The Tribal Ten Key Components and National Drug Court Standards

Part II: Key Components 7-10

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Wellness Court Program Principles

Staffing/Hearing  Judicial Interaction  Data Collection and Reporting
Complementary Support Services
Standard #6: Complementary Treatment and Social Services

- **Scope**
  Provide or refer to services that address *responsivity* needs, *criminogenic* needs, and *maintenance* needs.
  Such as:
  - Housing assistance
  - Mental health
  - Trauma-informed services
  - Criminal-thinking interventions
  - Family or interpersonal counseling
  - Vocational or educational services
  - Medical or dental
Standard #6: Complementary Treatment and Social Services

• **Sequence and Timing**
  Phase 1: Responsivity needs
  Phases 2-3: Criminogenic
  Phase 4: Maintenance

• **Clinical Case Management**
  Meet w/ case manager at least 1x/week in Phase 1.
  • Appendix C: Complementary Needs Assessments
  • Appendix D: Clinical Case Management

• **Criminal Thinking Interventions**
  • Moral Reconation Therapy; Thinking for a Change; Reasoning & Rehabilitation
Key #5: Support and Supervision

- Participants are monitored through intensive supervision that includes frequent and random drug testing, while participants and their families benefit from effective team-based case management.
• **Breadth of Testing and Rapid Results**
  Along with all suspected substances, random specimens are periodically tested. Results within 48 hours.

• **Witnessed Collection** verifying a **Valid Specimen**

• **Accurate and Reliable Testing Procedures**
  Chain of custody is established. Barring staff expertise, results below industry levels are not considered positive.

• **Participant Contract** (suggested language)
Case Management and Drug Testing
Case Management

Case management and treatment plans should be
- individualized
- culturally appropriate,
- based on an assessment of the participant’s and family’s needs.

Evidence-based case management involves
- (1) providing a single point of contact for multiple systems
- (2) advocating for participant and family
- (3) being flexible, community-based, and client-oriented
- (4) helping the participant and family manage other related needs.
Standard 9: Census and Caseloads

S9: Supervision Caseload
At 30 participants, monitor program operations; caseloads should not exceed 50 participants.

S7: Frequent Testing
Urine testing at least 2x/week until last phase.

S7: Random Testing
Drug testing takes place on nights and weekends. Urine specimens are delivered within eight hours.
Standard 9: Census and Caseloads

◦ **Drug Court Census**
  No arbitrary restrictions on the number of participants. Census is based on local need, obtainable resources, and the ability to apply best practices.

◦ Drug Courts serve fewer than 10% of adults in the criminal justice system in need of their services.
Progressive incentives and sanctions are used to encourage participant compliance with Wellness Court requirements.
• **Equivalent Consequences**
  Incentives and sanctions are equivalent to similarly situated participants.

• **Progressive Sanctions**
  Sanctions of varying magnitudes are administered based on proximal and distal goals.

• **Incentivize Productivity**
  Productive behaviors are as emphasized as reducing negative behaviors. 4:1
Incentives and Sanctions
Standard #4: Incentives, Sanctions and Therapeutic Adjustments

• **Advance Notice:**
  The policies and procedure articulate the possible legal and collateral consequences.

• **Opportunity to Be Heard:**
  Participants are given an opportunity to explain their perspectives, including with the assistance of a defense counselor, and receive clear justifications for court actions.
Standard #4: Incentives, Sanctions and Therapeutic Adjustments

• **Phase Promotion**
  Phase advancement is based on objective, realistic, and defined objectives. In later phases, sanctions can increase, incentives decrease, and supervision can reduce. Treatment is only reduced for clinical reasons. Drug testing is only reduced after treatment and supervision has been reduced.

• **Jail**
  Jail is used sparingly, and no longer than 3-5 days, only after a hearing with access to counsel.
Standard #4: Incentives, Sanctions and Therapeutic Adjustments

• **Therapeutic Adjustments**
  Participants are not sanctioned if they are otherwise compliant but are not responding to treatment. Positive drug tests should not be severely sanctioned in the early phases.

• **Standard #5: Jail**
  Participants are not incarcerated to achieve clinical or social services.
Standard #4: Incentives, Sanctions and Therapeutic Adjustments

- **Incentive to Graduate and Consequence of Termination:**
  Graduates avoid a criminal record, incarceration, or receive a substantially reduced sentence or disposition. Individuals who are terminated from program, may face the initial legal sentence.
Key #7: Respectful Communication

• The Wellness Court Judge should have ongoing involvement with the team and with each participant.
Standard #3: Roles and Responsibilities of the Judge

• **Consistent Docket**
  Participants appear before the same judge, who serves for no less than 2 consecutive years.

• **Staffing**
  Judge regularly attends staffings.

• **Hearings**
  Hearings are at least every 2 weeks. Frequency may be reduced in later phases, but no less than every 4 weeks.
  Judge reviews each participants’ progress for at least 3-7 minutes.
Drug Courts That Held Status Hearings Every 2 Weeks During Phase 1 Had 50% Greater Reductions in Recidivism

Note: Difference is significant at p<.1
Pre-Court Staffing Meeting
Progress Reports

• How is information shared for the progress report?
  • Centralized data system, emailed the day before, individual tracking

• When is the report shared? Can team members read ahead of time?

• Program Progress
  • Incentives and Sanctions
  • Drug tests
  • Attendance
  • Phase / # of Days Sober
  • Treatment progress
  • Long-term goal progress (housing, education, projects)
  • Children status
## Appendix D: Sample Participant Progress Reports

<table>
<thead>
<tr>
<th>Participant picture</th>
<th>Name:</th>
<th>Phase:</th>
<th>Start Date:</th>
<th>Scheduled End Date:</th>
</tr>
</thead>
</table>

### CASE INFORMATION
- **Cause Number**
- **Convictions**
- **Judge**

### Employer | Shift | [e.g., weekdays]
--- | --- | ---
- **Driver’s License** | [Yes/No] | Diploma or GED
- **Moved Phases** | [Phase/Date] | Scheduled Phase Move | [Date]

### TREATMENT
[Treatment requirements and notes here]

### DRUG TESTING

#### POSITIVE TESTS
- **Date**
- **Substance**

#### MISSED TESTS
- **Date**

### SANCTIONS
- **Date**
- **Sanction(s)**
- **Completed** [yes/no; notes]

#### Description of sanction and notes

### FEES
- **Drug Court:**
- **Other:**

### Court Review Information: [Notes]
Staffing – Who Should Be There?

- Judge – Court sees better criminal justice outcomes with their presence
- Direct reps. vs. Liaisons
- Support services – when is it too many?

- Discussion on Efficiency
- The need for other department/agency participation
- Referral challenges
## Structure of the Staffing

<table>
<thead>
<tr>
<th>Action</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address</td>
<td>Address participants on an individual basis</td>
</tr>
<tr>
<td>Allow</td>
<td>Allow input from all team members</td>
</tr>
<tr>
<td>Resolve</td>
<td>Resolve disagreements between team members so as to present a united front in court</td>
</tr>
</tbody>
</table>
Progress and desired behavioral changes:

- Progress and accomplishments vs. just their problem areas
- Behavioral change vs. just attendance or compliance
- Useful updates vs. gossiping
- Problem solving vs. problem reporting
The Hearing
Standard #3: Roles and Responsibilities of the Judge

• **Judicial Demeanor**
  Judge is supportive, stresses the importance of their commitment, and expresses optimism about their abilities. The judge allows for an opportunity to be heard.

• **Judicial Decision Making**
  The judge is the final arbiter concerning legal status and liberty.
Structure of the Hearing

Team members – Perception of Collaboration
- Who is present? Where do they sit?
- Where is the judge seated? In their robes?

Participants
- Where do they sit?
- Can participants leave early?

Order
- Cultural opening?
- Is the hearing organized and focused (side conversations, continual entry/exit)?
- What order are cases called?
Interactive Dynamics

• Speak directly to participants
• Types of questions
  • Engaging?
  • Open-ended questions: draw out the participant’s own perceptions on self
  • Affirmations
  • Reflective listening
• From where does the judge request answers, information, explanations?
  • Participant; Team members; Both?
Family-Focused

• Child care
• Ask about ...
  • Experiences in visitation/parenting time
  • Skills knowledge learned in parenting program
  • Status of the children and other family members
  • Status of the children’s/family’s clinical services
  • Status of the children’s/family’s support services
• Process measurement, performance measurement, and evaluation are tools used to monitor and evaluate the achievement of program goals, identify needed improvements, determine participant progress, and provide information to outside agencies.
Standard #10: Monitoring and Evaluation

- **Electronic Database**
  Services and in-program performance are electronically tracked within 48 hours of events by every team member.

- **Intent-to-Treat Analyses**
  Track the outcomes for every *eligible* participant, including those who graduated, withdrew, and were terminated.

- **Comparison Groups**
  Wellness Court outcomes are compared to an equivalent comparison (legal and clinical) group.
Standard #10: Monitoring and Evaluation

◦ **Outcome Evaluations**
  Measure the effectiveness of the Court in the context of its adherence to best practices. Conduct an *independent evaluation* at least every 5 years.

◦ **In-Program Outcomes**
  Participant outcomes are monitored, like attendance, drug tests, new arrests, etc.

◦ **Criminal Recidivism**
  New arrests/convictions are monitored for at least 3 years.
Tracking Your Participants

• Pre-Court
  • Referral Date
  • Assessments
  • Intake
    • Demographics
    • Family
    • Justice-System Background
  • Entry Date

• Wellness Court
  • Phase
  • Drug Tests/Sobriety
  • Check-ins
  • Treatment compliance
  • Other activity compliance
    • Community Service
  • Incentives and Sanctions
  • Treatment Plan Goals
  • Family status
  • Services for self and family

• Post-Discharge
  • Treatment
  • Justice-System Involvement
  • Engagement with Peer-Support
  • Housing
  • Family status
Tracking Your System

- **Scale**
  - Percentage of eligible candidates that enter the Wellness Court

- **Engagement**
  - Percentage of referrals that enter the Wellness Court

- **Timely Access**
  - Average # of days from case open to Wellness Court entry
  - Average # of days from referral to entry

- **Retention**
  - Average # of days in Wellness Court for all discharges
  - Percentage of participants by discharge
    - Graduates
    - Neutral discharge
    - Terminations
    - Other unsuccessful discharge
Data Collection and Reporting
Types of Evaluation

**Process evaluation** - track caseflow, service delivery and resources in relation to target population, policies and procedures over time

**Outcome evaluation** - measure program's influence on graduation, criminal recidivism and relapse

**Impact evaluation** - gauge the intervention's effect on the target population, comparing equivalent offenders outside the program

**Cost-efficiency analysis** – measure what impact the program has on public resources and expenditures and whether the investment yields savings over the status quo or an alternative
• Continuing interdisciplinary and community education promote effective planning, implementation, and operation.

• **Team Training**
  Team members should attend training at least on an annual basis, for an update on
  • Substance abuse and mental health treatment
  • Complementary treatment and social services
  • Behavior modification
  • Community supervision
  • Drug and alcohol testing
  • Team decision making
  • Constitutional and legal issues
Team Training

- **S2: HDG Team Training**
  Each team member attends up-to-date training on implicit cultural biases, and correcting disparate impact.

- **S3: Judicial Professional Training**
  The Judge attends training on legal and constitutional issues, judicial ethics, evidence-based treatment, behavior modification, and supervision.

- **S6: Trauma-Informed**
  Be aware of hesitation to trust; noisy, unpredictable court/therapy environments
Key #10: Sustained Team, Community and Nation Building

- The Wellness Court should continue to develop and maintain ongoing commitments, communication, coordination, and cooperation among team members, service providers, and the community.
• **Staffings and Hearings**
  Team members regularly attend staffings and hearings to review and contribute on participant progress.

• **Sharing Information**
  Team members share information to appraise participants’ progress. Partner agencies execute MOUs. Participants provide consent forms.

• **Team Communication and Decision Making**
  Team members contribute based on their expertise.
Questions?

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