









ADULT DRUG COURT BEST PRACTICE STANDARDS VOLUME I & II

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WHY STANDARDS?

- **✓** Put null findings in context (8 16%)
- Disown harmful programs (6 9%)
- Prevent regression to old habits (model drift)
- **✓** Protect "brand name" from incursions
- **✓** Define standard of care for ourselves
 - Limit appellate review to conformance with standards rather than creating standards
 - Congressional committees, agencies, etc.



WHY STANDARDS?

- Reduce legal & constitutional errors
 - Procedural due process requires standards, rational basis, and notice of rights being waived
- **✓** Reduce disparate impacts (violations of Equal Protection)
- **✓** Provide support and political cover for needed services and expenditures
- Demonstrate maturity of our profession
- Because we care about getting it right!



VOLUME I



VOLUME I

Twenty out of twenty-five states (80%) responding to a national survey indicated they have adopted the Standards for purposes of credentialing, funding, or training new and existing Drug courts in their jurisdictions.



VOLUME I

- I. Target Population
- II. Equity and Inclusion in Drug Courts
- III. Roles & Responsibilities of the Judge
- IV. Incentives, Sanctions, & Therapeutic Adjustments
- V. Substance Use Disorder Treatment



TARGET POPULATION

- Eligibility & Exclusion Criteria are Based on Empirical Evidence
- Assessment Process is Evidence-Based
 - A. Objective Eligibility Criteria
 - B. High-Risk & High-Need Participants
 - C. Validated Eligibility Assessments
 - D. Criminal History Disqualification
 - "Barring legal prohibitions..."
 - E. Clinical Disqualifications



TARGET POPULATION

Don't Treat or House

High Risk and Low

Risk Together

IARNING



EQUITY AND INCLUSION IN DRUG COURTS

Equivalent Opportunities to Participate and Succeed in Drug Court

- A. Equivalent Access (intent & impact)
- B. Equivalent Retention
- C. Equivalent Incentives & Sanctions
- D. Equivalent Legal Disposition
- E. Team Training (remedial measures)



ROLES OF THE JUDGE

Contemporary Knowledge; Active Engagement; Professional Demeanor; Leader Among Equals

- A. Professional Training
- B. Length of Term
- C. Consistent Docket
- D. Pre-Court Staff Meetings
- E. Frequency of Status Hearings
- F. Length of Court Interactions
- G. Judicial Demeanor
- H. Judicial Decision-Making



INCENTIVES & SANCTIONS

Predictable, Consistent, Fair, and Evidence-Based

- A. Advance Notice
- B. Opportunity to be Heard
- C. Equivalent Consequences
- D. Professional Demeanor
- E. Progressive Sanctions
- F. Licit Substances



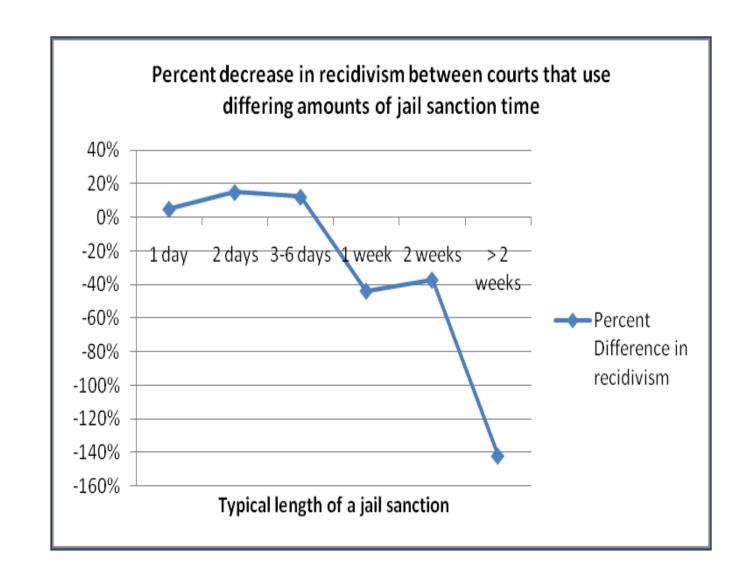
INCENTIVES & SANCTIONS

Predictable, Consistent, Fair, and Evidence-Based

- G. Therapeutic Adjustments
- H. Incentivizing Productivity
- I. Phase Promotion
- J. Jail Sanctions
- K. Termination
- L. Consequences of Graduation and Termination (leverage)



INCENTIVES & SANCTIONS





SUBSTANCE USED DISORDER TREATMENT

Based on Treatment Needs and Evidence-Based

- A. Continuum of Care "if adequate care is unavailable…"
- B. In-Custody Treatment
- C. Team Representation
- D. Treatment Dosage and Duration
- E. Treatment Modalities



SUBSTANCE USED DISORDER TREATMENT

Based on Treatment Needs and Evidence-Based

- F. Evidence-Based Treatments
- G. Medications
- H. Provider Training and Credentials
- I. Continuing Care



VOLUME II



VOLUME II

VI. Complementary Treatment & Social Services

VII.Drug and Alcohol Testing

VIII.Multidisciplinary Team

IX. Census and Caseloads

X. Monitoring and Evaluation



Participants receive complementary treatment and social services for conditions that co-occur with substance use disorder and are likely to interfere with their compliance in Treatment court, increase criminal recidivism, or diminish treatment gains.



- **✓** Scope of Services
- **✓** Sequence and Timing of Services
- **✓ Clinical Case Management**
- Housing Assistance
- **✓** Mental Health Treatment
- **✓** Trauma-Informed Services



- Criminal Thinking Interventions
- **✓** Family & Interpersonal Counseling
- **✓ Vocational & Educational Services**
- **✓ Medical & Dental Treatment**
- **✓** Prevention of High-Risk Behaviors
- **✓ Overdose Prevention & Reversal**



- 1. Do not begin criminal thinking interventions during Phase 1
- 2. Enlist at least one reliable prosocial family member, friend, or daily acquaintance to provide feedback to staff and assist participant





TIMING MATTERS







Responsivity Needs

Criminogenic Needs Maintenance Needs

Early

Middle

Late



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



- Frequent Testing
- Random Testing
- Duration of Testing
- Breadth of Testing
- Witnessed Collection



- **✓** Valid Specimens
- Accurate & Reliable Testing Procedures
- Rapid Results
- **✓** Participant Contract



- 1. Randomly test at least twice per week, including weekends and holidays and require participants to report within 8 hours of notification.
- 2. Continue testing randomly at least twice per week until participant is preparing for graduation in the final phase.



AVOID RESPITES FROM DETECTION

- ✓ A participant should have an equal chance of being called on any day of the week
- Avoid randomizing in weekly blocks
- Test routinely for all drugs commonly used by population





MULTIDISCIPLINARY TEAM

A dedicated multidisciplinary team of professionals manages the day-to-day operations of the Treatment court, including reviewing participant progress during precourt 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.



Velcomes

You

Composition & Training

Pre-Court Staff
Meetings & Status
Hearings

Team

Sharing Information

Communication & Decision Making



MULTIDISCIPLINARY TEAM

- 1. Judge considers perspectives of all team members before making decisions that impact participants' welfare or liberty interests.
- 2. Defense attorneys inform participants and team members whether they will share confidential information concerning participants with other team members.

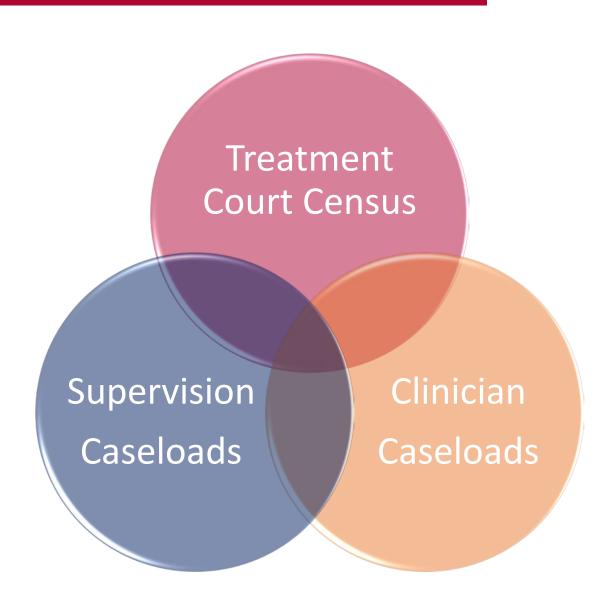


CENSUS AND CASELOADS

The Treatment court serves as many eligible individuals as practicable while maintain continuous fidelity to best practice standards







CENSUS AND CASELOADS

NADCP GENSUS AND GASELUADS			
ALL RISE			
CS		High Risk	Low Risk
5			Probation:
	High	30 to 1	50 to 1
Velcomes You	Need	(or less)	Treatment:
			30: 1
		Probation:	200:1
	Low	30 to 1	
	Need	Treatment:	Don't Belong in
		50: 1	Drug Court



The Treatment court routinely monitors its adherence to best practice standards and employs scientifically valid and reliable procedures to evaluate its effectiveness.



- Adherence to Best Practices
- **✓** In-Program Outcomes
- Criminal Recidivism
- **✓** Independent Evaluations
- **✓** Equity and Inclusion in Drug Courts



- **✓** Electronic Database
- **✓** Timely & Reliable Data Entry
- **✓** Intent-to-Treat Analyses
- Comparison Groups
- **✓** Time at Risk



- 1. Analyze outcomes for all participants, including those who withdrew or were terminated early.
- 2. Staff members are required to record information regarding service provisions within 48 hours.





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