

# Do the Adult Best Practices Standards Apply to Other Treatment Court Types?

*What Fits, What Might Fit, What*

*Doesn't Fit*

*Shannon Carey, Ph.D.*



# Burning Question

Do the best practice standards apply to other problem solving court types?

- Juvenile drug treatment courts
- Family drug treatment courts
- Mental health courts
- Veterans treatment courts
- DUI courts
- Reentry Courts

# Overview

What is a drug court (treatment court, problem solving court, etc.)?

Do the adult drug court best practice standards apply to other treatment court types?

Not possible to cover every best practice in this presentation, so...

- ✓ Premises/principles to think about on whether practices can be generalized
- ✓ Examples of what fits, what might fit, what doesn't fit

# Definitions

## Drug Courts

- Original drug court model links the resources of the criminal justice system and treatment programs to increase treatment participation and decrease criminal recidivism
- Defined by the 10 Key Components of Drug Courts
  - Intensive monitoring
  - Collaboration and information sharing among a multi-disciplinary team
  - Use of behavior modification/contingency management/treatment
  - Self evaluation and feedback for performance improvement
- Has been designated as an evidence based practice based on the extensive research

# Definitions

## Treatment Courts\*

- Follow the drug court model
- Link the justice system (criminal and civil) to expanded social services (e.g., substance use treatment, mental health treatment, housing, education, child services, etc.)

\*a.k.a. recovery courts, problem solving courts, collaborative courts, accountability courts

# Premise - The 10 Key Components VS Best Practice Standards

The 10 KC define treatment courts (the model)

The Standards are the how - how to implement the model for the most effective outcomes (based on the existing research so far)

❖ Can we generalize the model and the research for the adult drug court population to other treatment court populations?

# Generalize

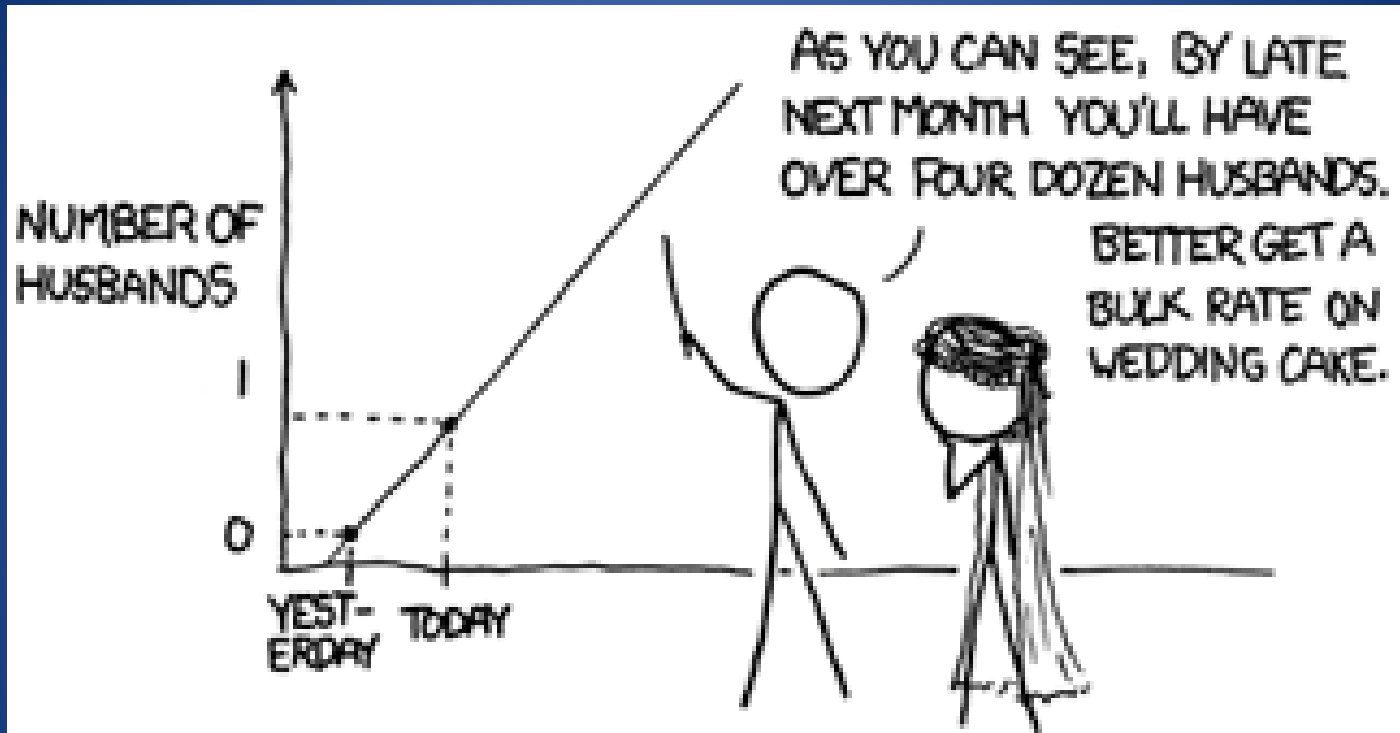
- ❖ To apply something specific (such as a theory or rule) to larger group

The concern is we might:

- Over-generalize



# Over-generalize



## The Danger of Overgeneralization

# Under-generalize

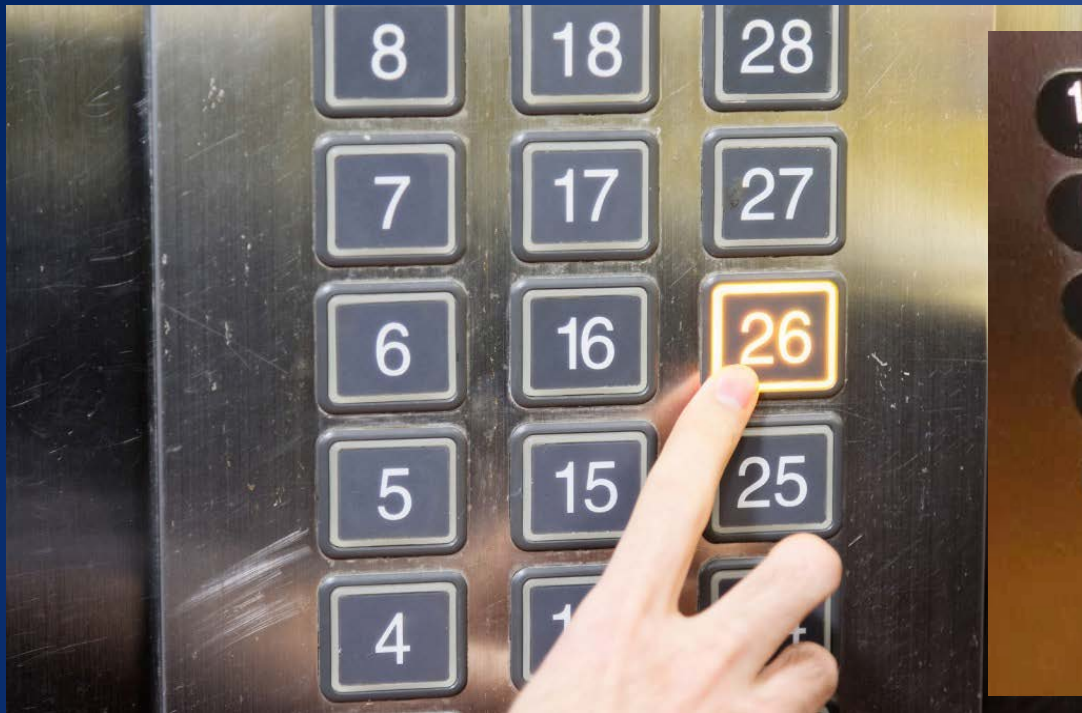


# Generalize



An idea is always a generalization, and generalization is a property of thinking. To generalize means to think.

(Georg Wilhelm Friedrich Hegel)



# Who are the participants in your adult drug courts?

- ❖ 18-25 year olds?
- ❖ Parents?
- ❖ Any mental health disorders?
- ❖ Veterans?
- ❖ Hybrid courts that take DUI offenders?

**Human**

# The 10 Key Components

Define treatment courts –

Key Component #1: Drug courts integrate alcohol and other drug treatment services with justice system case processing

- ❖ (Rephrase) Treatment courts integrate treatment services with justice system case processing

# The 10 Key Components

## Define treatment courts

- ❖ Key Component #2: Using a non-adversarial approach, prosecution and defense counsel promote public safety while protecting participants' due process rights
- ❖ (Rephrase) Treatment courts operate within the court/justice system and attorneys work collaboratively to promote public safety and protect participants' due process rights

# The 10 Key Components

## Define treatment courts

- ❖ Key Component #3: Eligible participants are identified early and promptly placed in the treatment court program.
- ❖ Key Component #4: Treatment courts provide access to a continuum of alcohol, drug and other treatment and rehabilitation services



# The 10 Key Components

## Define treatment courts

- ❖ Key Component #5: Abstinence is monitored by frequent alcohol and other drug testing
- ❖ (Rephrase) Abstinence and the appropriate use of medications are monitored by frequent alcohol and other drug testing

# The 10 Key Components

## Define treatment courts

- ❖ Key Component #6: A coordinated strategy governs treatment court responses to participants' compliance
- ❖ Key Component #7: Ongoing judicial interaction with each participant is essential
- ❖ Key Component #8: Monitoring and evaluation measure the achievement of program goals and gauge effectiveness

# The 10 Key Components

## Define treatment courts

- ❖ Key Component #9: Continuing interdisciplinary education promotes effective treatment court planning, implementation, and operations
- ❖ Key Component #10: Forging partnerships among drug courts, public agencies, and community-based organizations generates local support and enhances treatment court program effectiveness

# The 10 Key Components

Define treatment courts – “Yes AND”

- ❖ Essential Elements of MH Courts (Yes AND)
- ❖ DWI Guiding Principles/VTC Components (Rewrite of the 10 KC)
- ❖ JDC Guidelines (JDTC Guidelines equivalent to the standards but less research – still Yes AND)
- ❖ FTC Standards (In process. Some are ADC standards with some revised language. Others are new additions /expansions – still Yes AND)

# Premise - Medical Model

## Drug Courts

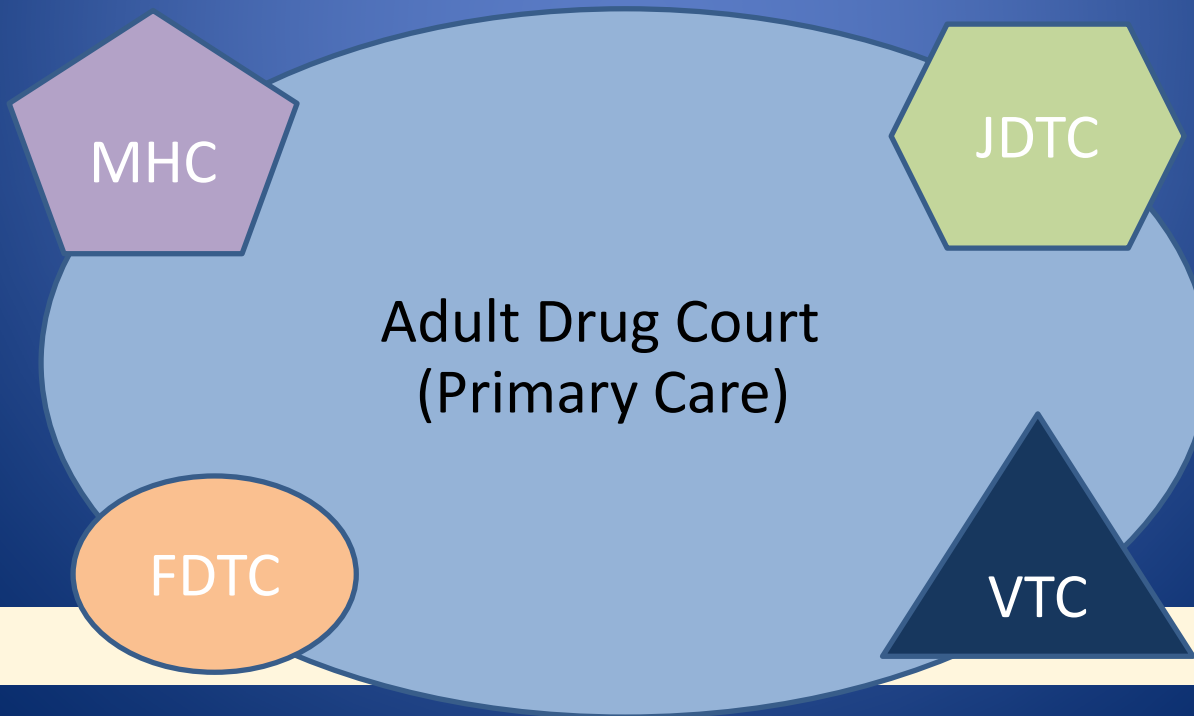
Adult Drug Court

FDTC, JDTC, VTC, MHC,  
reentry, DWI

## Medicine

Primary Care (GP, Family Doc)

Specialists



# Premise - Medical Model

## Drug Courts

Adult Drug Court

FDTC, JDTC, VTC, MHC,  
reentry, DWI

## Medicine

Primary Care (GP, Family Doc)

Specialists

*Which of the BPs are primary care and which are BPs that are specific to the needs of the population?*

# Adult Drug Court Best Practice Standards

The Research on how to implement the model effectively

Research included in the standards was performed in drug courts, but was also pulled from the literature in related fields such as SUD/MH treatment and other services, probation, and corrections

# Premise – Two types of BPs

## 1. Best practices that are relevant to your *population* (including legal status issues)

- ✓ e.g., The drug court offers or makes referrals to gender specific services, or In order to graduate participants must have a sober housing environment

## 2. Best practices that are *organizational*

- ✓ e.g., All key team members attend staffings, or Treatment communicates with team via email



# Standard I: Target Population

Eligibility and exclusion criteria for the Drug Court are predicated on empirical evidence indicating which types of offenders can be treated safely and effectively in Drug Courts. Candidates are evaluated for admission to the Drug Court using evidence-based assessment tools and procedures

# Standard I: Target Population

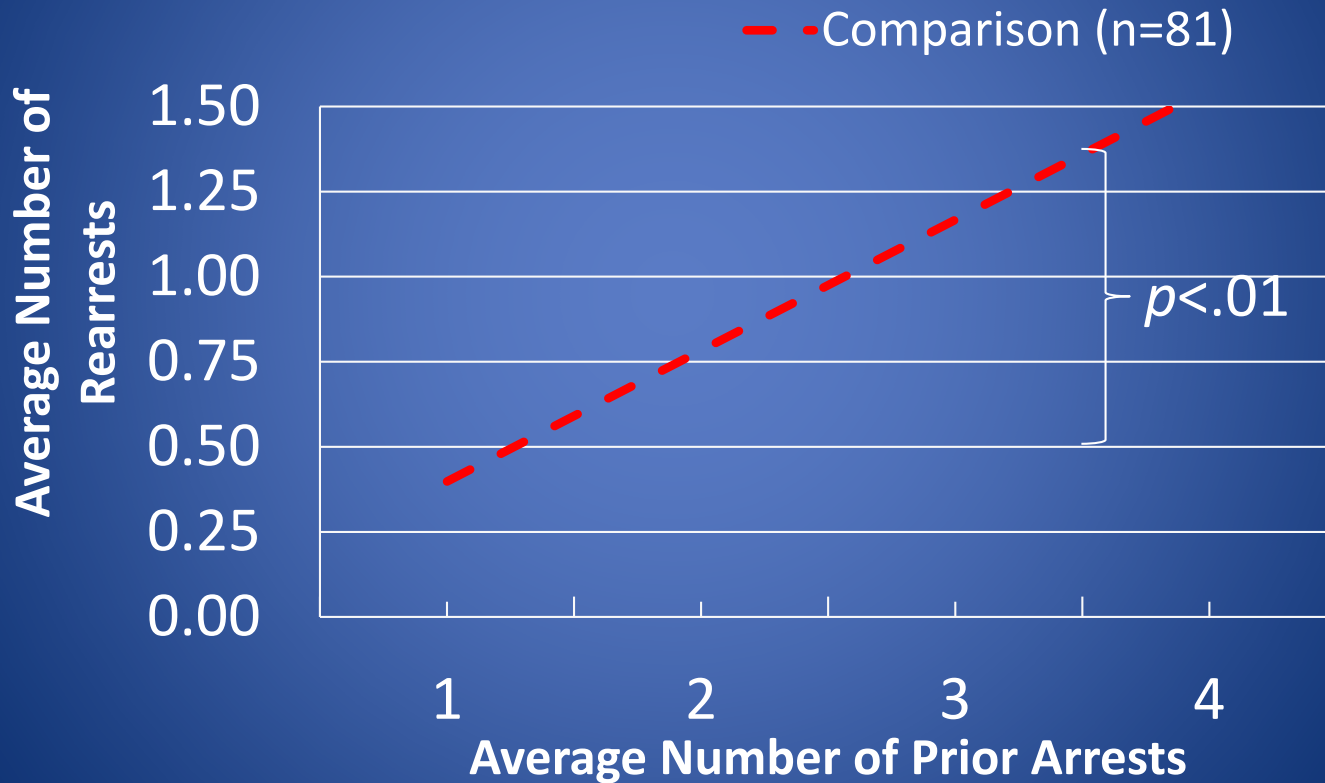
## Best Practice Examples:

- High Risk-High Need only OR have different tracks
- Use validated and standardized risk and needs assessment tools

# Standard I: Target Population

## High-Risk High-Need

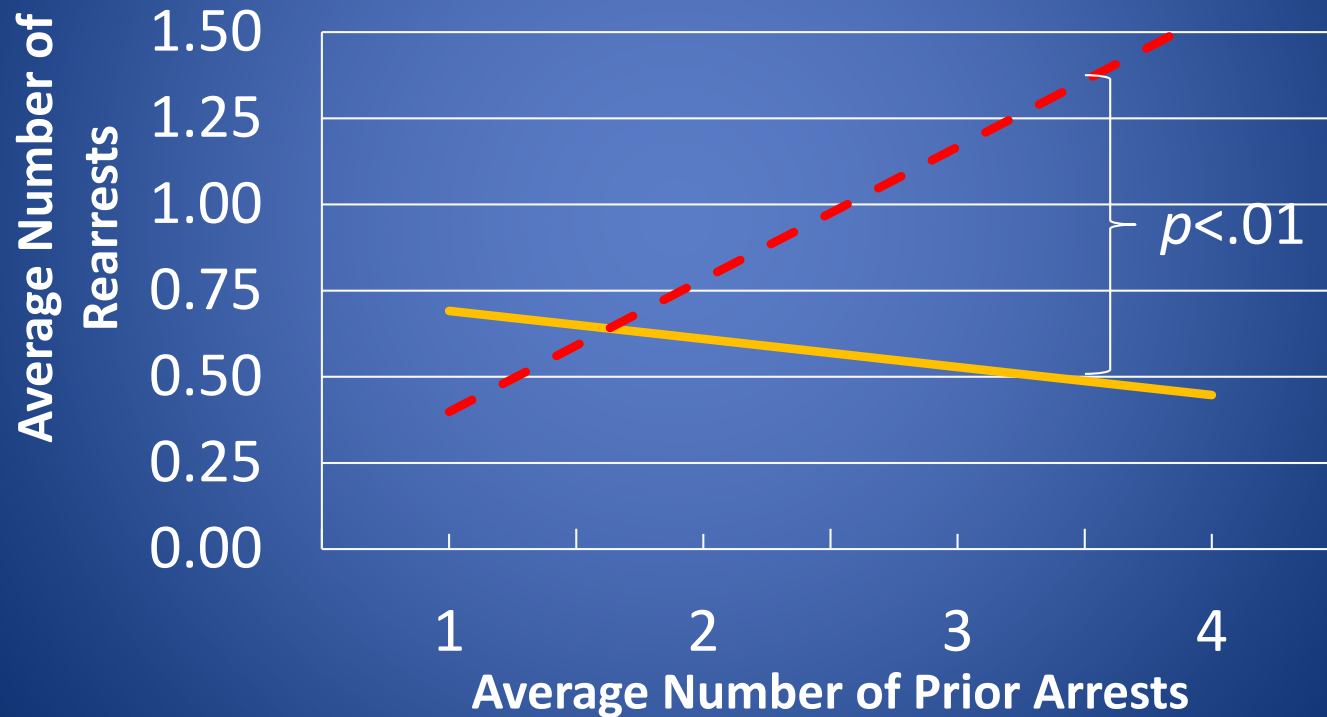
MN  
DWI  
Court  
Study  
9 Sites  
NHTSA



# Standard I: Target Population

## High-Risk High-Need

— DWI Court (n=48)    - - Comparison (n=81)



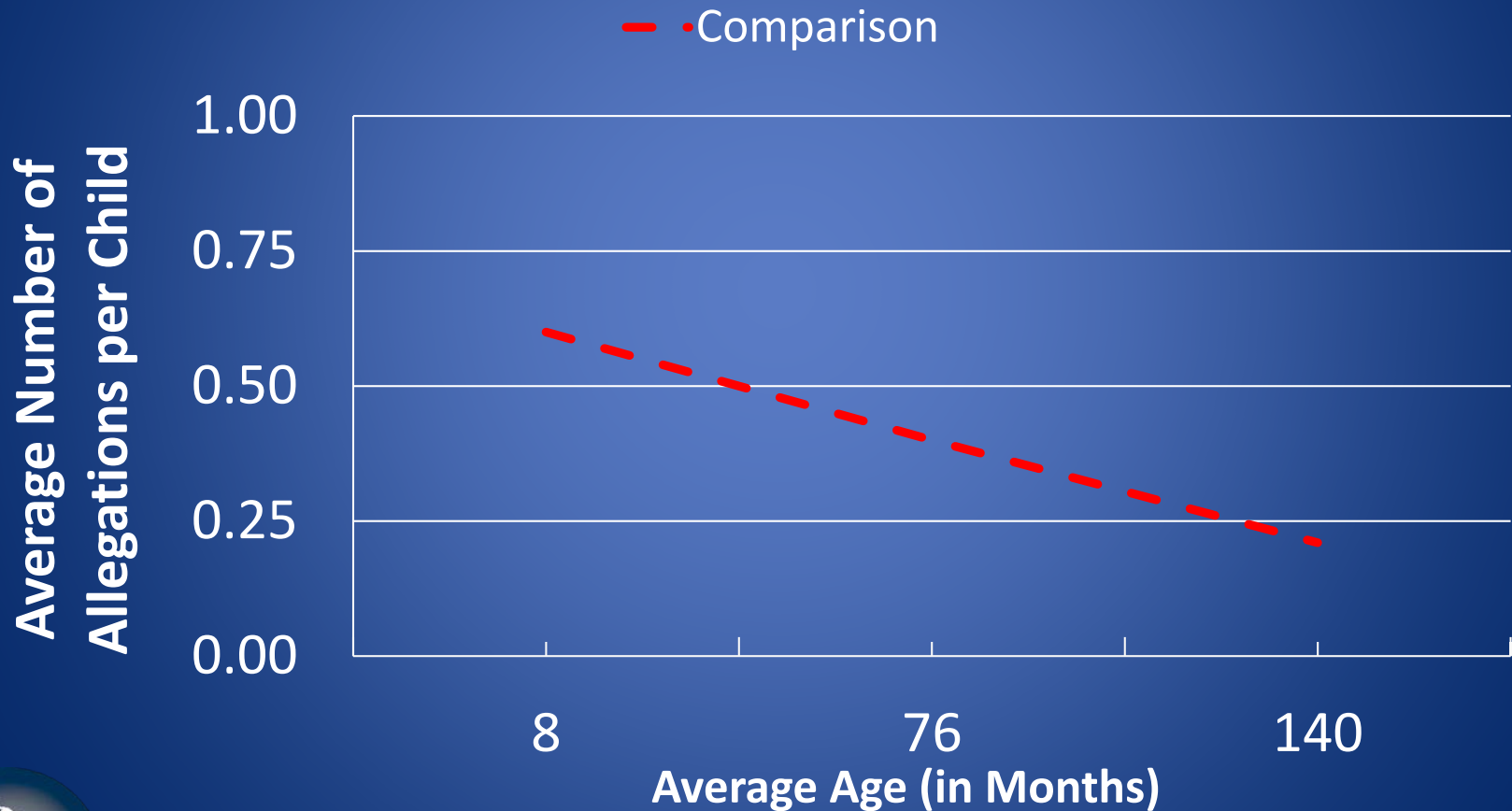
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DWI: Higher risk DWI had better outcomes



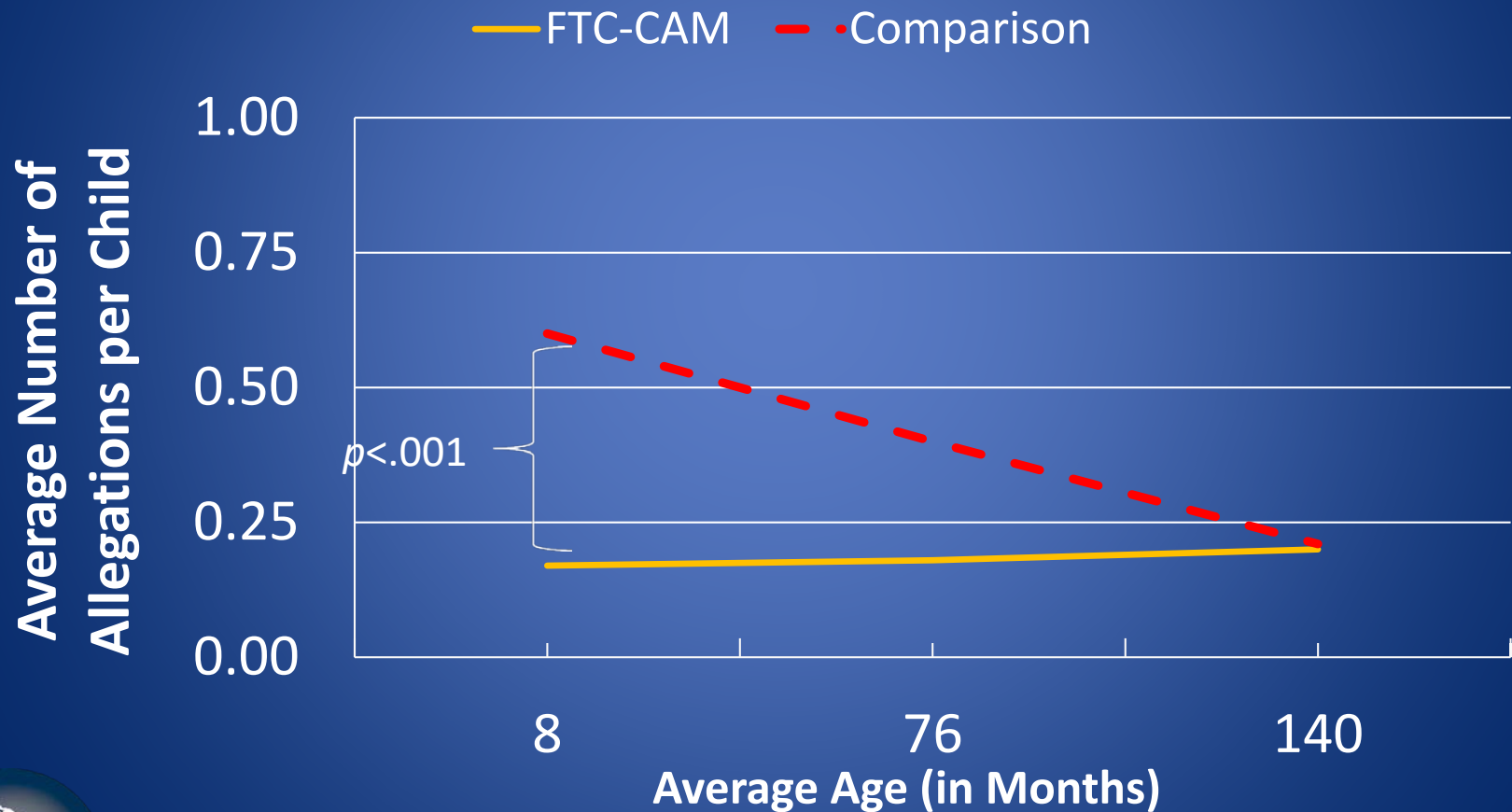
# Standard I: Target Population

FTC: “Higher Risk” FTC Participants Did Better



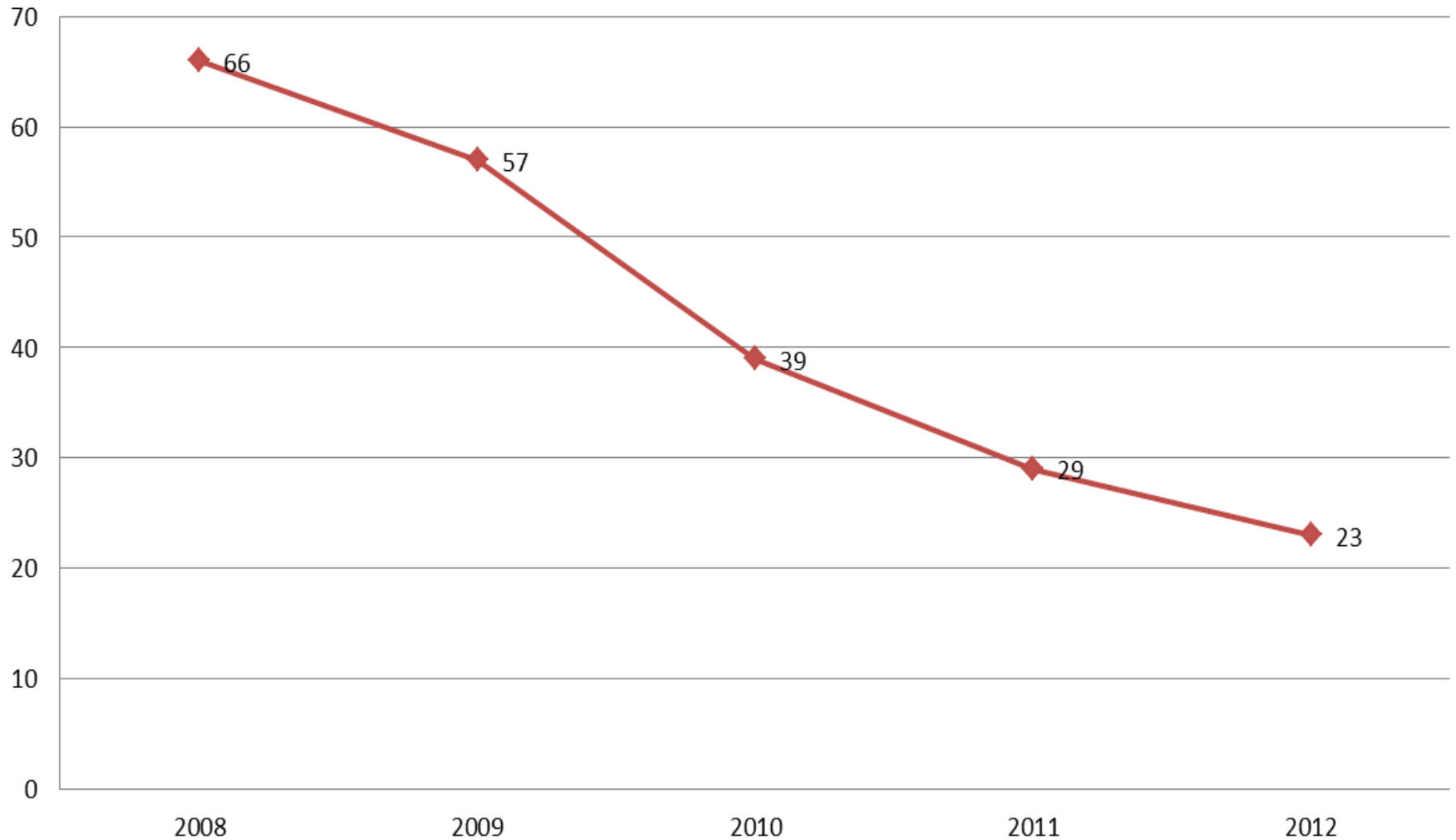
# Standard I: Target Population

FTC: “Higher Risk” FTC Participants Did Better



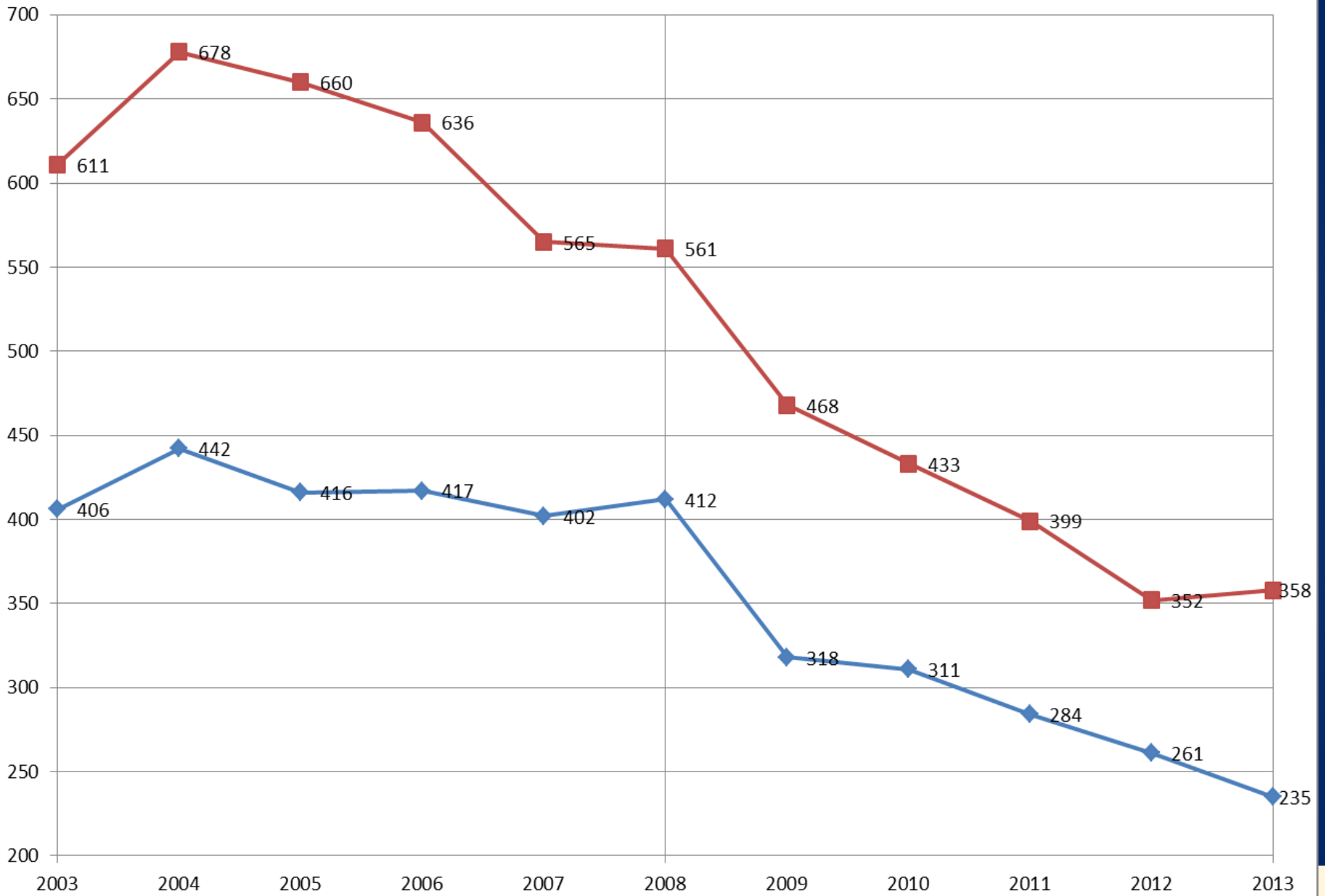
# Recidivism Reduction Among Second Offenders Since Implimentation of DUI Court in San Joaquin County

Source: DMV MIS Reports 2010-2015



Fatal and Injury Collisions DUI - SJ County

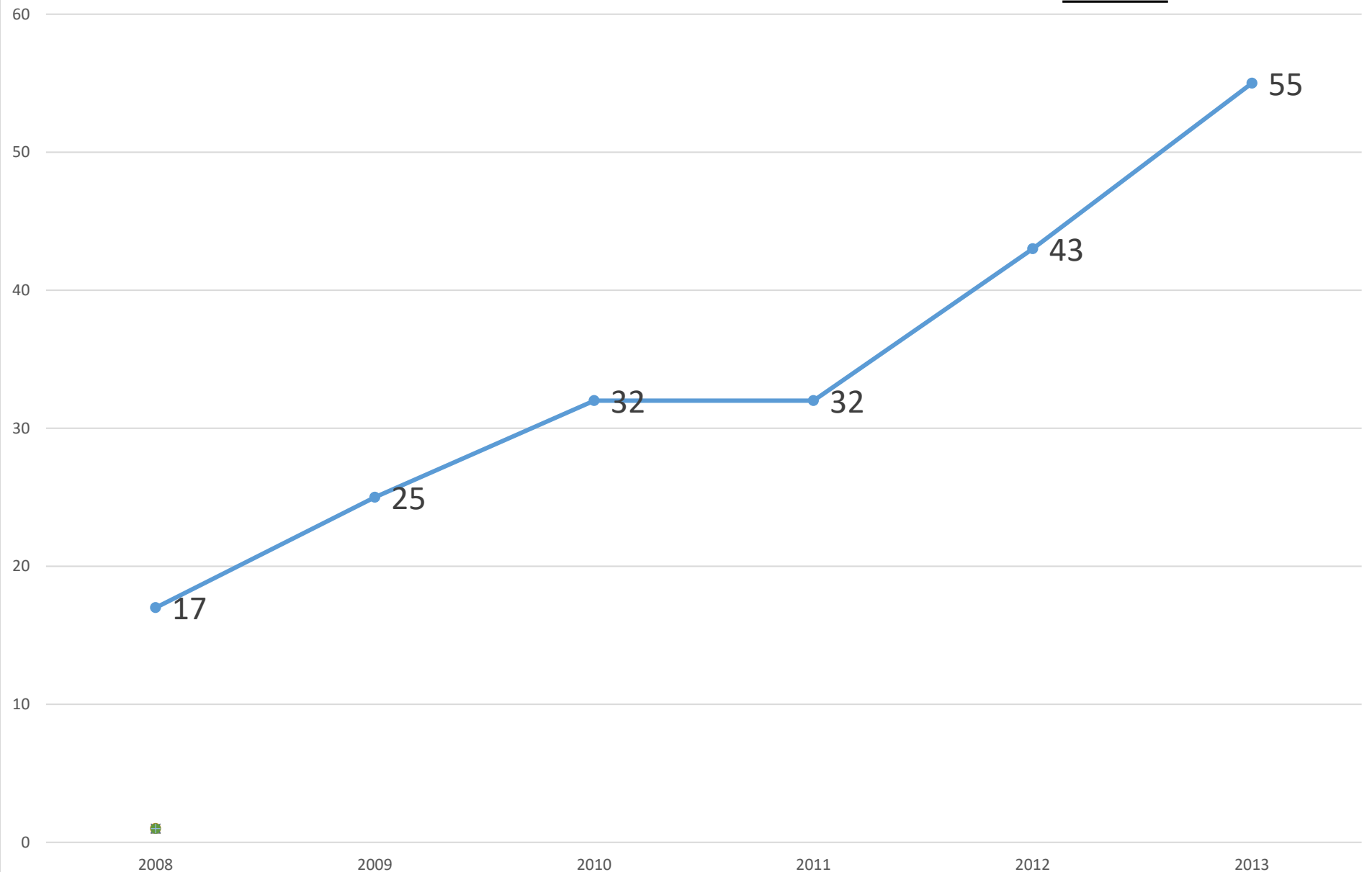
Persons Killed and Injured in DUI Collisions - SJ County





# California OTS Safety Ranking Alcohol Involved Collisions By County 1=Worst; 58=Best

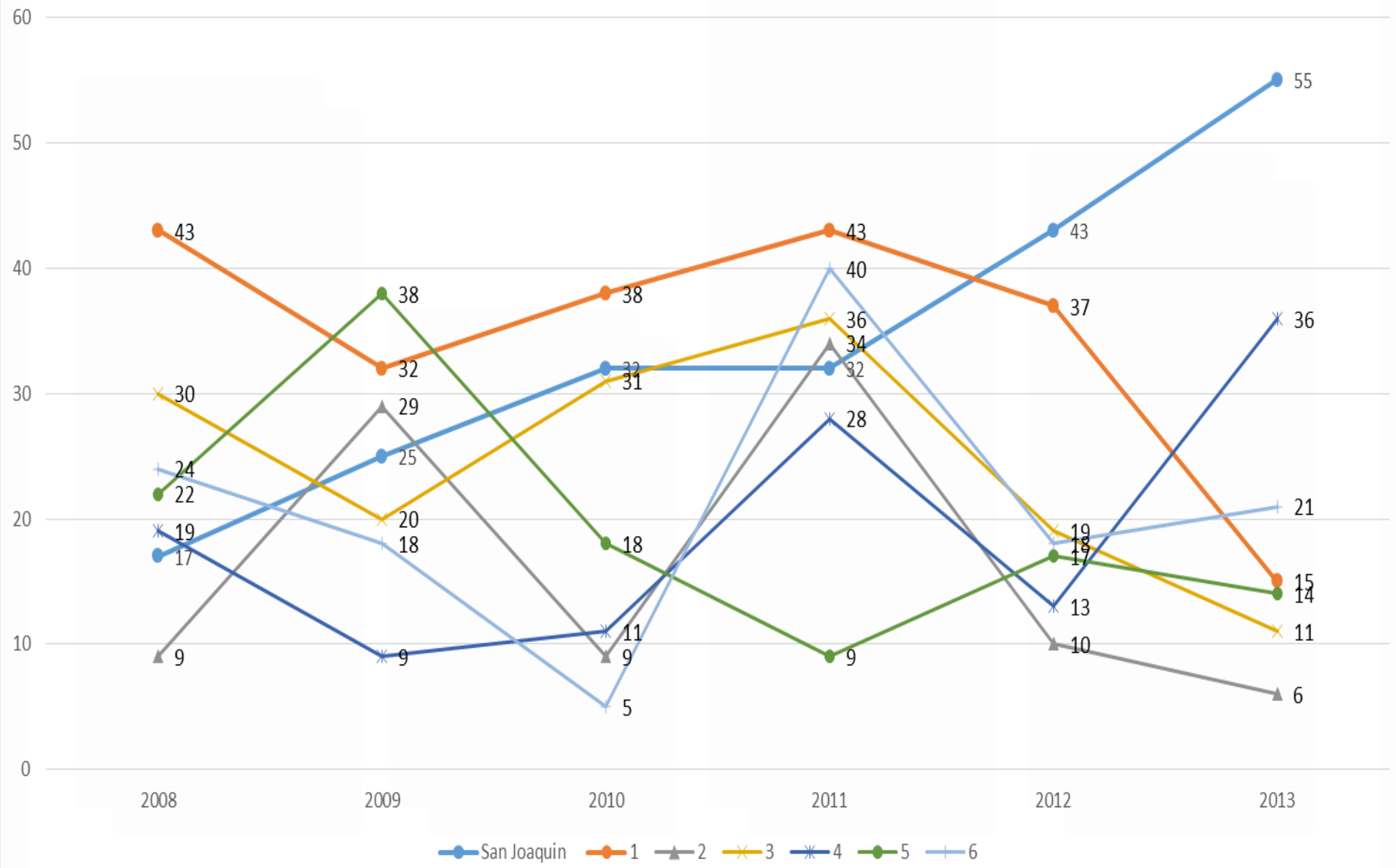
San Joaquin County –  
4<sup>th</sup> best



# California OTS Safety Ranking

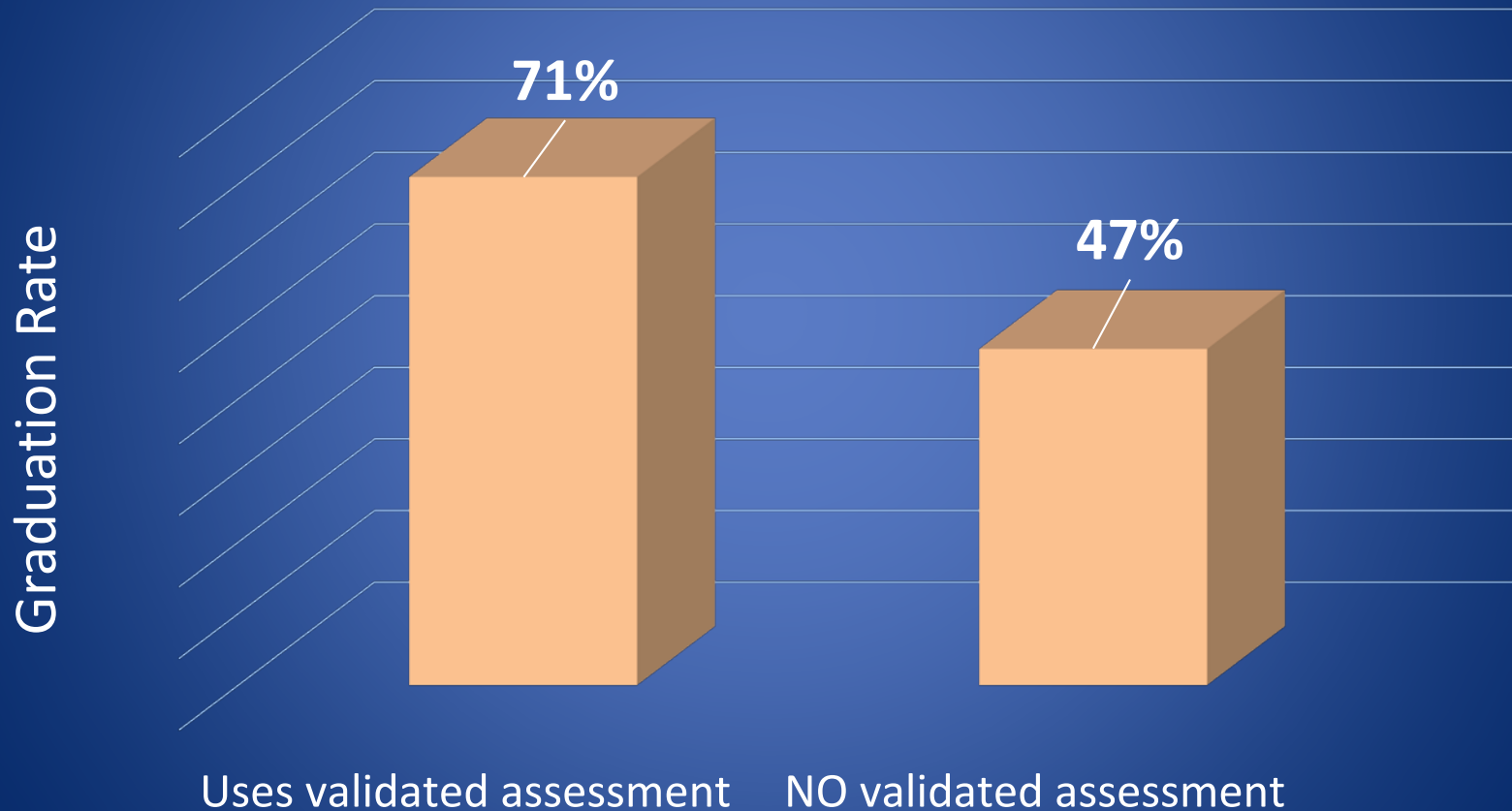
## Alcohol Involved Collisions By County

1=Worst; 58=Best



# Standard I: Validated Assessment

JDTCs that used a validated, standardized clinical assessment to determine clinical needs had 51% higher graduation rates



# Standard I: Target Population

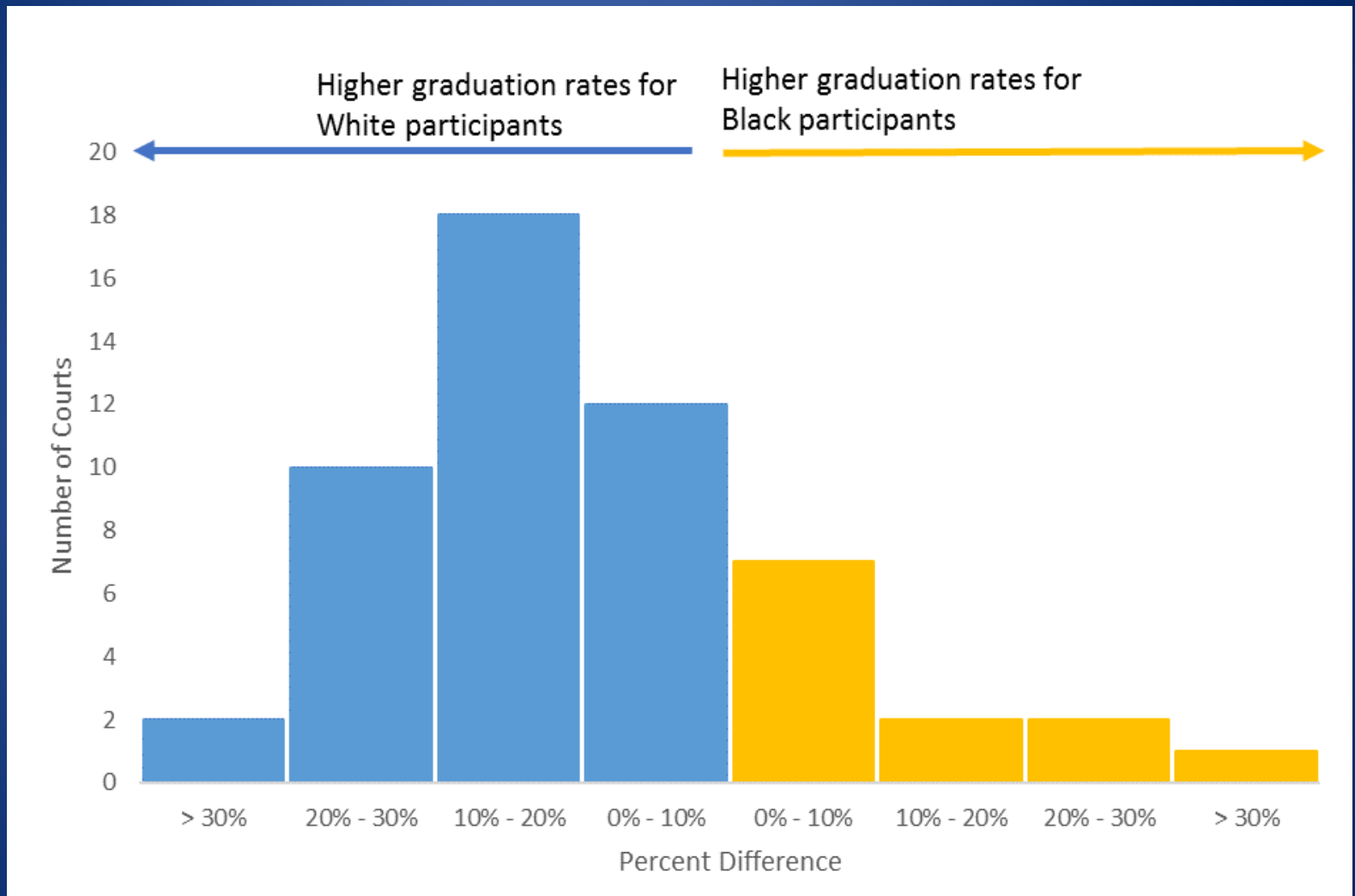
- High Risk High Need only OR have different tracks
- Use Validated and standardized risk and need assessment tools
  - ✓ Provide services according to assessed need

## Standard II: Equity and Inclusion

Citizens who have historically experienced sustained discrimination or reduced social opportunities because of their race, ethnicity, gender, sexual orientation, sexual identity, physical or mental disability, religion, or socioeconomic status receive the same opportunities as other citizens to participate and succeed in the Drug Court

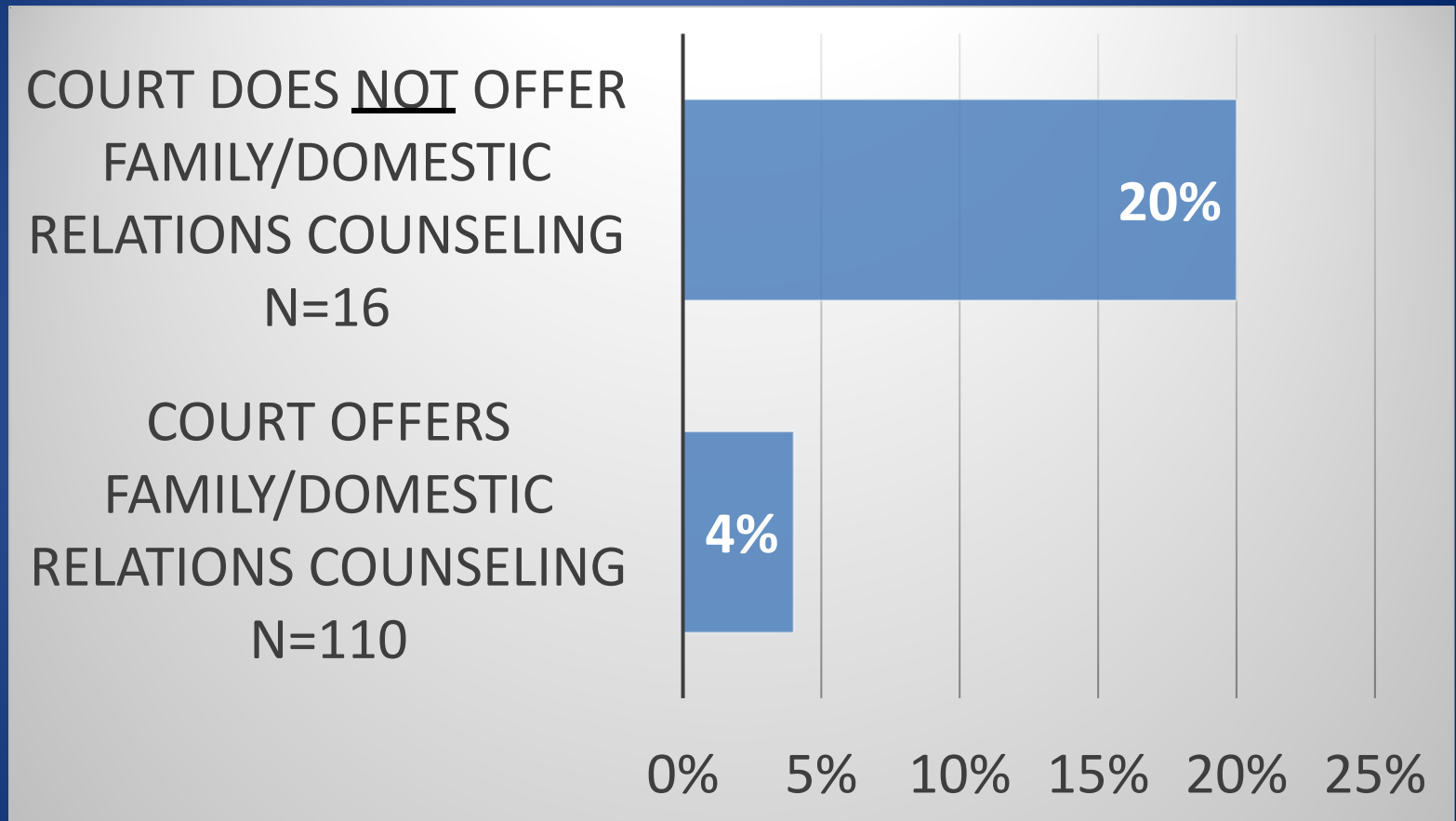
# Disparities in graduation rates vary

Adult,  
DWI  
Reentry



# Courts that offered family/domestic relations counseling 5 times less disparity\*

Adult,  
DWI  
Reentry



\*Analysis includes black and white participants only

In contrast, Courts that required participants to pay court fines and fees in order to graduate had two times greater disparity in graduation rates



\*Analysis includes black and white participants only



# Standard III: Role of the judge

The Drug Court judge stays abreast of current law and research on best practices in Drug Courts, participates regularly in team meetings, interacts frequently and respectfully with participants, and gives due consideration to the input of other team members

# Standard III: Role of the judge

## Best Practice Examples:

- Participants have status review sessions every 2 weeks, or once per week, in the first phase
- Judge spends an average of 3 minutes or more per participant during status review hearings
- The judge's term is as least 2 years or indefinite
- The judge was assigned to drug court on a voluntary basis

# Standard III: Role of the judge

## Best Practice Examples:

- Participants have status review sessions every 2 weeks, or once per week, in the first phase
- Judge spends an average of 3 minutes or more per participant during status review hearings
- The judge's term is at least 2 years or indefinite
- The judge was assigned to drug court on a voluntary basis

# Standard IV: Incentives and sanctions

Consequences for participants' behavior are predictable, fair, consistent, and administered in accordance with evidence-based principles of effective behavior modification

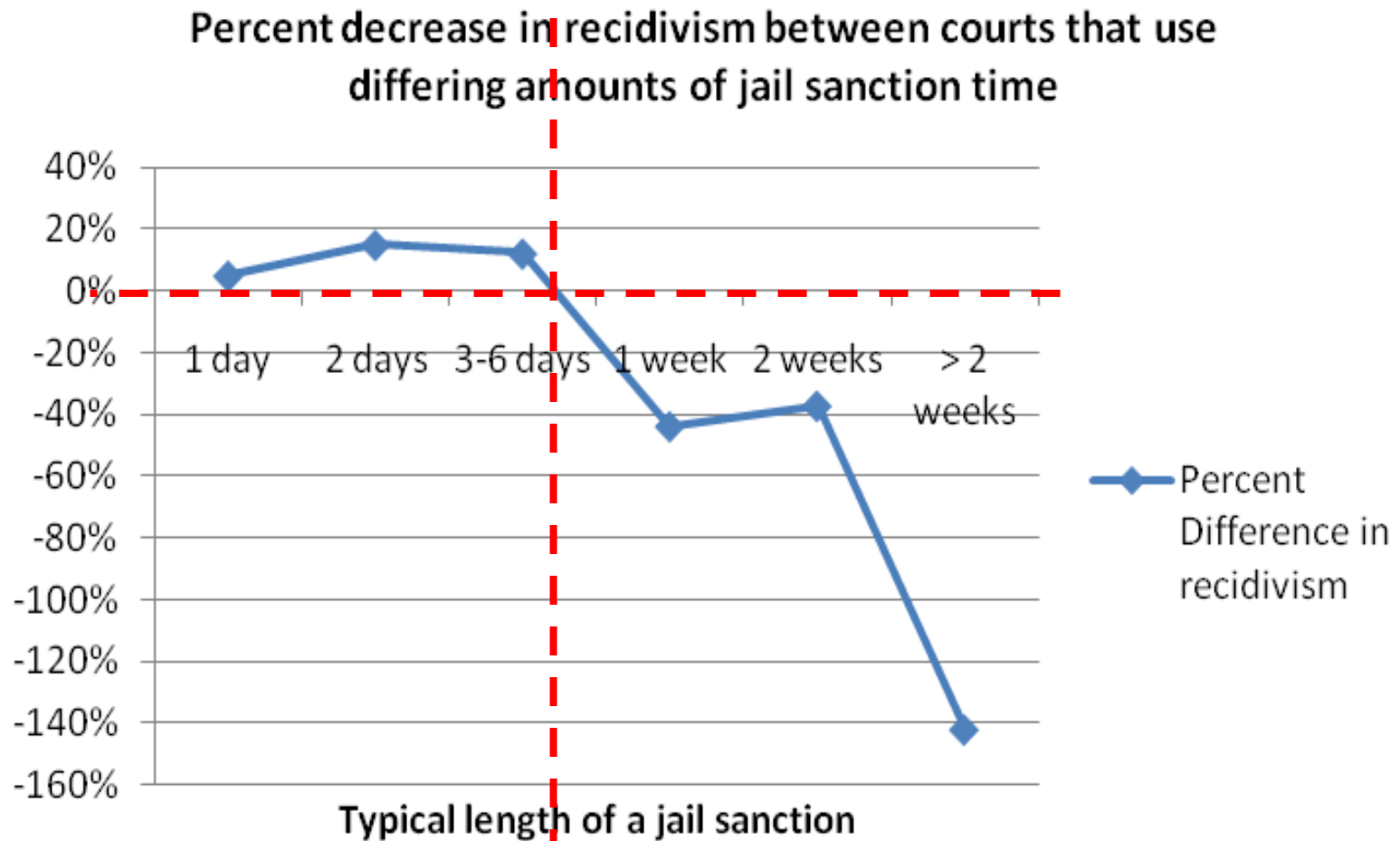
# Standard IV: Incentives and sanctions

## Best Practice Examples:

- Sanctions are imposed immediately after non-compliant behavior (e.g., drug court will impose sanctions in advance of regularly scheduled hearing)
- Program has a range of sanction options (including less severe sanctions such as writing assignments and community services and more severe sanctions such as jail time) – THESE ARE INDIVIDUALIZED
- The typical length of a jail sanction is 6 days or less

# Standard IV: Incentives and sanctions

Courts that typically impose jail longer than 6 days have worse (higher) recidivism



# New Research

## JDC Practices Related to Improved Outcomes (Higher Graduation Rates)

### **NO impact on graduation rate:**

- Detention or jail is used as a sanction for positive drug screens
- Detention or jail is used as a sanction for continued use
- Detention or jail is used as a sanction for other non-compliance  
(Ineffective to punish people for being sick.)

### **Higher graduation rate:**

Drug court uses detention/jail sanction for missed treatment sessions



# Standard IV: Incentives and sanctions

## Best Practice Examples:

- Sanctions are imposed immediately after non-compliant behavior (e.g., drug court will impose sanctions in advance of regularly scheduled hearing)
- Program has a range of sanction options (including less severe sanctions such as writing assignments and community services and more severe sanctions such as jail time) – THESE ARE INDIVIDUALIZED
- The drug court reports that the typical length of jail sanctions is 6 days or less



# Standard IV: Incentives and sanctions

- In order to graduate participants must have a job, be in school, or be involved in some qualifying positive activity
- In order to graduate participants must have a sober housing environment
- Participants are required to pay drug court fees

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# Standard V: Substance Use Disorder Treatment

Participants receive substance abuse treatment based on a standardized assessment of their treatment needs. Treatment providers are trained and supervised to deliver a continuum of evidence-based interventions that are documented in treatment manuals

# Standard VIII: Multidisciplinary Team

A dedicated multidisciplinary team of professionals manages the day-to-day operations of the Drug Court, including reviewing participant progress during pre-court staff meetings and status hearings, contributing observations and recommendations within team members' respective areas of expertise, and delivering or overseeing the delivery of legal, treatment and supervision services

# Standard VIII: Multidisciplinary Team

All key team members attend pre-court team meetings (staffings) and court sessions

Take a step back...

Premise: Purpose of drug court?



Behavior Change



# Standard VIII: Multidisciplinary Team

All key team members attend pre-court team meetings (staffings) and court sessions

- ✓ Judge → Authority/Parent – I & S
- ✓ Prosecutor → Public Safety
- ✓ Defense attorney → Due Process/Advocate
- ✓ Treatment → Medicine/treat sick behavior
- ✓ Supervision → Monitor behavior/CM
- ✓ Program coordinator → Communication/  
Collaboration

# Standard VIII: Multidisciplinary Team

## Family Drug Treatment Court

Child focus/Legal Status Civil (not criminal...?)

- ✓ Authority/Parent – I & S → Judge
- ✓ Public Safety → Child attorney/GAL
- ✓ Due Process/Advocate → Parent attorney
- ✓ Medicine → Treatment (family focus)
- ✓ Monitor behavior → Child Welfare/Supervision/LE
- ✓ Communication/  
Collaboration → Coordinator

# Standard VIII: Multidisciplinary Team

## Family Drug Treatment Court

*A note on law enforcement*





# Standard VIII: Multidisciplinary Team

## MH and Veterans Drug Treatment Court Mental Health/PTSD/Trauma Focus

- ✓ Authority/Parent – I & S → Judge
- ✓ Public Safety → Prosecutor
- ✓ Due Process/Advocate → Defense attorney
- ✓ Medicine → SUD/MH/Trauma Tx
- ✓ Monitor behavior/CM → Supervision/LE
- ✓ Communication/  
Collaboration → Coordinator
- Mentors

# Standard VIII: Multidisciplinary Team

## Juvenile Drug Treatment Court

### Status

- ✓ Authority/Parent – I & S → Judge
- ✓ Public Safety → Prosecutor
- ✓ Due Process/Advocate → Defense attorney
- ✓ Medicine → SUD/MH Tx
- ✓ Monitor behavior/CM → Supervision/LE
- ✓ Communication/  
Collaboration → Coordinator
- School Rep and CW

# Standard VIII: Multidisciplinary Team

## DWI Court

### Dangerous Behavior/↑ Supervision

- ✓ Authority/Parent – I & S → Judge
- ✓ Public Safety → Prosecutor
- ✓ Due Process/Advocate → Defense attorney
- ✓ Medicine → SUD Tx
- ✓ Monitor behavior/CM → Supervision/LE
- ✓ Communication/  
Collaboration → Coordinator
- Heavy monitoring

# Standard VII: Drug and Alcohol Testing

Drug and alcohol testing provides an accurate, timely, and comprehensive assessment of unauthorized substance use throughout participants' enrollment in the Drug Court

# Standard VII: Drug and Alcohol Testing

## Best Practice Examples:

- Drug testing is random/unpredictable
- Drug test results are back in 2 days or less
- Drug tests are collected at least 2 times per week
- Participants are expected to have greater than 90 days clean (negative drug tests) before graduation

# Standard VII: Drug and Alcohol Testing

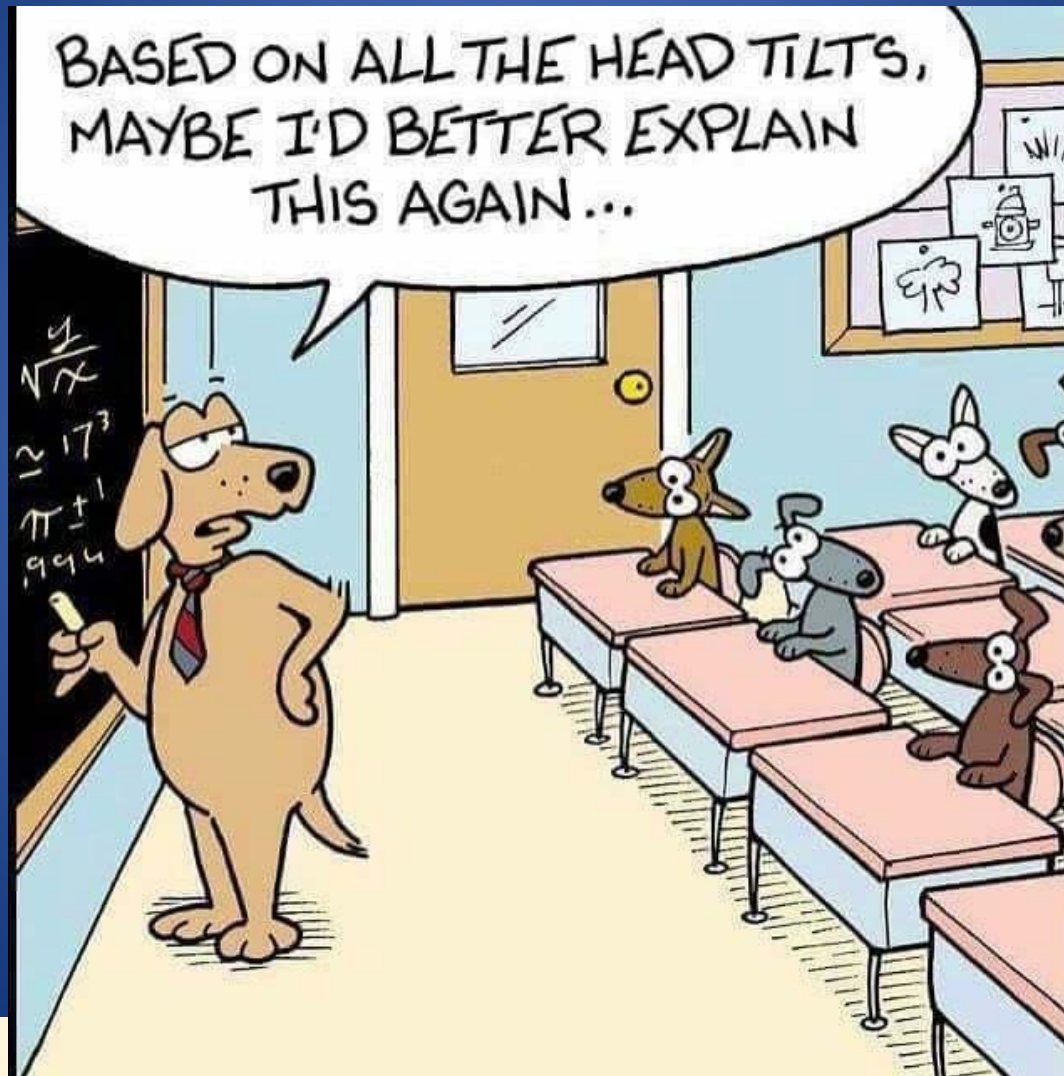
## Best Practice Examples:

- Drug testing is random/unpredictable
- Drug test results are back in 2 days or less
- Drug tests are collected at least 2 times per week
- Participants are expected to have greater than 90 days clean (negative drug tests) before graduation

# Standard X: Monitoring and Evaluation

The Drug Court routinely monitors its adherence to best practice standards and employs scientifically valid and reliable procedures to evaluate its effectiveness

# Questions or Comments?





# Updates on Standards Project

## Background:

Intention is to break down the Adult Best Practices Standards into measurable items to assist teams and programs to increase fidelity to the best practices in the drug court model

# Updates on Standards Project

Three ways to measure fidelity

1. Practitioner knowledge of the standards/best practices
2. Team self assessment of whether the program is implementing standards
3. Outside assessment of whether the program is implementing the standards

# Updates on Standards Project

Three ways to measure fidelity

- 1. Practitioner knowledge of the standards/best practices**
2. Team self assessment of whether the program is implementing standards
- 3. Outside assessment of whether the program is implementing the standards**

# Updates on Standards Project

- NPC broke the standards down into individual measurable practices.
- Committee met to review the breakdown and decide whether to approve
- Began discussion of relative importance of each of the practices
- Were there any practices that, if not performed, would mean the program was NOT a drug court
- 10 Key Components

# Contact Information

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# Thank you for attending!

Please remember to fill out your  
evaluation

