

ADULT TREATMENT COURT MODEL POLICIES AND PROCEDURES MANUAL

How to Use this Document

This document should function as a model for new planning courts and existing courts to help programs document procedures for the operation of a treatment court. This model policy and procedure manual is designed to serve as a guide that helps to incorporate the adult drug court best practice standards and other guidelines for the various treatment court models.

As you utilize this document, the first step is to identify state level rules, laws, and policies including administrative of courts and/or supreme court directives that must be incorporated into your program. The next step is to include references to areas in the manual where there is a state level requirement or standard practice.

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PROGRAM HISTORY

A brief statement on the history of the treatment court program and to what issues it was created to meet.

Consider including a brief jurisdictional description to include some basic demographic and economic data to describe the community where the drug court will be drawing their eligibility pool.

STEERING COMMITTEE

The committee should be comprised of executive level personnel from each agency to facilitate the process, to expeditiously resolve issues and to provide buy-in at the upper echelon, so that later committees with non-executive level personnel will be comprised of people who are confident that the Head of each agency has made the treatment court priority mission. The committee should have a clear purpose; roles of members defined and meet on a regular basis.

MISSION STATEMENT

A brief statement developed by the team that reflects the purpose of treatment court.

GOALS AND OBJECTIVES

Goals are general statements about what you need to accomplish to meet your purpose, or mission, and address major issues facing the treatment court.

Objectives are specific activities or action steps to implement each goal. Exactly what you will attempt to accomplish for whom and in what time frame – set of measurable situations, which when achieved will satisfy need.

PROGRAM STRUCTURE

Identifies the type of adjudication process for your treatment court i.e. post-plea, diversion, etc.

Pre-adjudication drug courts often include a diversion component similar to probation without verdict, in which graduates can have the charge(s) dropped and the record expunged. Post-adjudication drug courts enable graduates to avoid a sentence of incarceration, shorten the term of probation, or consolidate multiple probation sentences.

Pre-Trial Diversion or Administrative Probation is for Offenders who have been charged with relatively minor summary or misdemeanor crimes may have the opportunity to avoid a criminal record by remaining arrest-free for a specified period of time, satisfying minimal reporting obligations, and completing applicable treatment requirements.¹⁵ Upon satisfaction of the conditions, the charges are dropped, and the record may be expunged.¹⁶

Probation Without Verdict is typically required to plead guilty or no contest (nolo contendere) to the charge(s) and the plea is held in abeyance while the offender completes a term of probation with conditions for treatment and supervision.²⁰ Satisfaction of the conditions leads to the plea being vacated and perhaps to the opportunity for record expungement.

TARGET POPULATION

Those offenders with characteristics, which the treatment court team has identified, to involve in the treatment court program. Include the risk and need level for target population and include the incentive (“carrot”) to enter the program. Describe in this section the name of the risk assessment instruments used to determine risk. Identify what risk level does your program accept (i.e. high risk or low risk), include this is based upon the risk instrument including the scoring guideline. For example, eligible clients must score between a 20 and higher based upon the LSCMI risk assessment tool. Identify and describe the risk instruments that are used. Likewise, write out eligibility based upon needs. For example, based upon DSM-5, we accept people who are moderate to severe. Describe in the section the name of the validated assessment instruments used.

ELIGIBILITY AND DISQUALIFICATION CRITERIA

The guidelines used to identify and enter offenders into the treatment court program.
The guidelines which are used that make an offender ineligible for the treatment court program.

ENTRY PROCESS AND CHART

This is the process by which the treatment court program moves offenders from arrest to treatment/program entry. Create a flow chart.

TEAM MEMBER ROLES AND ETHICAL CONSIDERATIONS

This section outlines the team members including the agency or department they represent and their responsibilities. Be specific to their duties on the treatment court team and include role specific ethical considerations.

PHASE STRUCTURE AND COMMENCEMENT CRITERIA

Phases are the steps identified by the treatment court team which clients must progress through to complete the program. Phases should be based upon the risk and need level of the participants. Commencement criteria is requirements participants must achieve to successfully complete the treatment court program. ***This section is for court purposes only. There is a separate section to identify treatment phases.***

TERMINATION CRITERIA

Termination Criteria are the guidelines used to unsuccessfully release a participant from the treatment court program.

INCENTIVES AND SANCTIONS

Incentives are responses to compliance, perceived as positive, by the receiver.

Sanctions are the imposition of a consequence, perceived as negative by the receiver, as a direct result of a prohibited activity. Include a list of incentives and sanctions by high, medium and low. Be sure to include therapeutic adjustments.

TREATMENT PROTOCOL

The type of substance use disorder treatment and/or mental health model (s) that will be used to treat the treatment court participants. Include who, what, where, when and frequency. Example below:

Name of Treatment Provider located at 2222 Street, City, State, Zip Code.

IOP Track Length and Phase- Based Requirements

Completing the Intensive Outpatient Treatment Track will require at least 21 weeks—beginning with an especially intensive initial phase that will require defendants to report Monday through Thursday for three hours each day. Nine hours per week is the minimum amount of treatment required for an American Society of Addiction Medicine (ASAM) consistent IOP component.

The first three phases require at least nine hours each per week of treatment. The fourth phase falls below the intensive outpatient minimum and becomes a step-down phase by requiring six hours per week. This is customary as individuals are preparing for the transition out of formal treatment. Ideally at this phase, defendants are employed and attending outside support groups to sustain their recovery.

In addition to or in conjunction with their weekly supervision check-ins, IOP and dually diagnosed defendants will be required to participate in individual clinical sessions at least twice a month in Phase One; a least once monthly in Phases Two and Three; and as needed in Phase Four.

SUPERVISION PROTOCOL

The type of supervision and case management model that will be used to supervise and monitor the treatment court participants. Include the who, when, where and frequency. If the agents are trained in EPICS, SOARING2, etc., please describe and include how these tools are used to assist the clients in the change process. Identify how the case plan is developed and shared with the team.

DRUG AND ALCOHOL TESTING PROTOCOL

The type of alcohol and drug screening model that will be used to test the treatment court participants. Include the type (i.e. swab, patch, urine, breath, etc.) and when, who, where and frequency.

STAFFING

This section outlines the location, required attendees, time, how often and discussion points held at staffing.

STATUS HEARINGS

Outline how often, required attendees, time, and location review hearings are held. Include how legal representation is used for sanctions.

CONFIDENTIALITY

This is your written statement outlining your confidentiality protocols.

PARTICIPANT RIGHTS AND GRIEVANCE PROCEDURE

This outlines the rights of the participants and the steps to take when a grievance is submitted.

DISPARATE IMPACT STATEMENT

This statement is the mission to provide equal opportunities and not discriminate against clients.

DOCUMENTATION (ELECTRONIC AND PAPER FILES)

Include detailed information on how documentation will occur and in which format files will be stored and retrieved.

DATA REPORTING

This section outlines who will be collecting data and which performance measures will be captured for evaluation measures.

EVALUATION DESIGN

Evaluation must be tailored to the political and organizational context of the program to be evaluated. It typically involves assessment of one or more of five program domains: (a) the need for the program, (b) the design of the program, (c) the program implementation and service delivery, (d) the program impact or outcomes, and (e) program efficiency. Evaluation requires an accurate description of the program performance or characteristics at issue and assessment of them against relevant standards and criteria.

FEES AND FISCAL MANAGEMENT

This section outlines any fees collected by the program and how those fees will be used. Include who will be responsible for collecting and managing the fees collected.

COMMUNITY RESOURCES AND ANCILLARY SERVICES

Include the community resources/ancillary services available in your area to where partnerships are formed and reinforce recovery for participants.

MEMORANDUMS OF UNDERSTANDING

These are written agreements with other agencies or organizations for services and coordination.

APPENDIX

This section is for all forms and court documents used by participants. Also include signed MOUs with community partners. Be sure to update all forms on a yearly basis to ensure they continue to follow local and state laws and reflect any changes to the program.