

Makah Tribe Project Narrative – HTWC Application

a) **Statement of the Problem:** The Makah Indian Reservation is in urgent need of a Tribal Healing to Wellness Court (HTWC) to address escalating alcohol and drug-related (AOD) criminal activity by repeat offenders. The Tribe currently spends \$366,996 annually for full time court operations in both civil and criminal cases. However, this does not provide for the staff and technology required for our court to operate effectively in criminal cases – which are almost all virtually alcohol or drug-related. Without federal assistance, we do not have the ability to fund a much-needed Healing to Wellness Court (HTWC) program to more effectively address our underlying criminogenic issues.

- **Nature and scope of the substance abuse problems in the Makah Tribal jurisdiction:** The substance abuse problem in Neah Bay pervades all aspects of the lives of community members of every age, from very young/very old victims to the offenders, who tend to be male and between ages 18 and 45. While virtually all – 98 % – of criminal activity and victimization occurring on the Makah Reservation is AOD-related, and 75 % is non-violent, all AOD-related criminal activity has many direct and indirect victims and impacts many lives. Burglary and theft crimes to fund alcohol and drug purchases are rampant and increasing. Not only, as shown below in Tables 1 and 2, have first offense property crimes increased from 25 in 2011 to 32 in 2012, but second offense property crimes increased from 54 in 2011 to 84 in 2012. At the same time, demand for search warrants directed at burglary/theft and drug possession/trafficking activity have nearly doubled from 25 in 2011 to 45 in 2012. It is particularly distressing that some of our AOD-related property crimes implicate a significant violation of tribal culture, such as stealing of elders' medication by younger family members; theft of precious family woven baskets and wood carvings to pawn or sell, and other AOD-related crime included in Tables 1 and 2 (involving cultural violations/disconnect) includes child neglect resulting from parents

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abusing substances, not properly caring for or supervising their children and leaving the children vulnerable to predators and other harm. Indeed, the 2010 Makah Strategic Plan (attached to this proposal) has identified illegal drug and alcohol use and drug trafficking as the greatest single threat to tribal safety and welfare.

Under our current system, almost every offender is required to enter a chemical dependency treatment program with Makah Chemical Dependency (MCD). Table 1, below, sets forth the number of AOD-related, non-violent *first offenses* in 2011 and the increased number in 2012. Table 2, below sets forth the number of AOD-related, non-violent second or greater offenses in 2011 and the increased number in 2012. Between 2011 and 2012, AOD-related *repeat* non-violent offenses have almost doubled in Makah Tribal Court.

TABLE 1 – FIRST OFFENSES (AOD-RELATED/NON-VIOLENT) IN MAKAH TRIBAL COURT, 2011-2012.ⁱ

	2011	2012
FIRST OFFENSE		
AOD-Property (Theft) Crimes	25	32
DUI/Negligent Driving	15	17
Drug Possession/Trafficking	10	15
Disorderly Conduct (Public Intoxication)	15	17
AOD – Child Neglect	5	3
Other Non-Violent Crimes	1	4
TOTAL NON-VIOLENT CRIMES	71	88

TABLE 2 – SECOND OR GREATER (AOD-RELATED/NON-VIOLENT) OFFENSES IN MAKAH TRIBAL COURT, 2011-2012.

	2011	2012
SECOND OFFENSE		
AOD – Property (Theft type) Crimes	54	84
DUI/Negligent Driving	25	30
Drug Possession/Trafficking	30	45
Disorderly Conduct (Public Intoxication)	25	54
AOD – Child Neglect	10	12
Other Non-Violent Crimes	3	8
TOTAL NON-VIOLENT CRIMES	147	233

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Problems with current court response to cases involving substance abuse:

The major problems with our current court response are: 1) the high rates of recidivism indicate that our dual approach of western punishment combined with standard substance abuse treatment is not working as a deterrent to AOD-related criminal behavior; and 2) our current monitoring, supervision, and oversight is insufficient to ensure compliance with court-ordered treatment. To present date, the majority of our offenders – who are repeat offenders – fail to comply with sobriety/treatment requirements, with the result that 60 % (or more) of the approximate one year suspended jail time (up to 7 months or more) is revoked – often as a result of commission of new AOD-related offenses. This recidivism relates to continued alcohol/drug abuse and the fact that many offenders are not receptive to the out-patient treatment steps required by MCD – which lacks in effective monitoring and supervision, while the treatment design lacks an essential cultural component.

The HTWC will also address the current arrest volume – the majority of which is repeat, AOD-related offenders – by stopping the cycle of recidivism. Repeat offenders will be so closely monitored and supervised that they basically will have no alternative but to embrace principles of wellness. Using mechanisms of cultural significance, we will be re-connecting these offenders to the critical cultural supports that will improve their unique life situation. These supports and services will include: cultural activities and belonging, spiritual resources, mental health services, family support systems, emotional support system, career development, physical exercise and wellness, hobbies, recreation, entertainment and humor. Furthermore, making accommodations for addressing the roots of trauma contributing to substance abuse – in a culturally relevant and safe way – is a new goal in our efforts in the recovery process. We anticipate that this will be done through the HTWC process – utilizing the Assertive Community

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Treatment Case Management model to provide comprehensive treatment and wrap-around services to non-violent offenders – tailor-made to meet the community’s justice-related needs.

We currently have 50 treatment slots in MCD– this number is adequate to meet our anticipated HTWC caseload of 20 participants (please note that the majority of these same participants have already been regularly in and out of MCD treatment, sometimes over a period of several years).

Proposed Target population and the number of people who will be served by

grant funding: Our target population is Native American, 70 % of whom are male and ages 18-45 exhibiting high-risk levels of criminogenic behaviors, including active and lengthy substance abuse, lack of follow-through on previous chemical dependency treatment; antisocial attitudes, values, beliefs and feelings; low self-control and inadequate problem-solving skills; a criminal history associated with AOD; anger/hostility; criminal associates/peers; dysfunctional family; unemployment or underemployment; and lack of appropriate leisure and recreation. We are basing our target population on: 1) the criminogenic characteristics of our current court-involved population; and 2) our experience with our current IASAP grant (in the final year of a 3-year grant), with which we are providing some limited case management to six (6) AOD-related offenders. We will begin our program by serving the six (6) offenders currently in the IASAP program, and will initially expand that capacity to 20, utilizing the intensive Assertive Case Management model. As the program progresses, we will be evaluating success and opportunities to potentially embrace co-occurring disorders and further expanding our program capacity as well. Unlike offenders in our current system, participants in the HTWC program will **not** be required to serve jail time – non-participants (and those participants who do not successfully complete the program) will be facing potential jail time of up to one year for each of their underlying criminal charges.

b) Project Design and Implementation:

- ***Initial Screening and referral process/eligibility requirements:*** The HTWC program requires that violent offenders and sex offenders are ineligible for participation and that any participant must have a chemical dependency. Initial screening will take place as early in the process as possible and will have two parts – legal screening will be conducted by the prosecutor and public defender to review police reports and or confer with NBPS and screen out violent and sex offenders; whereby the initial clinical screening will have the SASSI-3 conducted by the HTWC Coordinator, who will explain program benefits to offenders– including cultural activities, education, TANF, housing, medical and employment assistance – as well as the deterrents to refusing to enter the program, including possible exclusion from tribal jurisdiction and extensive jail time. The public defender will ensure that all participants fully understand their legal rights and the consequences resulting from entry into the HTWC program. Subsequent to the participant signing a contract for entry, MCD will administer the American Society for Addictive Medicine (ASAM) assessment to determine the participant’s therapeutic needs. The Treatment Team will review all screening information to refer the participant to required programs –detoxification, mental health treatment, relapse prevention, inpatient treatment, employment services, educational services, parenting services, housing assistance, budgeting, meeting with the Elder’s Panel and traditional cultural and healing services.

- ***Structure of the Healing to Wellness Court:*** We will implement a hybrid Healing to Wellness Court structure including: 1) a pre-plea or diversionary option where the participant may enter the program prior to formally entering a guilty plea in the underlying criminal case with the agreement that the charges will be dismissed upon successful completion of treatment; and 2) a post-plea or term of probation option where the participant can avoid incarceration

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through entry into the program and will also allow the offender to expunge his or her record once they remain arrest-free for an additional two-year period.

- ***Length and phases of program:*** The program will last a minimum of nine months –three months each in Phases 1-3 –with additional monitoring for another six-months to a year. Traditional cultural treatment activities (as discussed with and referred by the Treatment Team, as described in our Competencies & Capabilities section, pg 13) will be required in each phase. The first stage of treatment - ***Phase I*** - addresses the participant’s receptiveness to treatment. Providers will work with the offender to develop mechanisms, including cultural mechanisms, for coping with stress. During this phase, participants attend group counseling (including cultural group, survivors of abuse group, parents group, etc.) on a three-times a week basis and one-on-one counseling on a once-a-week basis, with a minimum of once-a-week drug monitoring. During ***Phase II***, participants will attend group counseling twice-a-week and one-on-one sessions a minimum of twice a month. Random drug testing will continue on at least a once-a week basis. Throughout ***Phase III***, participants will attend group counseling once-a-week. Self-sufficiency and relapse prevention as a part of discharge planning will be provided to all participants prior to graduation. Random drug testing will continue at least once-a-week and traditional cultural treatment activities as well as other individualized treatment requirements - as determined and referred by the Treatment Team - will be required for at least a six month monitoring period after graduation.

- ***Case Management Process:*** We will implement the Assertive Community Treatment Case Management Model - an intensive model with low caseloads and frequent, community-based contact with clients. Our Treatment Team will share the caseload and work together to provide proactive services, assertive outreach and strong advocacy to participants. The team will

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provide most services directly to the participant, and if referring to an outside agency, the team will carefully monitor the relationship between the participant and the service provider. The Healing Court Coordinator will be the person responsible to receive and share the case management information with other team members, who will share the five case management functions of assessment, planning, linking, monitoring, and advocacy.

- **Community Supervision:** Effective community supervision is necessary to maintain a balance between participant treatment needs and community public safety requirements to ensure that participants who enter the program do not pose an undue risk of violence or predatory behavior while working toward change and to closely monitor the behavior of participants in a manner that corresponds to their identified level of risk. Community supervision will be ensured through random visits into the home by probation and police officers; regular check-ins by text and phone with the HTWC Coordinator; random and regular urinalyses at Healing Court sessions, with treatment, and in the home; and regular meetings at the probation office. The challenge will be to balance the perceived risk with the need to gradually reduce in-program and post-program supervision levels as ongoing assessment of participant progress, which indicates substantial movement toward a sober reintegration into the community.

- **Treatment Services:** The HTWC program will provide chemical dependency treatment, mental health treatment, housing support services, family advocacy, victim services, educational services, employment services, budgeting services, TANF, and cultural services and support.

- **Recovery Support Services Delivery Plan:** We recognize that participants will not remain engaged in treatment unless they are provided services and supports that are internally relevant and meaningful to their lives – treatment will not be successful until participants’ basic human needs of physical health, mental health, nutrition, home/shelter, and employment/income

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are met. Our recovery support services delivery plan is based upon the following principles of wellness: cultural belonging, spiritual resource, family support system, emotional support system career development, physical exercise, hobbies and entertainment. Our Healing to Wellness Court Team (Treatment Team) will develop a participant's Recovery Support Services on an ongoing basis through each phase of the program, to support all other treatment activities.

- **Judicial Supervision:** The judge serves as the leader of the Healing Court Team and is a link between the tribal justice system and the community's healing resources. Judicial participation at weekly staffing will promote consistency in the team's prompt response to conduct and assure that the judge is fully prepared for the hearing. The judge will have a basic understanding of alcohol/drug treatment and cultural practices and be able to discuss the treatment plan with trained providers. The court will apply appropriate incentives and sanctions at each hearing.

- **Process for Random Drug Testing:** The program will include frequent, random and observed court-ordered alcohol and other drug testing – planned testing will occur once a week immediately after Healing Court and random testing will be conducted at least one other time a week as ordered by tribal police, the Healing Court Coordinator, or tribal probation, as well as sobriety check-ins and required participation in monitored treatment and services.

- **Incentives and Sanctions:** The ground rules will be laid out in advance in a written program handbook – which will define infractions and set out what the permissible level of sanctions that may be imposed for specific behavior as well as what behavior will merit incentives. Clients will be closely monitored on a continuous basis for treatment attendance, substance use and criminal activity to ensure that infractions are reliably detected and receive a timely prompt response. Positive reinforcement will be incorporated into all levels of the

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program – from praise by the judge, to tangible incentives/prizes (vouchers, gift cards, or prizes), awarded in the Healing Court setting, as well as in the treatment setting, at probation and in case management for positive accomplishments. Having tangible incentives being awarded in settings outside of the court will act as incentives to reinforce regular attendance and drug abstinence in each of those settings. Reports to the judge in the court will highlight success and accomplishments of participants and the judge will deliver praise for accomplishments, including praising the award of incentives which occurred outside of the courtroom.

Since sanctions tend to be least effective at the lowest and highest magnitudes, the handbook will set forth a range of intermediate sanctions that can be ratcheted upward or downward in response to clients' behavior. Understanding that relapse is a part of the substance addiction recovery process, we will administer punitive sanctions for willful noncompliance with program requirements, but will apply remedial or therapeutic responses to insufficient progress in treatment. Both sanctions and incentives will be used – and will balance each other to achieve long-term changes in pro-social behavior that will continue to compete against drug use and crime into the future. ⁱⁱ

- ***Graduation requirements and expulsion criteria:*** A minimum time period of nine months abstinence from drug/alcohol and program participation, completion of all program and treatment phases and requirements will be required for program graduation. We will continue to monitor participant's recidivism rates for at least six months post-graduation. Participants will face potential expulsion for commission of a new, violent offense; threats or violence towards another participant or team member; or repeated, serious violations of program requirements.

Restitution costs and fees: All participants will be required to make payments as a self-

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contribution for their respective HTWC *services and restitution*. However, given the 80% unemployment rate on the Makah Reservation and that 60% of the Makah households live below the federal poverty level, program fees present a very real barrier to participation. During the screening process, the Healing Court Coordinator will utilize an income schedule to determine whether an applicant is indigent – we anticipate that the majority of our participants will be indigent. For those indigent participants who graduate from the program – we will require that, subsequent to graduation, they provide 50 hours of service as mentors to current Healing Court participants. For those indigent participants who fail to graduate from the program, or who are expelled from the program, we will require that they provide 100 hours of community service cutting firewood, delivering meals to elders, cleaning yards, and general work around the community. For all participants of the program who are unable to pay fees and restitution, we will require that, in the alternative, they provide 10 hours of community service a month. For those participants who are able to pay the fees and restitution, those payments will be reflected and recorded as program income for accounting purposes.

- ***How the program design conforms with the key components/evidence-based program***

Principles: First, we will integrate alcohol/drug treatment and other rehabilitation services with justice system case processing, by applying HTWC case management from initial referral throughout the entire process to confirm that providers appropriately deliver ongoing assessment and services, that participants are accessing those services, and that the participants' recovery and associated pro-social behaviors are continuing to progress. ***Second***, from the initial legal assessment through the team case management occurring on a weekly basis at Healing Court, prosecution and defense counsel will promote public safety while protecting participants due process rights using a non-adversarial approach. ***Third***, we will identify eligible participants

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very early in the process, and screen those participants within five days of arrest. On an on-going basis at our HTWC hearings, we will continue to assess participants for relapse and recidivism risk and how well we are addressing their treatment and rehabilitation, as well as what aspect of our plan that may need to be adjusted to better address participant needs. **Fourth**, we will provide access to a continuum of alcohol, drug and related treatment and rehabilitation services through on-going HTWC case management and screening on a weekly basis for a minimum of nine months required prior to graduation. We will utilize primary resources of chemical dependency treatment, mental health, medical, cultural and other support services, including all of the services of the Sophie Trettevick Indian Health Center's Wellness Center programs. **Fifth**, regular alcohol and other drug testing will take place on at least a weekly basis to monitor and ensure abstinence in the program – those test results will be available to the team each week during staffing prior to Healing Court sessions and will be announced for either praise or possible imposition of sanctions during Healing Court. **Sixth**, we will ensure that continuing interdisciplinary education is offered and required of team members to promote program planning, implementation and operations, to maintain an appropriate level of professionalism, provide a forum for increasing trust and credibility between team members and promoting the spirit of commitment to healing to wellness for the entire community. **Seventh**, the Healing Court judge is the leader of the team at the weekly hearings, linking participants to the criminal justice system. The judge will deliver the appropriate sanctions and incentives at court. **Eighth**, we will monitor and evaluate to measure the achievement of program goals and measure effectiveness – the probation officer, police and treatment will monitor through regular UAs and home visits with offenders and we will frequently evaluate through a management information system which will continually track our program outcomes. **Ninth**, the program will promote

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and ensure ongoing interdisciplinary education to promote effective HTWC planning, implementation and operations. *Tenth*, we will forge partnerships among other drug courts – including other tribal HTWC courts – public agencies and community-based organizations such as our Native VFW, to generate local support and enhance drug court program effectiveness.

- ***Selection and Monitoring of Treatment Providers:*** Our Tribe has its own chemical dependency treatment provider, MCD, which is already subject to internal tribal monitoring and control. MCD is a member of our Treatment Team and will be subject to additional team monitoring during regular reports and HTWC staffing. The Tribe’s mental health provider is also a member of our Treatment Team and will also be subject to monitoring during regular reports and HTWC staffing. So, both providers will be monitored on an on-going basis.

- ***How the HTWC will identify, assess and prioritize participation and services for high risk/high-need offenders:*** We will use the SASSI-3 questionnaire to screen for the existence of a problem involving drugs and/or alcohol. The SASSI-3 is already being successfully used in treatment agencies of nearby tribes and is in the process of being implemented in Makah Chemical Dependency Agency as well. The accuracy of the SASSI-3 has been found to be unaffected by gender, ethnicity, occupational status, marital status, age and years of education and is particularly appropriate in our tribal setting. Since the SASSI-3 can be used by non-experts, our HTWC coordinator can appropriately administer the tool.

- ***How the program conforms to the State Strategy of Substance Abuse Treatment –***

The HTWC program is in conformity with the state strategy of substance abuse treatment.

The Makah Tribe has a pass-through agreement with the state of Washington concerning chemical dependency services and ADATSA, with the Tribe’s chemical dependency program which is recognized as a state-certified agency.

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c) **Capabilities and Competencies: *Training:*** Ten members of our Makah Wellness Team attended and participated in training through the BJA Drug Court Planning Initiative (DCPI) in May 2012 at Mesa, Arizona for five full days of training which included lecture/presentation and team project development. Key members of the HTWC Team include: Judge Iris Shue, Court Administrator/MIS Specialist Jean Hottowe-Vitalis, Prosecutor Ruth Hahn, Chemical Dependency Treatment Provider Larry King, Public Defender Lorna Johnson and Probation Officer Larry Scroggins. Other members include a mental health provider, the Tribe's General Manager, the Police Chief, Operations Director, and two Tribal Council members. The roles of the key team members are described individually, below, as is the Police Chief's role. The roles of the General Manager, Operations Director and Tribal Council members are to provide a critical informational linkage between policy decision makers and the implementation team of the HTWC.

Identification of HTWC Team Members: Judge Iris Shue is a key member of the Makah Healing to Wellness Court team and is central to the overall success of the program. Judge Shue is a Makah tribal member and a state-licensed attorney, with more than 20 years of judicial experience in coastal tribal communities, including the Makah Tribal Court in Neah Bay. Judge Shue will serve as the leader or guide of the Healing Court Team and is a link between the tribal justice system and the community's healing resources. Judge Shue will preside over all HTWC hearings, make the final eligibility determination for HTWC candidates, and ensure that candidates fully understand their due process guarantees as explained by their counsel. Judge Shue will attend status hearings and staffing meetings, and impose sanctions and issue incentives to program participants.

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Court Administrator Jean Hottowe-Vitalis is a Makah tribal member and oversees the Makah judicial systems. Ms. Hottowe-Vitalis brings more than 30 years of judicial experience in tribal communities, including serving as a traditional judge and Drug Court judge in Neah Bay and other Northwest coastal tribal courts. Ms. Hottowe-Vitalis's key functions on the HTWC Team will be to manage the HTWC grant, to serve as the Management Information Specialist (MIS), to submit all reports to the granting agency and to Tribal Council, to ensure that the program is monitored and evaluated to successfully meet program goals and objectives, to develop funding strategies to ensure sustainability, and to develop and amend policies to improve program efficiency and credibility. Ms. Hottowe-Vitalis will also be responsible for ensuring that we appropriately contract with Peninsula College in Port Angeles to obtain the services of a researcher/evaluator to assist in properly evaluating the outcomes and success of this program.

Prosecutor Ruth Hahn is also a key member of the HTWC Team. Ms. Hahn is a tribal member and is responsible for legal screening with the public defender to ensure the offender is eligible for the Healing to Wellness Court (*e.g.*, that the offense is AOD-related, that the defendant is not a violent or sexual offender, etc.) and to examine public safety and risk by reviewing current AOD-related charges, participant criminal history, the life circumstances of the participant. The prosecutor will also work with the public defender in a non-adversarial way to make recommendations such as sanctions and/or rewards concerning program compliance.

Public Defender Lorna Johnson is a Makah Tribal member and is also a key member of the HTWC. She is responsible to help protect the participant's legal and constitutional rights and to help participants understand 1) program requirements, 2) their legal obligations and consequences if they fail to comply, and 3) the benefits of successfully completing the program (*e.g.*, possible expunging of records, charges dismissed, reduced jail and fine, etc.) The public

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defender will participate in screening, eligibility and case processing policies and procedures to guarantee that due process rights are served. Defense will also encourage the defendant to be truthful about his or her compliance with the program, particularly sobriety terms.

The final key member of our team is MCD Director, Larry King, who heads the MCD program (which has been the Tribe's treatment provider for over the past 20 years). Larry King has more than 20 years of experience in the field of chemical dependency and mental health treatment. MCD will be ultimately responsible for the participant's initial and on-going clinical screening and assessment to develop an individualized treatment plan for the participant. MCD will be responsible for screening participants to help determine clinical eligibility, providing a clinical assessment, referring the participant for other needed services, providing evidence-based treatment practices and relapse prevention services.

Makah Chemical Dependency will use ASAM criteria in all decisions and recommendations regarding need for treatment (clinical assessment), type of substance abuse treatment needed, placement, continuing care and discharge. All of MCD's clinical assessment, treatment planning and discharge forms will incorporate ASAM's six dimensions and will be regularly discussed by the Team to consistently assess and determine if the program is adequately supporting the participants. Each provider will use a variable length of stay/clinical ASAM model to design each offender's treatment program to fit the patient's unique individual needs within the program's four phases. The Healing Court Team will discuss assessments, treatment plans and discharge plans in light of the offender's individual case during all sessions, MCD will engage in on-going evaluation of substance abuse, psychiatric, emotional and behavioral problems during assessment and will integrate service for offenders. MCD counselors will consistently assess to what extent clients with mental health needs are being

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served appropriately and sufficiently to impact substance abuse issues utilizing DSM IV and two cognitive behavioral mental health models.

How effective communication and coordination among the team will be implemented throughout the project period: The HTWC Program will build our Team's communication and coordination strategies through regular team building, establishing a common purpose, and developing common and individual goals. During the BJA Drug Court Planning Initiative training in Mesa, Arizona in May 2012, the Makah Wellness Team made significant headway in team building by developing our mission statement which is referenced in the Time Task Plan.

During our initial team meeting after grant award, we will meet to develop and execute a Memorandum of Understanding (MOU) for all HTWC Team Members to build our communication and coordination strategies. In the MOU, we will ensure that each team member's respective roles are closely defined to avoid unnecessary conflicts, such as by defining the roles of the prosecutor and defender as non-adversarial. Our MOU will also ensure that each individual team member does not have a role which conflicts with another of their roles. For example, a case manager will be exempt from reporting non-compliance (except with child abuse, etc.), where legally required so the trust relationship can continue to develop and help strengthen the client toward sobriety. Communication and coordination will also be promoted by having frequent status hearings, held at least weekly in Phase 1, to ensure effective supervision of each participant, serve to reinforce program policies, and also foster communication and cooperation among team members. Upon regular review of each participant's care plan, team members will communicate and reach a consensus on how to revise the plan to identify and overcome barriers to success and to celebrate success when each task is accomplished.

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Local law enforcement and probation departments that are on the HTWC team: The HTWC Team does include members from local law enforcement and probation departments. Probation Officer Larry Scroggins is a member of the HTWC team and is responsible for monitoring and timely reporting of the participant's progress and/or non-compliance with court-ordered requirements. Larry Scroggins has served as the Makah Adult Probation Officer for the past two years and has three years of experience in a Washington State Prison facility, with responsibility for monitoring AOD-related offenders, reporting behavior and compliance with court orders, including disciplinary hearings. The probation officer will be authorized to conduct home visits, curfew checks and scheduled office appointments.

The Neah Bay Police Chief Charlie Irving (Chief of the Tribal Police Department and a Makah Tribal member) serves as a member of the HTWC Team to help determine participant eligibility monitor and report program compliance updates, and participate as a team member for information exchange and recommendation making. Within five days of an offender's arrest, NBPS provides the prosecutor with respective police reports and relevant criminal background, particularly concerning violent and or sex offenses. Police will further assist with performing UAs, reports of new offenses, and criminal history for each participant to each team member.

HTWC proposed treatment partners, their partnership history and how the court will ensure they will use evidence based treatment services: The HTWC proposed treatment partners include MCD, and the director of that program – Larry King – as described above, is actually a HTWC team member. Mr. King has worked providing treatment services for our tribal population for more than five years – as the controlling governmental body, the Tribe has the ability to ensure that our substance abuse treatment providers use evidence-based treatment services. ***Attached letters of support from HTWC team members with responsibilities outlined:***

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Attached are letters of support/commitment and resumes from key HTWC team members Judge Iris Shue, Prosecutor Ruth Hahn, Defense Counsel Lorna Johnson, Treatment Provider Larry King, and Management Information Specialist Jean Hottowe-Vitalis. The HTWC Coordinator is currently an unfilled position – the job description for it is attached. The Researcher/Evaluator will not be a FTE staff position – but will be a contractual position, anticipated through Peninsula College. Management Information Specialist (and Court Administrator) Jean Hottowe-Vitalis will contract to fulfill the Researcher/Evaluator function.

d) Evaluation, Aftercare and Healthcare Integration, Sustainment, and Plan for

Collecting Data: A Time Task Plan is attached, which charts details including when and how the designated goals, objectives and activities are to be accomplished. The Makah Justice Team and or the HTWC Team will develop a performance management and evaluation plan to include strategies to collect data, review data and discuss how the Healing Court will work with the treatment service providers. The Healing Court Program will establish an automated drug court data collection system – Management Information System (MIS) – funded through this grant. The program will collect data on: client retention in treatment; client abstinence; client treatment program completion; client court program completion; client relapse information; client's treatment plan compliance; information regarding client's additional judicial system involvement; whether client has exhibited further criminogenic behavior. On a quarterly basis, as the data is collected by our program coordinator and other team members, we will work with a contracted evaluator (through Peninsula College in nearby Port Angeles) to help us evaluate: 1) whether we are serving the 20 participants that we had anticipated; 2) we are meeting our program outcomes as anticipated by the granting agency and our Tribal Council (as set forth in our Strategic Plan). We will be closely looking at our success with this grant funded program to

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determine whether we should consider expanding/enhancing our capacity to reach more specific co-occurring disorders of the criminogenic population in this service area (which includes the west end of Clallam County from Neah Bay to Forks to the south and to Clallam Bay to the east.) We will refer to data derived from our performance management and evaluation plan and our MIS - to report our collective number of participant success v. recidivism and other relevant results through BJA's Performance Measurement Tool.

- Our aftercare/community integration strategy is to first identify schools, businesses and service organizations active in our service area, including Peninsula College, Northwest Indian College, Washburn's Grocery Store, the Rotary Club, Walmart, Costco, Serenity House, Peninsula Behavioral Health, the Assembly of God Church, the Native VFW, Makah Housing, etc., who could serve as potential partners as we seek to reintegrate our participants back into the community. So, approximately six months prior to graduation we will begin developing our individualized reintegration plans – which will actually be a continuation and expansion of our treatment plan for each participant. We recognize, and emphasize, that participants will not remain engaged in treatment unless they are provided services and supports that are internally relevant and meaningful to their lives. Treatment will not be successful until all participants basic human needs of physical health, mental health, nutrition, home/shelter, and employment/income are met.

Our Treatment Team will work with our partners to develop individualized aftercare and reintegration plans for each one of our program graduates to assist them in important areas of their future lives – including housing, education, employment, and religious and social support. Our recovery support services delivery plan will be based upon the following principles of wellness: cultural belonging, spiritual resource, family support system, emotional support

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system, career development, physical exercise, hobbies and entertainment. Our HTWC Team (Treatment Team) will develop a participant's Recovery Support Services on an ongoing basis through each phase of the program, to support all other treatment activities.

Our plan to sustain our HTWC operations after federal assistance ends involves using our current collaborations and evaluations to leverage future resources – our program data will be used as the basis for applications for other grant funding in the future, including CTAS, the Byrne grant, the BJA Justice Assistance Program, and SAMHSA funding. We will also pursue state substance abuse funding and local – Clallam County – health funding, using our HTWC data. Our program data will also support our request to Tribal Council for tribal funding, i.e., hard dollars as well as possibly obtaining some funding assistance from our business partners.

Community and family recognition of the achievements of Healing Court participants will serve as a significant positive reinforcement of their recovery as well as reintegrating the client into the community. The tribal community's attitude towards drug use, crime and violence will play a significant part in how successful offenders are in stabilizing their recovery. Program graduates will continue to participate in the program as mentors as they reintegrate. Further, the Healing Court program will continue to maintain minimal oversight over participants for a six-month to one-year period subsequent to their completion of chemical dependency treatment. The Makah HTWC program will be sustained through participant payment of fines and fees, third-party billings, and forfeiture of property associated with drug trafficking.

ⁱData from Makah Tribal Court, January 2013.

ⁱⁱStitzer, Maxine L. 'Motivational Incentives in Drug Courts,' *Quality Improvements for Drug Courts, Monograph 9, NDCI*.