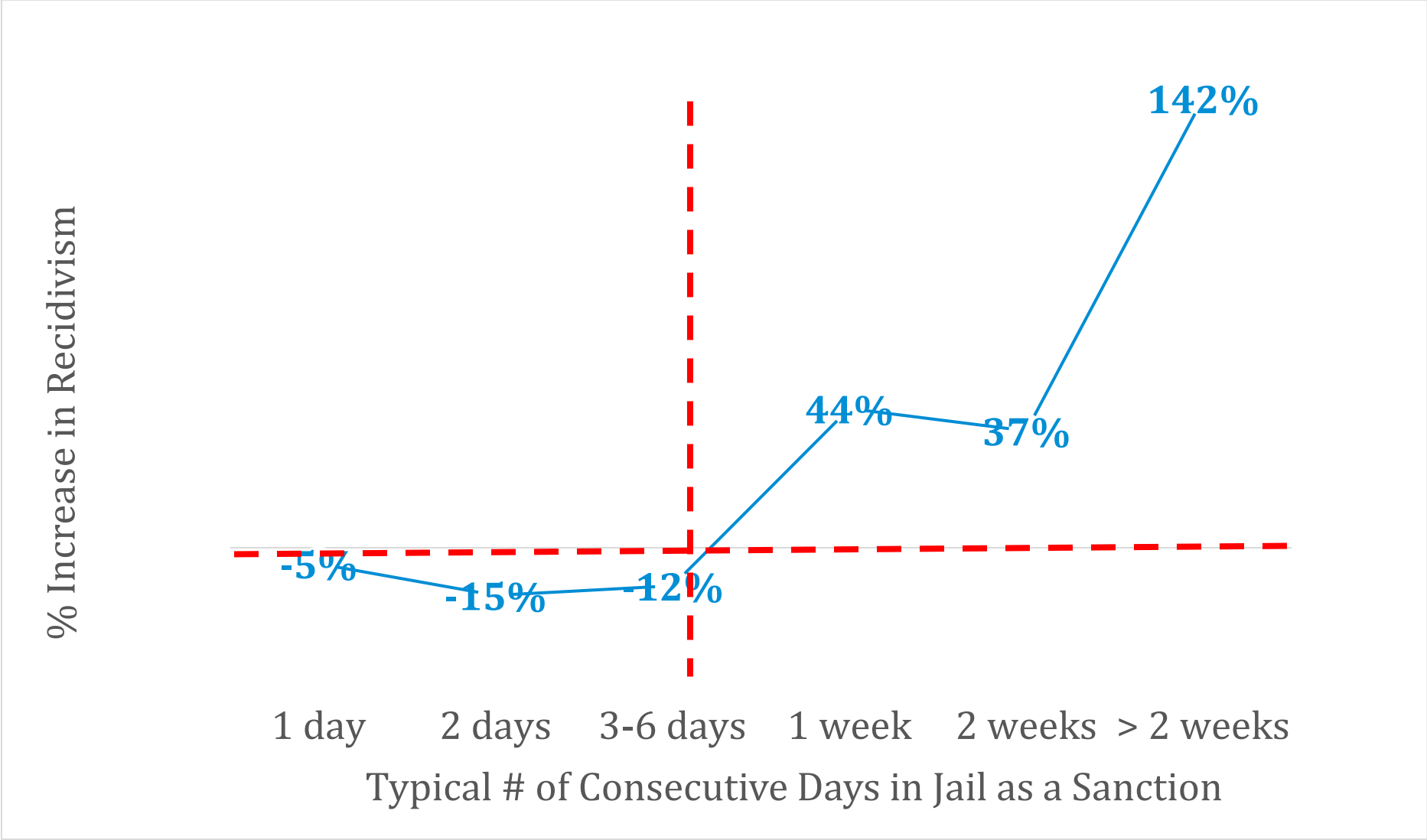
STANDARDS

- 2: Equity and inclusion
- 4: Incentives, sanctions, and therapeutic adjustments

TAKE AWAY

- All team members participate
- Shared decision making

Courts that typically impose jail longer than 6 days have higher recidivism.





Addressing Risk Factors (*Need*) as Part of Behavioral Health Services

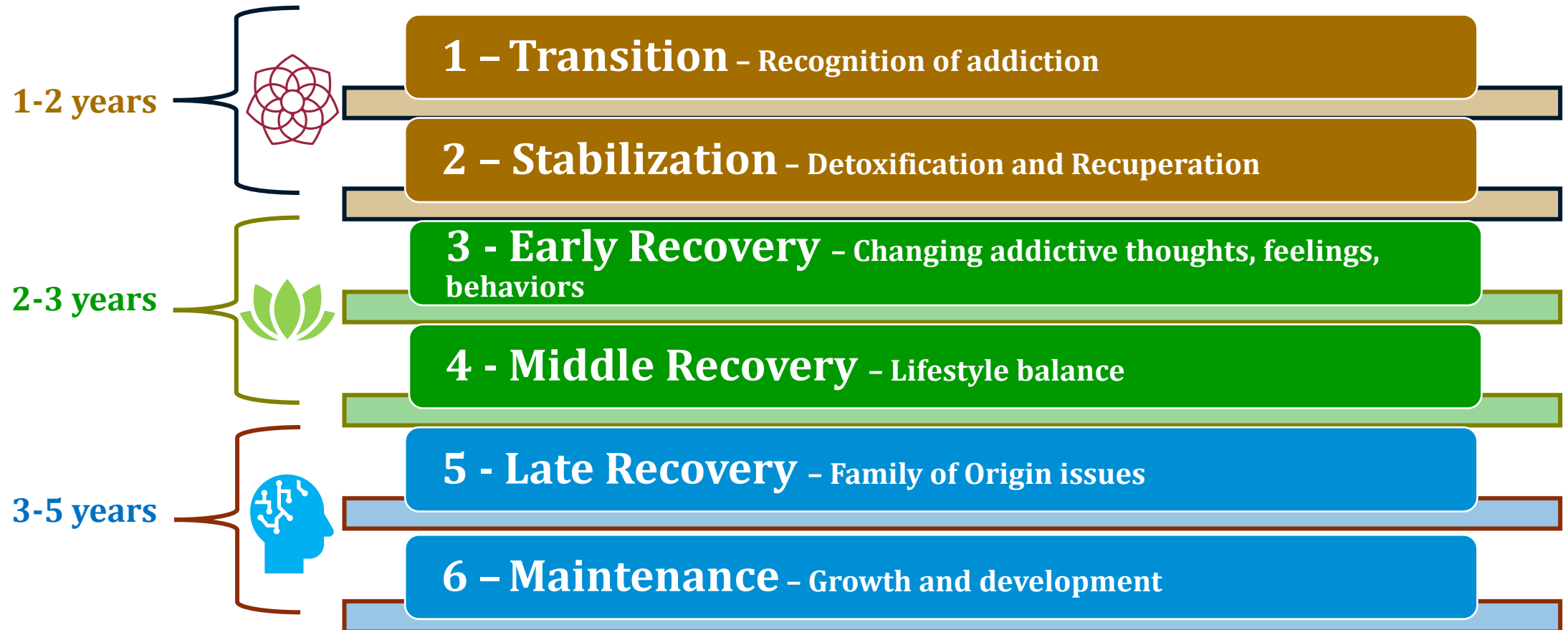
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Developmental Model of Recovery

Marlott and Gorski



Clinical Assessment

Level of Care
Mental Health
Medical



Behaviors



During Staffing

Experts help judge
frame the court room
message



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Tell the Whole Story

- All perspectives from the professionals at the table
- Where is the participant in the program
- What treatment/therapy is participant engaged in
- Where is the participant in the case management plan
- Precipitating events (triggers)
- Unintended vs. intended situation
- Prior responses for the same behavior



Equivalent Not Equal





Courtroom is Theater

Environment:

- Order of cases
- Involvement of team
- Location of participant
- Addressing gallery
- Time
- Frequency of court hearings

Key Component #7: Judicial Interaction and Oversight

STANDARDS

- 3: Role and responsibility of the judge
- 4: Incentives, sanctions, and therapeutic adjustments
- 8: Multidisciplinary team

TAKE AWAY

- Someone in authority cares



Key Component #7: Best Practices

- Participants have court status review hearings every 2 weeks minimum
- Judge spends at least 3 minutes with each person
- Judge delivers responses in a way that creates learning opportunities: WHAT, WHY, HOW, RESPONSES
- Judge serves voluntarily, at least 2 years or indefinitely

JUDGE – RESEARCH

36%

Cost Savings

The judge spends an average of 3 minutes or more per participants during status review hearings

Recidivism

153%

4%

Cost Savings

The judge was assigned to treatment court on a voluntary basis

Recidivism

84%

17%

Cost Savings

The judge's term is indefinite

Recidivism

35%

Recidivism reduction and cost savings relative to courts that do not follow these practices.



Key Component #8: Monitoring and Evaluation

STANDARDS

- 2: Equity and Inclusion
- 9: Census and caseload
- 10: Monitoring and evaluation

TAKE AWAY

- 65% less savings when not using electronic databases
- 131% greater cost saving by programs that review data and statistics to modify program (internal)
- 100% cost savings when a program conducts an evaluation and modifies the program (external)

Key Component #8: Best Practices

- **Results of external program evaluations and internal review of data lead to modifications to improve the court**
 - Are using evidence-based practices in treatment, supervision, incentives and sanctions?
 - Do we have a 50-70% completion rate?
 - Do the participants' demographics match the community?
 - Are all demographic groups performing equally well?
 - Recidivism rates: 6 months, 1 year, 5 years?



Evaluator

Typically an independent skilled evaluator or professor from a local college, college student, statewide evaluator, or local county evaluator

- Examines whether the treatment court is adhering to best practices and participant outcomes no less than every 5 years
- Helps the team identify the performance data elements to be collected
- Identifies a comparison group for the evaluation

Key Component #9: Interdisciplinary Education

STANDARDS

- 2: Equity and Inclusion
- 3: Roles and responsibilities of the judge
- 5: Substance use disorder treatment
- 8: Multidisciplinary team

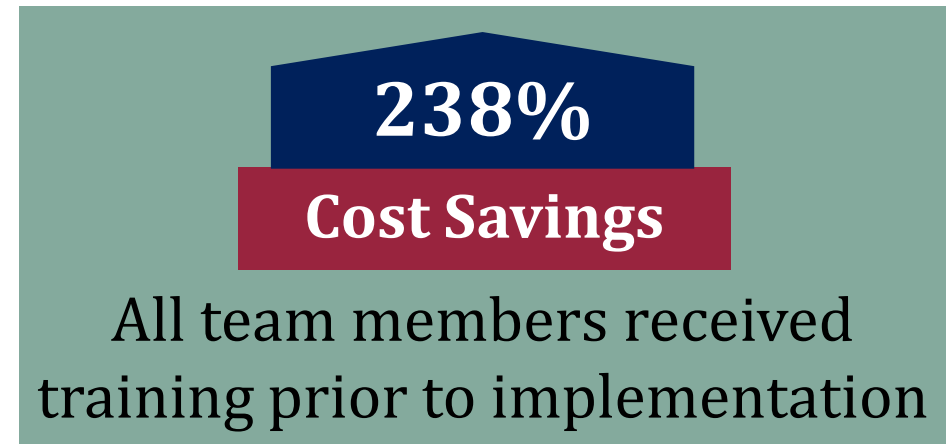
TAKE AWAY

- Ongoing training
- Cross-training

Key Component #9: Best Practices

- **All team members receive training on the drug court model and their role on the team**
- **The team trains together annually**
- **Training includes cultural competency**
- **All new hires receive formal training/orientation**
 - Free online training at NDCl.org
 - Provide entire team with copies of all program documents

TEAM TRAINING



- **Pre-implementation training**
- **Continuing education workshops**
- **Tutorials for new staff**
 - Orientation
 - Online training at NDCI.org

Recidivism reduction and cost savings relative to courts that do not follow these practices. *NPC Research Key Components Study 2008*

Key Component #10: Forging Partnerships

STANDARDS

- 2: Equity and Inclusion
- 5: Substance use disorder treatment
- 6: Complementary treatment and social services
- 8: Multidisciplinary team

TAKE AWAY

- Community mapping

Key Component #10: Best Practices

- **The team has an advisory committee including community members**
- **The team has a steering committee that meets regularly to review policy and procedures.**
- **Staffing is for discussing participants' progress, not policy matters.**



RECOVERY

Treatment and Sobriety

Every 4 minutes someone is sent to treatment instead of prison through treatment courts

Treatment court participants are 37% less likely to test positive for illicit substances

Treatment court participants who graduate with at least 90 days of sobriety have a 164% greater reduction in recidivism



NADCP

National Association of
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QUESTIONS?

