

Charles County Juvenile Drug Court *Process Evaluation*



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January 2009



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January 2009



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ACKNOWLEDGEMENTS

This report is made possible by the great efforts, support, and participation of many people and organizations. In particular, we wish to express gratitude to:

- Frank Broccolina, State of Maryland Court Administrator
- Gray Barton, Executive Director; and Jennifer Moore, Deputy Director, Maryland Office of Problem-Solving Courts
- Hon. Jamey H. Hueston, Chair of the Judicial Conference Committee on Problem-Solving Courts
- Hon. Kathleen G. Cox, Chair of the Drug Court Oversight Committee
- Hon. Robert Nalley, Maryellen Kraese, Michael Wyant, and all team members including judicial/legal partners and treatment providers who participated in key stakeholder interviews. We appreciate their warm and welcoming attitude toward our evaluation team; and for making their program completely available to us
- Charles County Juvenile Drug Court participants who took part in a focus group and parents/guardians who completed surveys, for their candor and for providing the evaluation team with their unique perspectives on the program
- Charley Korn and Bob Linhares, NPC Research

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EXECUTIVE SUMMARY

Drug treatment courts are effective programs designed to reduce drug abuse and criminality in nonviolent offenders. The first drug court was implemented in Florida in 1989. There were 2,147 drug courts as of December 2007, with drug courts operating or planned in all 50 states (including Native American Tribal Courts), the District of Columbia, Northern Mariana Islands, Puerto Rico, and Guam (NADCP 2007).

Drug courts use the authority of the juvenile justice system to offer treatment to nonviolent offenders in lieu of detention. This model of linking the resources of the juvenile justice system and substance treatment programs has proven to be effective for increasing treatment participation and for decreasing criminal recidivism.

The Charles County Juvenile Drug Court (CCJDC) was implemented with guidance and assistance from the Maryland Office of Problem-Solving Courts (OPSC), the Bureau of Justice Assistance, and the Office of Juvenile Justice and Delinquency Prevention. Planning began in January 2005, and the drug court was operational in April 2006, following a year of training for its multi-disciplinary team and creation of the CCJDC's policies and procedures.

At implementation, the CCJDC had a goal to maintain a daily census of 15 youth and their families by the end of the fiscal year, June 30, 2007. The second year's goal was to reach a daily census of 25 youth and families by June 30, 2008. As of August 2008, approximately 14 youth were active participants in the program. Since its inception in April 2006, 10 participants have successfully completed and graduated from the program.

The mission of the CCJDC is to reduce participants' alcohol and other drug use and related problems through multi-disciplinary

intervention, treatment, monitoring, and intensive judicial case management. The program's overall objective is for a healthier and safer lifestyle for young people and their families.

Information was obtained for the process evaluation from several sources, including observations of a court session and a team meeting during a site visit, key stakeholder interviews, a focus group, parent/guardian responses to questions about their experiences with this juvenile drug court, and program materials.

Process Results

Using the 10 Key Components of Drug Courts (as described by the National Association of Drug Court Professionals, 1997) as a framework, along with the 16 juvenile drug court strategies described by the National Drug Court Institute (NDCI 2003), NPC examined the practices of the CCJDC program.

The CCJDC fulfills many of the 10 key components and 16 juvenile strategies through its current policies and structure. It integrates alcohol and other drug treatment services with juvenile justice system case processing. The team members representing the defense and prosecution maintain their roles while using a non-adversarial approach in the courtroom. Participants and their families have frequent contact with the Judge, and the nature of that contact is supportive and respectful. CCJDC has developed community relationships that generate local support and enhance the juvenile drug court program effectiveness. The program provides transportation to participants so that they are able to attend all counseling and court sessions and other program-related appointments.

A summary of suggestions and recommendations that emerge from this evaluation include the following:

SUMMARY OF COMMUNITY-LEVEL RECOMMENDATIONS

Continue to monitor needs that arise for program participants that may require community support; continue to generate creative ideas for individualized community service activities and facilitate mentoring opportunities for participants.

SUMMARY OF AGENCY-LEVEL RECOMMENDATIONS

It is recommended that program staff, DJS, and judicial staff have a policy discussion to determine whether there are places where time could be saved in the process from violation to drug court entry, with the goal of facilitating quicker placement into drug court; new team members should receive formal drug court training as soon as possible after they are assigned to the team, and all team members should receive training specific to their role within the program; continue to encourage ongoing training opportunities for all team members.

SUMMARY OF PROGRAM-LEVEL RECOMMENDATIONS

Station a Health Department representative at intake to perform drug testing in order to help

identify individuals whose drug involvement may have contributed to their crimes, potentially making them eligible for drug court; consider accepting individuals with more serious crimes/infractions into the program; discuss the possible reasons why youth decline participation in the drug court and problem-solve ways to lower the decline rate; encourage and support the treatment provider in incorporating additional strength-based practices into their work with drug court participants; consider the composition (and related individual needs) of the youth in the program to make sure that cultural issues are being addressed by staff and participants/families are being referred to appropriate services. Analyze program data to determine the ratio of sanctions to rewards and use this information to make adjustments to the number of rewards and sanctions imposed; clarify with parents/guardians about when to provide feedback to drug court staff so that the information can be considered when the team makes decisions during staffings; find ways in which the program could better accommodate parents/guardians' work schedules; and discuss the findings from this process evaluation as a team, to identify areas of potential program modification and improvement.

BACKGROUND

In the last 19 years, one of the most dramatic developments in the movement to reduce substance abuse among the U. S. criminal justice population has been the spread of drug courts across the country. The first drug court was implemented in Florida in 1989. According to the National Association of Drug Court Professionals (2008), there were 3,204 problem solving courts in the United States as of December 31, 2007, including 2,147 drug courts.

Drug courts are designed to guide offenders identified as drug-addicted into treatment that will reduce drug dependence and improve the quality of life for them and their families. Benefits to society take the form of reductions in crime committed by drug court participants, resulting in reduced costs to taxpayers and increased public safety.

In the typical drug court program, participants are closely supervised by a judge who is supported by a team of agency representatives who operate outside of their traditional roles. The team typically includes a drug court coordinator, addiction treatment providers, judge, prosecuting attorneys, defense attorneys, law enforcement officers, and parole/probation officers who work together to provide needed

services to drug court participants. Prosecuting attorneys and defense attorneys hold their usual adversarial positions in abeyance to support the treatment and supervision needs of program participants. Drug court programs can be viewed as blending resources, expertise, and interests of a variety of jurisdictions and agencies.

Drug courts have been shown to be effective in reducing recidivism (GAO, 2005) and in reducing taxpayer costs due to positive outcomes for drug court participants (Carey & Finigan, 2003; Carey, Finigan, Waller, Lucas, & Crumpton, 2005). Some drug courts have even been shown to cost less to operate than processing offenders through traditional (business-as-usual) court processes (Carey & Finigan, 2003; Crumpton, Brekhus, Weller, & Finigan, 2004; Carey et al., 2005).

This report contains the process evaluation for the Charles County Juvenile Drug Court (CCJDC). The first section of this report is a description of the methods used to perform this process evaluation, including site visits and key stakeholder interviews. The second section contains the evaluation, including a detailed description of the drug court's process.

METHODS

Information was obtained for the process evaluation from several sources, including observations of a court session and a team meeting during a site visit, key stakeholder interviews, a focus group, parent/guardian responses to questions about their experiences with this juvenile drug court, and program materials. The methods used to gather information from each source are described below.

Site Visits

An NPC evaluation staff member traveled to Charles County for a site visit in May 2008, where a CCJDC session and a drug court team meeting were observed; the staff member also facilitated a focus group with drug court participants in September 2008. The observations and focus group provided information about the structure, procedures, and routines used in the drug court.

Key Stakeholder Interviews

Key stakeholder interviews were a critical component of the CCJDC process study. NPC staff conducted detailed interviews with individuals involved in the administration of the drug court, including the Judge, Drug Court Coordinator, Assistant State's Attorney, Assistant Public Defender, Director of Substance Abuse Treatment and Prevention Services for the Charles County Department of Health, Drug Court Probation Agent, Case Manager, Department of Social Services Coordinator, Program Planning Specialist with the Local Management Board (a division of Charles County's Department of Fiscal and Administrative Services), a consultant and liaison to the Spanish-speaking community, and the Director of the Charles County Public Library.

NPC has designed a Drug Court Typology Interview Guide,¹ which provides a consistent method for collecting structure and process information from drug courts. In the interest of making the evaluation reflect local circumstances, this guide was modified to fit the purposes of this evaluation and this particular drug court. The information gathered through the use of this guide assisted the evaluation team in focusing on the day-to-day operations as well as the most important and unique characteristics of the CCJDC. For the process interviews, key individuals involved with CCJDC administration and program implementation were asked questions in the Typology Guide during telephone calls and follow-up telephone contact. This approach allowed us to keep track of changes that occurred in the drug court process from the beginning of the project to the end.

Focus Group and Parent/Guardian Survey

NPC staff conducted a focus group with active participants on September 5, 2008, at the Charles County Health Department. On November 3, 2008, during a parent group meeting, nine parents/guardians responded to survey questions that asked about their experiences with the juvenile drug court program. After completion of the surveys, a parent collected and sealed them in an envelope that was mailed directly to NPC Research so that responses remained confidential and anonymous and were not shared with treatment or drug court staff.

¹ The Typology Guide was originally developed by NPC Research under a grant from the Bureau of Justice Assistance and the Administrative Office of the Courts of the State of California. A copy of this guide can be found at the NPC Research Web site at [http://www.npcresearch.com/Files/NPC_Research_Drug_Court_Typology_Interview_Guide_\(copyrighted\).pdf](http://www.npcresearch.com/Files/NPC_Research_Drug_Court_Typology_Interview_Guide_(copyrighted).pdf)

The focus group and surveys provided participants and parents/guardians with an opportunity to share their experiences and perceptions regarding the drug court process.

Document Review

In order to better understand the operations and practices of the CCJDC, the evaluation

team reviewed the Charles County Circuit Court Juvenile Drug Court Program Participant Handbook and the Circuit Court for Charles County Juvenile Drug Court Policy and Procedures Manual.

PROCESS DESCRIPTION

Charles County, Maryland

Charles County is located in the south central portion of the state of Maryland, between Washington, D.C., and the Potomac River. The county is partly a “bedroom community” for the U. S. capital, and partly rural. Its county seat is La Plata. According to the U. S. Census,² Charles County had a population of 120,546 in 2000.

As of 2005, 27% of the population was over the age of 18 (with a median age of 43). The racial composition of the county was 60% Caucasian, 35% African American, 3% Hispanic/Latino, and 2% Asian American. Native Americans and Pacific Islanders made up a combined total of less than 1% of county residents. Also in 2005, 5% of the adult population was unemployed. The median household income was \$80,179, and the median family income was \$ 84,670, with 13% of individuals and 10% of families living below the poverty level.³

Drug-related arrests among juveniles (under age 18) totaled 132 in 2005. Of those arrests, 119 were possession-related, and 13 were related to sales/manufacturing of illegal substances.⁴

Charles County Juvenile Drug Court Overview

The Charles County Juvenile Drug Court (CCJDC), located in La Plata, Maryland, began operating in April 2006, with the immediate goal of building to a daily census of 15 young people in the program. That goal was increased to 25 youth by the end of the 2008 fiscal year (June 30, 2008). Racial/ethnic

composition of program participants was not available to the evaluators.

A variety of local agencies participate in the drug court program. The drug court team is composed of the Drug Court Coordinator, Judge, Assistant State’s Attorney, Assistant Public Defender, Department of Juvenile Services (DJS) Case Manager, Department of Health treatment providers, education liaison, and law enforcement liaison. The drug court also has an Advisory Board that is made up of volunteer members from each of the following sectors: business, local government, clergy, not-for-profit organizations, and health and civic organizations; also participating is a member of the local community housing office, a youth representative, and a Spanish-speaking citizen, among others. In addition, the Board includes representatives from the Charles County Board of Commissioners and the Human Services Partnership (Local Management Board), with the CCJDC Coordinator participating in a non-voting advisory capacity. An unusual aspect of the CCJDC is the scope of the Charles County Library involvement. The Library provides positive reinforcement to participants, with the goal of getting the youth to read more and to improve education outcomes; to this end it works to make sure that tutoring services are provided to participants needing assistance. Library staff also work with participants’ families, to assist parents in reinforcing education goals.

Youth enter the program on a voluntary basis. Admission to drug court is post-adjudication, but pre-sentence.

Transportation is provided to all participants so they are able to attend treatment appointments, court sessions, and other activities.

Implementation

The CCJDC was implemented with guidance and assistance from the Maryland Office of

² <http://quickfacts.census.gov/qfd/states/24/24017.html>

³ <http://factfinder.census.gov>, retrieved 10/24/2007

⁴ <http://www.cesar.umd.edu>

Problem-Solving Courts (OPSC), the Bureau of Justice Assistance, and the Office of Juvenile Justice and Delinquency Prevention. Planning began in January 2005, and the drug court was operational in April 2006, following a year of training for its multi-disciplinary team and creation of the CCJDC's policies and procedures.

Participant Population and Program Capacity

At implementation, the CCJDC program's goal was to maintain a daily census of 15 youth the end of the fiscal year, June 30, 2007 (after one year of operation). The second year's goal was to reach a daily census of 25 active program participants (by June 30, 2008). As of August 2008, approximately 14 youth were active participants in the program. Since its inception in April 2006, 10 participants have successfully completed program requirements and graduated from the program.

From the time the program began through November 2007, all participants but one were male. As of October 2008, however, there were 3 females and 11 males in the program. If the number of participants in Phase I or II (intensive outpatient) is 10 or higher, the program may opt to split the youth into two groups, and may do so by gender, depending on the number of males and females. If a participant has a special need, arrangements would be made to accommodate it.

The program is designed to be a 9- to 16-month program. The average length of stay in the program is 12 months.

For most drug court participants, the primary drug of choice was either Oxycontin or marijuana.

Drug Court Goals

According to the CCJDC program's Policy and Procedures Manual, its primary goals are to:

- Identify, refer, screen, and supervise juvenile offenders at the earliest possible opportunity, thereby promoting youth and family wellness, sobriety, and community safety.
- Coordinate and monitor treatment services for youth and family so as to provide intensive, comprehensive and appropriate AOD [alcohol and other drug] treatment as well as mental health treatment, education and vocational services, and other public services.
- Provide an alternative to incarceration with the Maryland juvenile justice system and thereby provide a more effective use of public resources.
- Provide appropriate and reliable programs which offer youth and families constructive support and skills that aid them in developing and strengthening their ability to lead substance-free and crime-free lives, thus enhancing the Department of Juvenile Services in its supervision and monitoring of juveniles placed on probation.
- Establish an effective system of ongoing AOD testing for youth and families that is intensive, random and reliable.
- Establish monitoring and evaluation measures that will demonstrate the effectiveness of the juvenile drug court program and include program quality and appropriate use of services.
- Improve system capacity, through collaborative efforts, that promotes accountability of youth and families as well as of the service providers involved in the juvenile drug court program.

According to its Policy and Procedures Manual, the mission of the CCJDC is to reduce participants' alcohol and other drug use and related problems through multi-disciplinary intervention, treatment, monitoring, and intensive judicial case management. The program's overall objective is for a healthier and safer lifestyle for young people and their families.

Eligibility Criteria

According to the CCJDC Policy and Procedures Manual, program qualifiers include:

- The youth being 14 to 17 at the time of the drug court referred offense
- The participant be a resident of Charles County
- An identified substance abuse issue, including alcohol, that meets admission criteria⁵
- A nonviolent felony offense
- No history of violent offenses
- No history of trafficking drugs
- No prior findings of involvement in drug-related felonies
- A commitment of family to the program
- Subject of a probation violation or delinquency petition

An individual may be disqualified as a potential participant by program team consensus if it is known or reasonably suspected that the youth regularly sells controlled dangerous substances. However, if the youth was "holding" drugs for friends or selling them to support his/her habit only (with no profit), s/he may be admitted into drug court pending team approval; a youth making a profit selling drugs (kingpin) would be excluded from the program.

⁵ American Society of Addiction Medicine (ASAM) criteria

All individuals who may be eligible for the program are not necessarily referred to drug court. After the youth are arrested, they report to intake at the Department of Juvenile Services (DJS) where they may be placed on informal probation or into a diversion program. According to a team member, DJS does not have a Health Department representative stationed at intake to perform drug testing, which could help to identify youth with substance use issues/concerns.

Drug Court Program Screening

The first step toward entering drug court is law enforcement contact (arrest or otherwise). The law enforcement officer generates a Juvenile Offense Report, which is sent to the Department of Juvenile Services (DJS) and to the State's Attorney's Office (SAO).

All individuals must go through DJS intake before being referred to drug court. Some cases are resolved at or before intake, and are never part of drug court. Intake involves DJS staff conducting a hearing, performing a risk assessment,⁶ and reviewing case files for offense history and substance abuse history.

The intake officer may order an AOD assessment from the Health Department, which is the only certified treatment provider in the County. The referral is faxed the same day as the intake, and by law the Health Department must screen the individual within two weeks. The potential participant then speaks to his/her attorney (either a public defender or private attorney), and declares an interest (or not) in drug court at the adjudication hearing.

The CCJDC is a dispositional court, meaning the decision about whether to admit someone to the drug court program is made after a verdict in the adjudication process is obtained. The individual needs to admit or be found guilty prior to being offered drug court as an option.

⁶ All drug court participants must meet the American Society of Addiction Medicine intensive outpatient criteria.

Following adjudication, the youth can then be referred to drug court. The drug court team decides by consensus whether or not to accept the individual into the program. This decision is made during a pre-court team meeting, and the youth may be accepted into drug court during the CCJDC session that follows. So far, the team has accepted everyone who has met the criteria and agreed to participate.

According to one team member, the length of time between an arrest and the first court date is typically 2 to 3 weeks, with 6 to 8 weeks being the general time period between an arrest and drug court entry. Another team member commented, "Typically, this [entering drug court] can take several months."

Incentives for Offenders to Enter (and Complete) the CCJDC Program

The CCJDC is a post-adjudication, pre-sentence program. The main incentive for youth entering the program is to avoid going to detention or into inpatient treatment. Focus group participants corroborated this by stating that they decided to enter drug court as an alternative to going to long-term "rehab" (which, for one participant, would mean losing a job), going to detention, or being moved to a more restrictive group home. Another focus group participant chose drug court to "try and change my life."

Not having a record is not much of an incentive, according to a team member, as juvenile court records are sealed at age 18. After that, they are accessible only to the adult probation department,⁷ which will thus learn of the non-delinquent finding. A team member reported hearing anecdotally that the main reason individuals refuse drug court is the "time commitment and the hassle." Another team member said that some private attorneys advise

against drug court, although another team member believes that private attorneys are very supportive of the program.

Several team members expressed concern that, for many prospective participants, the length of the program is a disincentive to accept the program. These individuals felt that a shorter program and/or other new incentives need to be in place and promoted to potential participants, in order to better encourage them to join the drug court program.

Drug Court Program Phases

CCJDC is designed to be a 9- to 16-month program. Participants have been in the program an average of 12 months. The drug court has four phases: Phase I focuses on stabilization and assessment, Phase II on abstinence and basic skills, Phase III on behavioral and attitudinal changes, and Phase IV is a transition phase. The CCJDC does not have an aftercare program beyond Phase IV, although staff are working to develop one. Graduates are given information about how to access post-program support, if needed. Also, funds have been secured for a future alumni group that will assist CCJDC graduates in building independent skills and in obtaining job training through the local Co-operative Extension Program.

A focus group participant suggested that more flexibility is needed in the timeframe for completing the program, so that some participants (such as those with work or family problems) could have more time in the program without feeling pressured to finish.

Program phases and their current requirements are outlined in the following table, which was taken from the CCJDC's Policy and Procedures Manual dated January 1, 2008.⁸

⁷ Division of Parole and Probation, Maryland Department of Public Safety & Correctional Services

⁸ Length of program phases has changed since implementation.

JDC PHASE PROGRESSION	Phase I Stabilization and Assessment	Phase II Abstinence & Basic Skills Demonstrated	Phase III Behavioral & Attitudinal Changes Demonstrated	Phase IV Transition
Program Goals	Reduce alcohol and other substance abuse and reduce delinquent behavior	Free of substance use and delinquent behavior	Free of substance use and delinquent behavior	Free of substance use and delinquent behavior
Length of Time	2-4 weeks	3-4 months	3-6 months	1-2 months
Judicial Supervision	Minimum 1x every 2 weeks	Minimum 1x every 4 weeks	Minimum 1x every 4 weeks	Minimum 1x every 3 months
DJS Case Management	Intense Supervision, minimum 4 face-to-face contacts per week	High, minimum 3 face-to-face contacts per week	Moderate, minimum 2 face-to-face contacts per week	Low, minimum 1 face-to-face contact per month
Substance Abuse Treatment	Compliance with Individualized Treatment Plan that is based on ASAM Level II Care criteria	Compliance with Individualized Treatment Plan that is based on ASAM Level II Care criteria	Compliance with Individualized Treatment Plan that is based on ASAM Level I Care criteria	Contact w/substance abuse counselor 1x per month & attend self-help meetings as directed
Random Drug Testing	As needed and directed by program staff	As needed and directed by program staff	As needed and directed by program staff	As needed and directed by program staff
Family Involvement	Attend court sessions, parent meetings, and family or group activities as directed by JDC Team members	Attend court sessions, parent meetings, and family or group activities as directed by JDC Team members	Attend court sessions, parent meetings, and family or group activities as directed by JDC Team members	Attend court sessions, parent meetings, and family or group activities as directed by JDC Team members
Curfew	Electronic monitoring and/or house arrest minimum 2 weeks	No later than 7 p.m. and eligible for passes for family or school activities	Negotiated w/JDC Team	Established by parent, but no later than midnight
School/Employment	Mandatory school attendance, GED participation, or employment as directed	Same as Phase 1 and positive attendance, behavioral, and grade reports	Same as Phase 1 and positive attendance, behavioral, and grade reports	Same as Phase 1 and positive attendance, behavioral, and grade reports

<p>Pro-Social Activities (as scheduled by Coordinator)</p>	<p>All JDC activities as directed by JDC Team members</p>	<p>All JDC activities as directed by JDC Team members Attend MRT class & link with mentor</p>	<p>All JDC activities as directed by JDC Team members Attend MRT class & link with mentor</p>	<p>All JDC activities as needed or directed by JDC Team members</p>
<p>Community Services and Restitution 40 Hour Min.</p>	<p>No community Service Hours Required</p>	<p>Complete 20 hours of community service hrs., % of restitution to be determined by DJS, assess need for victim awareness classes</p>	<p>Complete 20 hours of community service hrs., % of restitution to be determined by DJS</p>	<p>None Required</p>
<p>Promotion Requirements are all decided by JDC Treatment Team</p>	<p>Judicial, substance abuse treatment and case management compliance with regards to attendance and participation. School/employment compliance/ No new charges resulting in formal petition/Other ordered services as required</p>	<p>Drug and alcohol free for 60 consecutive days. Judicial, substance abuse treatment and case management compliance/school/employment compliance No new charges resulting in formal petition/Other ordered services as required</p>	<p>Drug and alcohol free for 90 consecutive days. Compliant with all program requirements. No new charges resulting in a formal petition/Other ordered services as required</p>	<p>No adverse reports</p>

Treatment Overview

The Charles County Department of Health is the sole treatment provider for the juvenile drug court. According to the phase requirements in the CCJDC Policy and Procedures Manual (see “Drug Court Program Phases” section of this report), participants in Phases I through III must complete treatment outlined in an individualized treatment plan that is based on American Society of Addiction Medicine (ASAM) level of care criteria.

Participants in the CCJDC program take part in Moral Reconciliation Therapy (MRT), a cognitive-based group therapy program with 12 steps (although these do not correlate to the

12 steps in Alcoholics Anonymous, Narcotics Anonymous or what are generally referred to as “12-Step” programs). MRT requires participants to complete workbooks and a journal. Each week, participants present their work on that week’s step to their peers, who then vote whether or not the presenter may move to the next step based on the content of the presentation and perceived effort made to complete the step. Steps 6 and 10 each involve 10 hours of community service. The goal of MRT is to get clients thinking about (and be responsible for) their actions, attitudes and companions. Staff from the Department of Health and DJS co-facilitate the MRT group.

In addition to receiving assistance with substance abuse issues, participants may also receive medical help, assistance with getting glasses, help with family employment needs, and other needed services. CCJDC participants who took part in the focus group were appreciative of the many ways that drug court treatment counselors provide assistance, not only in terms of helping them work out their problems, but also with the support provided to find a tutor, in engaging the guidance counselors' support at school, and in looking for a job. Regarding this support one participant stated, "[they] help you find a solution to whatever you are dealing with."

Inpatient facilities are readily available, if needed, with a wait time of one to two weeks after a referral is made.

The Drug Court Team

JUDGE

The County Administrative Judge is the presiding judge for the CCJDC. He became involved with the drug court during the early (pre-implementation) discussions and informational meetings and has presided over the drug court since it began operating in April 2006.

The role of CCJDC Judge is not a rotating or voluntary position. The current Judge expects to stay in his position for at least the next several years.

In addition to his duties with drug court, the County Administrative Judge also has a general assignment to criminal cases, torts, etc., as do the other Circuit Court judges in the County. He spends a half day every 2 weeks attending drug court staffing meetings and drug court sessions.

The Judge makes drug court decisions as part of the drug court team, which typically arrives at consensus (regarding how to best address participants' issues) prior to the court session. If the team cannot reach consensus, the Judge makes the final decision.

DRUG COURT COORDINATOR

The Drug Court Coordinator is responsible for coordinating activities between the team members. She plans, implements, administers and monitors day-to-day activities of the juvenile drug court. The Coordinator manages the drug court's finances; makes sure that home visits take place; ensures that all dockets and documents are prepared, and all participants and staff are prepared for meetings; writes grant proposals and manuals; and coordinates training activities. In addition, the Coordinator sets up and facilitates quarterly Advisory Board meetings; facilitates community donations and community service activities; and serves as liaison between drug court team members, treatment providers, and the Drug Court Advisory Board. She also attends all of the drug court sessions, team meetings, and Advisory Board meetings.

The Coordinator communicates with other drug court team members on a daily basis, usually by telephone and email.

The previous CCJDC Coordinator served in the position from January 2007 through January 2008, and had been involved with the drug court planning team since 2006, representing law enforcement. The current Coordinator began working with the juvenile drug court in February 2008.

TREATMENT PROVIDERS

The Director of Substance Abuse Treatment and Prevention Services for the Department of Health was one of the original juvenile drug court team members and was involved in the initial development of the program. Her current role involves attending the pre-court team meetings and filling in as treatment provider as needed (providing treatment, assessment, and recommendations for treatment to the team). She also accompanies treatment counselors to the hearings.

The role of the CCJDC treatment counselor(s) (who work for the Health Department) is to help participating youth learn about different

behaviors, to recognize problems in their lives related to alcohol and drug use, and to see that they have choices. In a general sense, the treatment providers help to stop the drug abuse cycle, in part by addressing the emotional, behavioral, and spiritual aspects of their clients' lives. They work directly with the drug court participants, providing counseling around home, school, and social issues. Treatment counselors co-facilitate MRT with staff from DJS. They also identify mental health issues, referring participants to a mental health treatment provider as needed. (The specific mental health providers used depends on families' insurance providers. Also, DJS has contracts with mental health providers who will serve participants who are not insured.)

Treatment providers follow up with each case, working with participants, their families, and their case managers, and report back to the drug court team. Participants sign a waiver allowing treatment providers to discuss their cases with the other team members.

PROBATION/CASE MANAGEMENT

Drug court-specific probation officers (DJS staff who are titled Case Management Specialists) work with this drug court to conduct home visits, perform drug tests, oversee electronic monitoring, interact with participants on a daily basis, identify service needs of the participants and/or their families (and work with the families to find ways to meet those needs), and provide Moral Reconciliation Therapy in conjunction with the treatment providers. They also attend court sessions and pre-court staffing meetings. It is the DJS representatives' role to ensure that court orders and curfews are enforced, and to implement sanctions such as electronic monitoring or additional community service for participants who are not following rules.

The current primary probation officer (Case Management Specialist) began working with the drug court in September 2007, following program-specific training. The backup Case

Management Specialist became involved with drug court in May 2007.

PUBLIC DEFENDER

The District Public Defender, representing District 4, Southern Maryland, was on the planning team that set up the Charles County juvenile drug court; she first became involved with drug court in 2005. Her staff provides the defense perspective for the drug court (two representatives from her office work with program-related cases and attend team meetings).

The role of the public defender in drug court is to advocate for the defendant, and to bring the client's information and wishes to the drug court team, if needed. All program participants and families may be represented by the Office of the Public Defender throughout their involvement with the program if they do not have other legal representation. Most clients in drug court are public defender clients. The public defender ensures that they are treated well and that their legal rights are protected and maintained.

The defense and prosecution generally agree on who should be admitted to the program, but disagree on occasion. Disagreements are "always" limited to team meetings, according to a team member, and a consensus is arrived at before court. In court, the team presents a united front when addressing the drug court youth.

PROSECUTOR

The Assistant State's Attorney serves as prosecutor of juvenile court cases for Charles County. As such, he is on the "front end" of juvenile cases, and will recommend individuals for drug court when appropriate. He serves on the drug court team, which determines eligibility and reviews cases at hearings. The prosecutor monitors the interests of the State to ensure public safety. Prior to a team decision regarding entry, he might speak out against an individual who is a drug dealer or otherwise ineligible for the pro-

gram. Once a young person is admitted to drug court, the prosecutor has a limited role in the program. He may, however, suggest that a participant who is not doing well be removed from the program.

As mentioned earlier, all decisions made by the court are presented as unanimous in front of the participants. Defense and prosecution generally agree on who to accept into the program, but often disagree on treatment responses, in which case the Judge has the final word. Disagreements are limited to team meetings, and a decision is arrived at before court.

LAW ENFORCEMENT AGENCIES

The Sheriff's Office is the major law enforcement entity for Charles County. A sergeant with the Sheriff's Office, the liaison for law enforcement for Charles County with the drug court, is part of the drug court team. He is in charge of all the officers who work with the drug court youth in the schools. He has arranged with his department's dispatching staff that, any time one of the drug court participants' names pops up for any reason, he is to be notified. He also monitors cases and, if participants are charged with a new offense, he will bring that information to the team. The Sheriff's Office liaison attends the staffing meetings prior to court sessions and acts as bailiff in the courtroom during drug court. He also attends drug court-sponsored community events (e.g., mandatory events for participating youth at the Capital Clubhouse, such as ice skating or other social functions) with the other team members, and will supervise those events on occasion.

The sergeant spends about 20-30 hours each month on drug court activities: attending meetings, court, and program-related functions. He meets regularly with the Coordinator in addition to attending staff meetings. In addition, other officers conduct regular (non-drug court) probation business with the participants about 4-5 hours per week.

DEPARTMENT OF SOCIAL SERVICES (DSS)

The DSS liaison for juvenile drug court in Charles County provides a point of contact with DSS in order to provide information to the program (for example, family services received or needed, progress of drug court families receiving services, concerns about a youth's home environment) and to receive drug court information. The current DSS liaison became involved with drug court in August 2007. Drug court staff contact the DSS liaison to find out whether participants' families can benefit from financial services that are potentially available to them (e.g., TANF, SSI). The DSS liaison also determines whether the families are already in the DSS system. In some cases, she works with participating youth to find financial support if they choose to live independently once they are out of the program. In addition, she works toward building links between the CCJDC and other community agencies/organizations.

LOCAL MANAGEMENT BOARD

A Program Planning Specialist with the Human Services Partnership (the Local Management Board of Charles County) works with the drug court as a member of the Advisory Board. She represents the local management board in supporting the drug court program. She has been involved with the drug court since May 2007.

CONSULTANT AND LIAISON TO SPANISH-SPEAKING COMMUNITY

A self-employed consultant and liaison to the Spanish-speaking community became involved with the drug court during implementation, while he was an employee of the Department of Health. He currently has no day-to-day contact with the drug court, but attends the quarterly Advisory Board meetings.

His bi-lingual skills have not been needed yet with drug court participants, but this resource remains available if the need arises.

CHARLES COUNTY PUBLIC LIBRARY

The Director of the Charles County Public Library has been a member of the Drug Court Advisory Board since April 2006. Her role is to reinforce education for drug court participants. She coordinates tutoring for the youth, and keeps a log of meetings with participants and parents, which she shares with the Drug Court Coordinator.

CHARLES COUNTY PUBLIC SCHOOLS

The Hearing Officer/Charles County Public Schools Liaison with Juvenile Courts helped implement the CCJDC program. Since he was involved with the juvenile court system prior to the start of drug court, he was already familiar with the juvenile court process.

In his role with the drug court, he provides information to the team regarding grades, attendance, and possible disciplinary concerns (e.g., suspensions, referrals to principal's office). He attends team meetings and drug court hearings. He also may refer individuals for tutoring and other education-related support.

Drug Court Team Training

The original drug court team attended three 3-day federal drug court trainings in Philadelphia, PA, Boston, MA, and Charlotte, NC. During these trainings, the team learned how to create and run a successful drug court. Team members have also attended other trainings and seminars, such as symposia presented by the Office of Problem-Solving Courts. A clinical supervisor with the treatment provider has been trained on how to use SMART (Statewide Maryland Automated Records Tracking) management information system.

The Coordinator informs staff about any drug court-related trainings being offered—about 5 to 10 each year—and encourages attendance, although there is no requirement that team members attend any given training. Budgetary considerations may prevent atten-

dance at some trainings offered outside of the area, so team members are more likely to attend trainings that occur locally, such as those in Annapolis.

Some respondents reported an interest in learning more about different drug testing options (e.g., saliva methods) and attending trainings about effectively addressing emotional and psychological issues in participants, including anger management. Other team members reported that they already have the appropriate level of information and training needed for their roles with drug court.

New team members typically receive “on the job” training, while getting additional, more formal, training when it is available (e.g., practitioner training for each of the disciplines provided by the National Drug Court Institute [NDCI], held at the Office of Problem-Solving Courts).

Team Meetings

The drug court team meets twice per month at 1:00 p.m. (prior to the 2:00 drug court session) for staffing. The team consists of the County Administrative Judge (drug court Judge), Drug Court Coordinator, Assistant State's Attorney, three Assistant Public Defenders, one or two Sheriff's officers, a School Board representative, one to two DJS staff (typically the JDC Case Manager and/or a Supervisor or Probation Officer), as well as Health Department and Social Services representatives. A team member commented that these team meetings have provided an opportunity to assemble all agency partners around the same table at the same time, which has greatly improved relationships, making the meeting worthwhile for that reason alone.

Each participant on that day's docket is discussed at the pre-court team meeting. The team uses a collaborative process in making decisions about participants. The Judge strongly encourages decisions by consensus, but would make a final decision if that is not possible (although this has not yet been ne-

cessary). The team presents a united front in the courtroom.

Advisory Board

The CCJDC Advisory Board is made up of volunteer members from the business community, local government, clergy, not-for-profit organizations, health agencies, civic organizations, the community housing office, a youth representative, and a Spanish-speaking member of the community. In addition, the Board includes representatives from the Charles County Board of Commissioners and the Human Services Partnership (local management board), among others, with the CCJDC Coordinator providing staff support and attending meetings in a non-voting advisory capacity. The Advisory Board meets quarterly.

Policy decisions were originally made by the planning team in 2006, in preparation for implementing the drug court. Most revisions have been initiated by the Drug Court Coordinator, and are reviewed and discussed by the Advisory Board. Decisions are made by consensus.

Treatment Provider and Team Communication with Court

The treatment provider shares all relevant participant information with the court in a written report provided before or at each staffing meeting. The report is an overview of a participant's treatment status. It does not include medical information or detailed case notes. Information shared includes home visit reports, school concerns, and drug test results. The report is presented in team meetings (i.e., staffings), where each participant is discussed in detail.

Drug Court Sessions

CCJDC sessions are usually held twice per month—every other Thursday. Calendars are set up months in advance in order to avoid potential scheduling conflicts.

Once the staffing is completed, the JDC session is held, generally beginning at 2:00 p.m. Participants and their families are asked to be in the courtroom by 1:30 p.m. Court proceedings can take anywhere from 1.5 to 2 hours, depending on the size of the docket, which could be anywhere from 6 to 12 participants, with an average of 9 individuals being seen in court in any given session. The length of time a participant appears in front of the Judge depends on whether there are any extenuating circumstances that have to be addressed. If sanctions are potentially involved, participants usually have an opportunity to explain their behaviors. On average, each participant spends 8 to 10 minutes in front of the Judge.

Court sessions are typically attended by the Judge, courtroom clerk, bailiff, Assistant Public Defender, Assistant State's Attorney, DJS representatives, drug treatment provider representative(s) (i.e., Health Department staff), Drug Court Coordinator, Board of Education representative, law enforcement representatives, family counselor,⁹ DSS liaison (if needed), and participants and their parents/guardians. The ASA and APD present a united front in court. Disagreements are limited to team meetings, where the team uses a collaborative process to make decisions.

All participants on the drug court docket are required to stay in the courtroom throughout the session. A team member commented that this program design results in a group dynamic where participants congratulate and encourage each other. For example, when participants do something positive for which they are rewarded, other participants will pat them on the back. Or, for example, when a participant was sent to residential placement, his fellow participants encouraged him by saying, "Keep your chin up."

⁹ The family service counselor is a private provider, usually contracted and paid for by DJS to provide family counseling services to drug court families.

At a drug court session observed by NPC staff, the Judge was respectfully interactive with both the participants and their families, and spoke directly to them. The Judge took time with each participant during the session, and gave them an opportunity to respond to their progress reports and to pose questions. The rewards/sanctions given out by the Judge were consistent with decisions made during the pre-court meeting.

Family Involvement

Parents/guardians must agree to participate in the CCJDC program in order for their children to be eligible. Families, or their representatives, are expected to attend drug court sessions, pro-social activities, and counseling. There are no sanctions for families who do not follow through with program expectations, except that they will receive the message from the court that they are letting their children down.

At drug court sessions, parents/guardians are expected to speak about how their children are doing. They are coached on how to do this, in advance, by staff during home visits.

The Health Department hosts a monthly “family night” on the first Monday of each month for participants and their families. Following a light dinner, parents and drug court staff exchange information about the program. Family nights take place at the Capitol Clubhouse, which offers indoor ice skating, basketball, and other activities, and is open from 6:00 to 9:30 p.m. Activities are open to all participants and their entire families; friends may be allowed, with minor background checks, as long as the number attending the event is reported in advance. Other family events, such as trips to a local aquarium, baseball or basketball games, or corn maze, also take place.

One parent suggested that parents/guardians be given 5 or 10 minutes to state facts to the drug court team during the decision-making

process. Families do have many other opportunities to speak to staff, however. For example, families meet with drug court treatment staff at intake and then weekly throughout the time their children are in the program. The purpose of these meetings is to discuss parenting skills and changes the participants are making, and to arrange further support for families. Families are expected to attend a family support group for parents the first Monday of every month. They also meet with counselors and with the library liaison (to the drug court program) individually. The treatment counselors are available to parents during normal business hours, for telephone or face-to-face conferences as needed.

A team member reported that there may be some cases where youth are eligible for the program, but their families are unable or unwilling to participate because they object to some of the program’s requirements, such as electronic monitoring, UA testing, the number of home visits required, and/or having government staff in their homes (as often as is needed). Thus far, this situation (i.e., parents keeping their children from entering the program) has only occurred once or twice since the inception of the program.

Drug Testing

The amount of drug testing that occurs is consistent with the number of times described in each phase of the program, as described in the program's procedures manual. Youth in Phases I and II are tested on demand a minimum of two times per week, and those in Phases III and IV are tested on demand a minimum of once per week.

The drug testing schedule on the following page is included in the CCJDC Policy and Procedures Manual.

Drug Testing	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Phase I	**DJS	*CCHD	CCHD	DJS		CCHD	DJS
Phase II	DJS	CCHD	CCHD	DJS		CCHD	DJS
Phase III	DJS		CCHD	DJS			DJS
Phase IV	DJS			DJS			DJS

*CCHD = Regularly scheduled test conducted by the Charles County Health Department staff that takes place at the Health Department. CCHD shall conduct testing for each JDC client a minimum of two times per week during Phases I and II. Testing will occur on Monday, Tuesday, and Friday.

**DJS = Randomly scheduled test conducted by the Department of Juvenile Services staff. Random testing by the DJS will be conducted a minimum of two times per client during home visits or other contacts at the discretion of the probation officer.

Using the above referenced drug testing schedule from the Policy and Procedures Manual, the CCHD regularly tests participants in Phases I through III 1 to 3 times a week, usually at a scheduled treatment session. In addition, the DJS Case Managers, at their discretion, randomly test participants in Phases I through IV, up to 3 times a week. The treatment counselors and the DJS Case Managers communicate on a regular basis to discuss drug test results, compliance issues, and any need for follow up testing or services. Drug tests can be performed at any number of locations, including: the Health Department, schools, home, courthouse, DJS, or the local detention center. There is no limit to the amount of testing that a participant can receive, especially if she/he has recently tested positive or is suspected of currently using. If a participant fails to appear for treatment or a scheduled drug test, every effort is made to contact the family by telephone or a home visit.

Urinalysis (UA) tests at home are not observed, although tests performed at the treatment provider are observed by a provider of the same gender as the participant being tested.

The treatment provider uses a rapid screen UA test, on which participants use a key to puncture the side of the testing cup to enter the sample. Results from this test are ready

within 4 or 5 minutes. Tests can also be sent to Lab Corp. for analysis, although this costs more than the rapid test. Lab Corp. typically is used only if the case manager is unavailable, a test comes back inconclusive and the participant strongly protests the results, or the participant is out of town for an approved family vacation and prior arrangements were made with a Lab Corp. facility closest to the vacationing area to have the participant tested (those results are then forwarded to CCJDC). The treatment provider and the DJS use tests that assess for Cocaine, Methamphetamines, Amphetamines, THC and Opiates.

Fees

CCJDC does not charge fees for participation in the program. However, participants pay a treatment fee that is determined using the State's sliding scale, which takes a family's ability to pay for treatment into account. The out-of-pocket expense for intensive out-patient (IOP) and out-patient (OP) treatment, offered through the local Health Department, is also based on the sliding scale (depending on income) that ranges from \$2 to \$39 per session. The Health Department does accept some public and private health insurance, which may require co-payments.

There is no cost to the participant for drug testing. The funding for drug testing is pro-

vided through a grant from the Office of Problem-Solving Courts.

Rewards

The CCJDC program provides incentives in order to encourage and recognize positive behaviors. Positive behaviors may be defined as completing all treatment requirements, having no positive UAs, and completing community service (or making progress on community service with minimal guidance). Money for rewards and incentives comes from contributions by local businesses and civic groups.

Gift certificates and a Certificate of Recognition are given upon successful completion of each phase and upon graduation. Also, \$25 is given for every 3 months that a participant maintains employment. Other positive behaviors are also rewarded, as determined by the drug court team. The CCJDC Policy and Procedures Manual provides a list of 33 possible incentives, including applause and/or verbal accolades or praise; changes in program requirements, such as decreasing supervision; gifts, including books or gift certificates; and activities, such as an opportunity to ride along with an EMT/fireman/police.

Some rewards, such as cake or pizza parties, may be given informally without waiting for the next drug court session and DJS workers may also limit certain participant activities. However, most rewards are given out in court after the team decides by consensus on an appropriate positive response.

Interestingly, team members reported differences regarding who can give out rewards and sanctions: One team member said that “Only the Judge can administer rewards and sanctions,” while another stated, “Everyone on the team can provide rewards or sanctions, but we never do a reward without consensus and going through the Judge.”

Also, while one team member reported that rewards and sanctions are imposed in approx-

imately equal numbers, another respondent felt that rewards have been given out less often than sanctions—not because the program planned it that way, but because that is the ratio that has naturally occurred in response to participant behaviors.

Information about rewards and sanctions is presented in both the Participant Handbook and the Policy and Procedures Manual. Actual incentives and sanctions are specific (i.e., individualized) to the participant and to the situation.

Sanctions

The CCJDC Policy and Procedures Manual states that “sanctions are immediate consequences for negative or inappropriate behavior.” Sanctions for minor infractions, such as not doing homework, are held until the next court session. Court sessions take place every 2 weeks, so it may be up to 2 weeks before a minor negative behavior receives a sanction. Sanctions are typically given within a week, but in extreme situations (such as violence or running away from home) a sanction may be given within a day. Depending on the seriousness of the charge, DJS may put in an order for electronic monitoring or even detention. If a participant displays serious negative behaviors, a hearing request memo to the Juvenile Drug Court Judge could be submitted by the DJS Case Manager or the public schools representative. A special hearing could take place during a regular juvenile court docket session, which is conducted twice a week, wherein the juvenile drug court's Judge would take the bench for the special hearing.

Sanctions are usually graduated, although some major infractions (e.g., running away or re-arrest) are dealt with severely without being graduated. Sanctions are categorized under three levels, according to the Policy and Procedures Manual, as follows.

Level I Violations:

- Curfew or electronic monitoring violation
- Minor behavior and discipline violations of program activities or at home
- Poor performance at school, treatment sessions or other JDC activities, to include behavior, participation, grades and attendance

Level I Recommended Sanction:

- Additional community service hours other than what is required by the program

Level II Violations:

- Repeated curfew or electronic monitoring violations
- Major behavior and discipline violations of program activities or at home
- Failure in performance at school
- Failure to attend treatment sessions or other mandatory program activities
- Positive drug test or screen

Level II Recommended Sanctions:

- Two days of community service
- Book reports
- Placed back on electronic monitoring
- Weekend detention
- Program phase regression

Level III Violations:

- Demonstrated and continued non-compliance with all program requirements
- Failure to comply with court directives and orders
- Repeated positive drug test or screen

Level III Recommended Sanctions:

- Additional days of community service

- Placed back on electronic monitoring for extended period of time
- Weekend detention
- Program phase regression
- Long-term detention
- Placement in residential treatment
- Expulsion from the program

Although sanctions are typically a team decision, some sanctions may be determined by the participant, the family, or other youth in the program. During JDC sessions participants are given the opportunity to explain any questionable or undesirable behaviors that have been reported. In some instances, they may be given a choice of sanctions. In staffing, the participants' attorneys are encouraged to speak or present written requests on behalf of their clients and families on issues or events that have taken place that may result in a sanction. Any requests submitted are taken under consideration by the JDC team during the decision-making process. As mentioned in the above Rewards section, some team members disagree about who can impose rewards and sanctions. However, most agree that decisions are made by team consensus and usually imposed by the Judge in court. Any team member can make a recommendation for a reward or a sanction, and, according to one team member, almost without exception a decision is made during the team meeting prior to the court session.

Termination/Unsuccessful Completion

According to the Participant Handbook, individuals may be removed from the program for:

- Continued non-compliance with treatment recommendations or requirements
- Failure to attend scheduled JDC hearings

- Continued non-compliance with supervision requirements
- Any new charges/finding violations/disqualifying offenses or disposition that renders the participant unavailable
- Threatening violence or demonstrating violent behaviors toward themselves, others, or property
- Continued non-compliance with phase requirements

From April 2006 to October 2008, 8 participants were unsuccessful in completing the program. Those who are released from the drug court program are referred back to regular juvenile court for formal adjudication. They may be sent to a detention or residential facility depending on the individual participant, case, and situation. One past participant was allowed to discontinue the program because he was accepted to attend an out-of-state college. This case was closed without a delinquency finding. Another similar disposition involved a case where the family moved out of state.

Graduation

To be considered for graduation from the CCJDC, participants must successfully complete all substance abuse treatment and all phase and program requirements, have continued school and/or work participation, have no new offenses, and be drug free from the start of Phase IV until graduation.

Ten graduations had taken place as of October 2008. Graduation ceremonies follow regularly scheduled drug court sessions on an as-needed basis, typically three times a year. The graduate's family members, alumni members, community partners, stakeholders, the press, local politicians and others are invited to the ceremony. Graduates are praised for their accomplishments, given either a scholarship to college or trade school, or

some other appropriate incentive, and food and cake are served.

Graduation means an end to probation and the end of the youth's case, which is sealed with a finding of "not involved." For follow-up support, graduates may come back to treatment by contacting the treatment counselor and/or they can get information on local NA and AA meetings available in the community. Graduating youth also have automatic membership in the planned alumni group.

Data Collected by the Drug Court for Tracking and Evaluation Purposes

The CCJDC program is required by the Office of Problem-Solving Courts and the Governor's Office of Crime Control and Prevention (both grant sources) to submit quarterly financial reports, a biannual progress report to the Office of Problem-Solving Courts, and a quarterly progress report to the Governor's office.

In addition to grant reporting, treatment counselors, the DJS Case manager and the Drug Court Coordinator are required and trained to enter case data into the SMART management information system. Agencies participating in SMART may review client information when needed, including drug testing results, school progress reports, employment status, and treatment attendance, as entered by the CCJDC agency partners. By generating compiled reports from SMART, information on participants is shared with the drug court team and used in the decision-making process during drug court staffings.

Drug Court Funding

Most of the funding for the drug court comes from the Office of Problem-Solving Courts and from the Governor's Office of Crime Control and Prevention. A counselor, who splits her time between adult and adolescent

work, is funded by a block grant through the Alcohol and Drug Abuse Administration.

Community Liaisons

The CCJDC has community connections with numerous agencies, including the Charles County Community Services Enhancement program, which created family activity nights; United Way; Fit for Life, a local gym, which provides free memberships for participants and their families; and the Capital Club, where activities for participants, their families, and friends are held. Some of these services are donated, and some are paid for by grant funds.

Participants are required to perform community service as a part of the drug court program, and are involved with a number of local agencies to satisfy this service requirement. Some of the participants have received part-time job offers from the organizations with which they performed their community service hours, as a result of their performance. Participants have volunteered at the Springbell Center, a local thrift store that helps physically and mentally handicapped people; others have worked on farms to help aging or disabled farmers; and they have also helped with the local hospice, the American Cancer Society, and other community organizations.

An unusual aspect of the CCJDC is the scope of local library involvement. The Charles County Library provides positive reinforcement to improve reading skills and general education outcomes. It has facilitated tutoring support for participants. Library staff members also work with participants' families in an effort to help them reinforce education goals at school and at the library.

The Cooperative Extension Program has agreed to support and house the upcoming CCJDC Alumni Association meetings. The drug court program also works with the Charles County Department of Recreation to provide participants with an opportunity to take part in their sports arena activities, including ice skating, rock wall climbing, basketball, and volleyball. Other family enhancement activities have included field trips to cultural events and museums, team building activities (such as preparing and serving a meal to drug court staff and family members), and monthly community service projects.

Several team members gave credit to the Drug Court Coordinator for developing strong community relationships and arranging service and recreational opportunities for youth in the program.

10 KEY COMPONENTS OF DRUG COURTS AND 16 JUVENILE DRUG COURT STRATEGIES

This section lists the 10 Key Components of Drug Courts as described by the National Association of Drug Court Professionals (NADCP, 1997). Following each key component are research questions developed by NPC for evaluation purposes. These questions were designed to determine whether and how well each key component is demonstrated by the drug court. Juvenile drug court strategies as described by the National Drug Court Institute and the National Council of Juvenile and Family Court Judges (NDCI and NCJFCJ, 2003)¹⁰ are included as well. Within each key component, drug courts must establish local policies and procedures to fit their local needs and contexts. There are currently few research-based benchmarks for these key components, as researchers are still in the process of establishing an evidence base for how each of these components should be implemented. However, preliminary research by NPC connects certain practices within some of these key components with positive outcomes for drug court participants. Additional work in progress will contribute to our understanding of these areas.

The key component, research question, and juvenile strategy(ies) are followed by a discussion of national research available to date that supports promising practices, and relevant comparisons to other drug courts. Comparison data come from the National Drug Court Survey performed by Caroline Cooper at Ameri-

can University (2000), and are used for illustrative purposes. Then, the practices of this drug court in relation to the key component and strategy(ies) of interest are described, followed by recommendations pertinent to each area.

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

Research Question: Has an integrated drug court team emerged?

Juvenile Strategy #1: Collaborative Planning

- Engage all stakeholders in creating an interdisciplinary, coordinated, and systemic approach to working with youth and their families.

Juvenile Strategy #2: Teamwork

- Develop and maintain an interdisciplinary, non-adversarial work team.

National Research

Previous research (Carey et al., 2005) has indicated that greater representation of team members from collaborating agencies (e.g., defense attorney, treatment, prosecuting attorney) at team meetings and court sessions is correlated with positive outcomes for clients, including reduced recidivism and, consequently, reduced costs at follow-up.

Local Process

CCJDC drug court team meetings are typically attended by the County Administrative Judge (drug court Judge), Drug Court Coordinator, Assistant State's Attorney, three Assistant Public Defenders, one or two Sheriff's officers, a School Board representative, one

¹⁰ NPC felt that both the 10 Key Components and the 16 juvenile drug court strategies provided important perspectives on the operation of juvenile drug courts. The numbering of the juvenile strategies has been retained as they appear in the source document (NDCI and NCJFCJ, 2003), so the strategies are not numbered consecutively in this section. In addition, some juvenile strategies appear more than once, if they contribute to more than one key component.

or two DJS representatives, and Health Department and Social Services representatives.

The drug court team uses a collaborative process to make decisions through consensus. The Judge has the authority to make final decisions if consensus is not reached, but that has not happened to date. The team has developed a very positive working relationship, with members dealing courteously with each other even when there are disagreements, according to a team member. Another staff member reported that relationships have improved as a result of sitting around the same table as the drug court team.

The CCJDC Advisory Board is made up of volunteers from the business community, local government, clergy, not-for-profit organizations, healthcare, civic organizations, and the community housing office. There is also a youth representative and a Spanish-speaking representative from the community on the Board. In addition, the Board includes representatives from the Charles County Board of Commissioners and Human Services Partnership (the local management board), among others.

The treatment provider communicates with the court through a bi-weekly written report that provides updated information on each participant, including home visit reports, school concerns, and drug testing results. This information is presented at team meetings.

The Charles County Health Department is the sole treatment provider for the CCJDC.

Drug testing is coordinated between the Health Department and DJS.

Recommendations

- The drug court team and the Advisory Board have encouraged a wide and comprehensive range of community participation and appear to work well together. No recommendations are needed in this area.

Key Component #2: Using a non-adversarial approach, prosecution and defense counsel promote public safety while protecting participants' due process rights.

Research Question: Are the Office of the Public Defender and the State's Attorney's Office satisfied that the mission of each has not been compromised by drug court?

Juvenile Strategy #1: Collaborative planning

- Engage all stakeholders in creating an interdisciplinary, coordinated, and systemic approach to working with youth and their families.

Juvenile Strategy #2: Teamwork

- Develop and maintain an interdisciplinary, non-adversarial work team.

National Research

- Recent research by Carey, Finigan, and Pukstas, 2008, found that participation by the prosecution and defense attorneys in team meetings and at drug court sessions had a positive effect on graduation rate and on outcome costs.¹¹
- In addition, allowing participants into the drug court program only post-plea was associated with lower graduation rates and higher investment costs.¹² Higher investment costs were also associated with courts that focused on felony cases only and with courts that allowed non-drug-

¹¹ Outcome costs are the expenses related to the measures of participant progress, such as recidivism, jail time, etc. Successful programs result in lower outcome costs, due to reductions in new arrests and incarcerations, because they create less work for courts, law enforcement, and other agencies than individuals who have more new offenses.

¹² Investment costs are the resources that each agency and the program overall spend to run the drug court, including program and affiliated agency staff time, costs to pay for drug testing, etc.

related charges. However, courts that allowed non-drug-related charges also showed lower outcome costs. Finally, courts that imposed the original sentence instead of determining the sentence when participants are terminated experienced lower outcome costs (Carey, Finigan, & Pukstas, 2008).

Local Process

The defense and prosecution are part of the drug court team. Disagreements are limited to team meetings, and a consensus is arrived at before court. In court, the team presents a united front.

Recommendations

- The defense counsel and prosecution maintain their roles of protecting and maintaining the legal rights of the participants and ensuring public safety, while using a non-adversarial approach in the courtroom. No recommendations are needed in this area.

Key Component #3: Eligible participants are identified early and promptly placed in the drug court program.

Research Question: Are the eligibility requirements being implemented successfully? Is the original target population being served?

Juvenile Strategy #3: Clearly defined target population and eligibility criteria

- Define a target population and eligibility criteria that are aligned with the program's goal and objectives.

National Research

- Carey, Finigan, and Pukstas, 2008, found that courts that accepted pre-plea offenders and included misdemeanors as well as felonies had both lower investment and outcome costs. Courts that accepted non-drug-related charges also had lower out-

come costs, though their investment costs were higher.

- Those courts that expected 20 days or less from arrest to drug court entry had higher savings than those courts that had a longer time period between arrest and entry (Carey, Finigan, & Pukstas, 2008).

Local Process

- Eligibility requirements are written and included in the CCJDC Policy and Procedures Manual. Stakeholders who were interviewed were knowledgeable about eligibility requirements.
- Youth who are arrested report to DJS for intake where they may be placed on informal probation or into a diversion program. DJS does not have a Health Department representative stationed at intake to perform drug testing.
- The CCJDC program is post-adjudication, but pre-sentence. Therefore, the decision about whether to admit someone to juvenile drug court is made after a verdict is reached in the adjudication process. The individual needs to admit to committing the offense or be found guilty prior to being directed toward drug court (if seen as potentially appropriate for the program). Youth enter the program on a voluntary basis. The young people and their parents/guardians sign a contract agreeing to the requirements of drug court prior to entry.
- The length of time between an arrest and the first court date (intake) is 2 to 3 weeks, with 6 to 8 weeks being an average time period between arrest and drug court entry. Regarding this process, one team member commented, "Typically, this [entering drug court] can take several months."
- The CCJDC capacity for their second fiscal year 2008 (through June 30, 2008)

was 25. As of August 2008, approximately 14 youth were currently active in the program. Since its inception in April 2006, 10 participants have successfully completed program requirements and graduated from the program.

- A youth may be disqualified (i.e., refused entry) by program team consensus if it is known or reasonably suspected that the youth regularly sells controlled dangerous substances. If the youth was “holding” them for friends or selling them to support his/her habit only (with no profit), s/he may be admitted into drug court pending team approval; a youth making a profit selling drugs (kingpin) would be excluded from the program.
- Several team members expressed concern that the length of the program is a disincentive for some individuals to accept the program, and thought that a shorter program and/or other new incentives need to be in place (and promoted to potential participants) in order to encourage them to join the drug court program.
- According to a team member, 40% of potential participants decline drug court when offered an opportunity to enter the program.

Recommendations

- It is recommended that DJS have a Health Department representative stationed at intake to perform drug testing. Such testing at the time of intake would help identify individuals whose drug involvement contributed to their crimes, and therefore may mean that they are eligible for the drug court program.
- Consider collaborating with DJS to get people into treatment (those who have a positive UA at intake) sooner, even if they do not formally enter the drug court more quickly.

- It would be worthwhile for the team or Advisory Board to discuss the number of youth who decline the program in order to determine what the issues are that are keeping them from entering the program. Some possibilities to consider:
 - Are the screeners screening people who are not really appropriate, so they need better criteria before offering the program?
 - Is the screener or person who offers the program not doing a good job of sharing program benefits in a way that encourages potential participants to join? (In which case the screener may need some guidance or training, or someone else should be doing the recruiting)
 - Does the team member who sees 40% of potential participants decline have a particular caseload or group of youth he/she is in contact with who tend to decline more frequently?
 - Is there some barrier or perceived negative that is keeping young people from wanting to be part of the program? (In which case, interviewing some of those youth who decline would provide some useful information about where to change policies, image, etc.)
- DJS should add all screens to ASSIST so that the actual decline rate could be measured.
- Other potential areas for the team to discuss include ways to shorten the length of the program while maintaining its positive effect on youth, whether it is possible to add or change incentives to better encourage individuals to decide in favor of participating in drug court, and finding or creating a forum for private attorneys in the community to learn about the benefits of juvenile drug court (and respond to concerns or reservations they might have

about referring their clients to the program).

- Team members were found to have differences of perception and/or opinion about some aspects and processes of the program. These differences may be a communication issue and call for team education and clarification.
- The program may want to have a policy discussion with DJS and judicial staff to determine if there are places where time could be saved in the process from violation to entry into drug court. Conducting an in-depth review and analysis of case flow can identify bottlenecks or structural barriers, and points in the process where potential adjustments to procedures could facilitate quicker placement into the program.

Key Component #4: Drug courts provide access to a continuum of alcohol, drug, and other related treatment and rehabilitation service.

Research Question: Are diverse specialized treatment services available?

Juvenile Strategy #7: Comprehensive treatment planning

- Tailor interventions to the complex and varied needs of youth and their families.

Juvenile Strategy #8: Developmentally appropriate services

- Tailor treatment to the developmental needs of adolescents.

Juvenile Strategy #9: Gender-appropriate services

- Design treatment to address the unique needs of each gender.

Juvenile Strategy #10: Cultural competence

- Create policies and procedures that are responsive to cultural differences, and

train personnel to be culturally competent.

Juvenile Strategy #11: Focus on strengths

- Maintain a focus on the strengths of youth and their families during program planning and in every interaction between the court and those it serves.

Juvenile Strategy #12: Family engagement

- Recognize and engage the family as a valued partner in all components of the program.

Juvenile Strategy #13: Educational linkages

- Coordinate with the school system to ensure that each participant attends an educational program that is appropriate to his or her needs.

National Research

Programs that have requirements around the frequency of group and individual treatment sessions (e.g., group sessions 3 times per week and individual sessions 1 time per week) have lower investment costs (Carey et al., 2005) and substantially higher graduation rates and improved outcome costs (Carey, Finigan, & Pukstas, 2008). Clear requirements of this type may make compliance with program goals easier for program participants and also may make it easier for program staff to determine if participants have been compliant. They also ensure that participants are receiving the optimal dosage of treatment determined by the program as being associated with future success.

Clients who participate in group treatment sessions two or three times per week have better outcomes (Carey et al., 2005). Programs that require more than three treatment sessions per week may create a hardship for clients, and may lead to clients having difficulty meeting program requirements. Conversely, it appears that one or fewer sessions per week is too little service to demonstrate positive outcomes. Individual treatment sessions, used as

needed, can augment group sessions and may contribute to better outcomes, even if the total number of treatment sessions in a given week exceeds three.

The American University National Drug Court Survey (Cooper, 2000) shows that most drug courts have a single provider. NPC, in a study of drug courts in California (Carey et al., 2005), found that having a single provider or an agency that oversees all the providers is correlated with more positive participant outcomes, including lower recidivism and lower costs at follow-up.

Discharge and transitional services planning is a core element of substance abuse treatment (SAMHSA/CSAT, 1994). According to Lurigio (2000), “The longer drug-abusing offenders remain in treatment and the greater the continuity of care following treatment, the greater their chance for success.”

Local Process

- From the time the program began through November 2007, all but one of the participants were male. As of October 2008, there were 3 females and 11 males in the program.
- The program has created a partnership with a consultant/liaison to the Spanish-speaking community who may be called upon if support is needed with Spanish-speaking clients.
- The Charles County Health Department is the sole treatment provider for the juvenile drug court. However, the Health Department co-facilitates an MRT group with DJS staff. The Director of Substance Abuse Treatment and Prevention Services for the Health Department attends pre-court team meetings. Health Department and Social Services representatives, as well as DJS representatives, attend drug court team meetings.

- Group treatment/MRT occurs once per week, and individual treatment occurs twice per week.
- CCJDC does not provide aftercare services beyond Phase IV, but an Alumni Association is being formed that will proactively check in with individuals (and provide support, if necessary) after they have graduated from the program.
- In addition to assistance with substance use issues, participants may also receive medical help, support for getting glasses, family employment assistance, and other services.
- One parent suggested that parents/guardians be given 5 or 10 minutes to state facts to the drug court team during the decision-making process.
- Parents/guardians must agree to participate in the CCJDC program in order for their children to be eligible for entry. Families meet with drug court treatment staff at intake and then weekly throughout the time that the youth are in the program. The purpose of these meetings is to discuss parenting skills and the changes the participating youth are making, and to arrange further support for families if needed. Families are expected to attend a support group for parents/guardians the first Monday of every month. They also meet with counselors and with the librarian individually. The treatment counselors are available to parents/guardians during normal business hours for telephone or face-to-face conferences.
- The treatment provider (Health Department) is flexible to meet the individual needs of each participant and family. They are looking into working with participants' personal interests and creative outlets.
- The juvenile drug court session generally begins at 2:00 p.m. Participants and their

families are asked to be in the courtroom by 1:30 p.m. Court proceedings can take anywhere from 1.5 to 2 hours, depending on the size of the docket.

- Parents/guardians expressed concern about missing work and missing income due to attending drug court sessions and other drug court requirements.

The program provides transportation to participants so that they are able to attend all counseling and court sessions and other program-related appointments.

Recommendations

- The program staff may benefit from cultural competency training and a review of policies and practices to ensure that youth from all groups (including different racial/ethnic backgrounds, females and males, and both older and younger youth) are being offered the opportunity to participate in drug court, and to increase awareness of how all groups may be fairly represented.
- Taking into consideration a parent/guardian's request to have 5 or 10 minutes to speak with the drug court team during the decision-making process, determine whether any of the various opportunities for parents/guardians to speak with juvenile drug court staff could or do serve the same purpose as having them speak at staffings. If so, clarify to parents/guardians when it is appropriate and timely for them to provide input that will be considered during the decision-making process. If not, consider opening some time slots during the staffing meetings during which parents may speak. Parents could sign up for time slots in advance of the meeting.
- Consider whether it would be possible to hold drug court sessions later in the day and not require parents/guardians to be in court a half hour before drug court ses-

sions begin. Look for other ways to accommodate the work schedules of parents/guardians.

Key Component #5: Abstinence is monitored by frequent alcohol and other drug testing.

Research Question: Compared to other drug courts, does this court have a testing protocol based on current knowledge of best practices?

Juvenile Strategy #14: Drug Testing

- Design drug testing to be frequent, random, and observed. Document testing policies and procedures in writing.

National Research

Research on drug courts in California (Carey et al., 2005) found that drug testing that occurs randomly, at least three times per week, is the most effective model. If testing occurs more frequently (that is, three times per week or more), the random component becomes less important.

Programs that tested more frequently than 3 times per week did not have any better or worse outcomes than those that tested 3 times per week. Less frequent testing resulted in less positive outcomes. It is still unclear whether the important component of this process is taking the urine sample (having clients know they may or will be tested) or actually conducting the test, as some programs take multiple urine samples and then select only some of the samples to test. Further research will help answer this question.

Results from the American University National Drug Court Survey (Cooper, 2000) show that the number of urinalyses (UAs) given by the large majority of drug courts nationally during the first two phases is two to three per week.

Local Process

Weekly drug testing is performed on a regular schedule by Charles County Health Department staff on Monday, Tuesday, and Friday; and randomly by DJS staff a minimum of two times during home visits and/or other contacts, at the discretion of the Case Manager.

The drug court administers a minimum of two UAs per week in the first two program phases and a minimum of one UA per week in the third and fourth phases. Participants may be tested 15 times per month, and possibly more if suspected of drug use.

A rapid screen urinalysis test is used by the treatment provider. Results are ready within 4 or 5 minutes. Tests may also be sent to Lab Corp. for additional testing.

Drugs tested for by the treatment provider (Health Department) and DJS include cocaine, methamphetamines, amphetamines, THC and opiates.

UA tests at home are not observed, although tests performed at the treatment provider are observed by a provider of the same gender as the participant being tested.

Recommendations

- If possible, arrange same gender home visits (provider of the same gender as the participant being visited), so that drug tests that take place in the home can be observed.
- Based on interview responses, some team members need to be updated on current drug testing procedures so that all team members are providing accurate information to the public and participants and their families.

Key Component #6: A coordinated strategy governs drug court responses to participants' compliance.

Research Question: Does this court work together as a team to determine sanctions and rewards? Are there standard or specific sanctions and rewards for particular behaviors? Is there a written policy on how sanctions and rewards work? How does this drug court's sanctions and rewards compare to what other drug courts are doing nationally?

Juvenile Strategy #15: Goal-oriented incentives and sanctions

- Respond to compliance and noncompliance with incentives and sanctions that are designed to reinforce or modify the behavior of youth and their families.

National Research

Nationally, experience shows that the drug court judge generally makes the final decision regarding sanctions or rewards, based on input from the drug court team. All drug courts surveyed in the American University study confirmed they had established guidelines for their sanctions and rewards policies, and nearly two-thirds (64%) reported that their guidelines were written (Cooper, 2000).

Carey, Finigan, and Pukstas, 2008, found that for a program to have positive outcomes, it is not necessary for the judge to be the sole person who provides sanctions. However, when the judge is the sole provider of sanctions, it may mean that participants are better able to predict when those sanctions might occur, which might be less stressful. Allowing team members to dispense sanctions makes it more likely that sanctions occur in a timely manner, more immediately after the non-compliant behavior. Immediacy of sanctions is related to improved graduation rates.

Local Process

- The team makes decisions about responses to participants' behaviors by consensus. The Judge imposes rewards and sanctions based on team decisions.
- The juvenile drug court provides incentives in order to encourage and recognize positive behaviors. Possible incentives and sanctions are listed in the CCJDC Policy and Procedures Manual.
- Team members who were interviewed did not all agree on the ratio of rewards to sanctions imposed by the program. One individual reported that rewards and sanctions are given out in equal numbers, while another felt that rewards are generally given out less often than sanctions.
- Team members also disagreed about who can give out rewards and sanctions. One team member thought that only the Judge could do this, while another thought that everyone on the team could provide them. However, most of the team members interviewed agreed that anyone on the team may recommend rewards and sanctions, that the final decision is made by team consensus and that, typically, rewards and sanctions are imposed by the Judge during the court session. Minor rewards, such as pizza parties, may take place without the court having to hand them out directly.
- Negative behaviors are categorized under three violation levels in the Policy and Procedures Manual, which also states the resulting sanctions that correspond with each violation level.
- Sanctions for minor infractions are imposed during court sessions, which take place every 2 weeks; other more serious negative behaviors typically receive sanctions sooner. Depending on the seriousness of the case, DJS may order electronic monitoring or detention. Sanctions are

graduated, although some major problems are dealt with severely without being graduated.

Recommendations

- The program should analyze program data to determine the actual ratio of rewards and sanctions and continue to monitor the frequency with which they are imposed. Use this information as the basis for making adjustments to the numbers of rewards and sanctions imposed, keeping in mind the importance of rewarding the behaviors that are being encouraged. If it is discovered that sanctions are imposed more often, the team should brainstorm about additional ways to recognize and encourage compliant behavior.

Key Component #7: Ongoing judicial interaction with each drug court participant is essential.

Research Question: Compared to other drug courts, do this court's participants have frequent contact with the judge? What is the nature of this contact?

Juvenile Strategy #4: Judicial involvement and supervision

- Schedule frequent judicial reviews and be sensitive to the effect that court proceedings can have on youth and their families.

National Research

From its national data, the American University Drug Court Survey (Cooper, 2000) reported that most drug court programs require weekly contact with the judge in Phase I, contact every 2 weeks in Phase II, and monthly contact in Phase III. The frequency of contact decreases for each advancement in phase. Although most drug courts follow the above model, a substantial percentage reports less court contact.

Further, research in California and Oregon (Carey et al., 2005; Carey & Finigan, 2003)

demonstrated that participants have the most positive outcomes if they attend at least one court session every 2 to 3 weeks in the first phase of their involvement in the program. In addition, programs where judges participated in drug court voluntarily and remained with the program at least 2 years had the most positive participant outcomes. It is recommended that drug courts not impose fixed terms on judges, as experience and longevity are correlated with cost savings (Carey et al., 2005; Finigan, Carey, & Cox, 2007).

Praise and approval from the judge were named by drug court participants as motivating factors for them to progress in the program (Cisner & Rempel, 2005), and personal attention from the judge during status hearings was rated as the most important influence of drug court, according to authors at NIJ (2006).

Local Process

During Phase I, participants attend court once every 2 weeks; during Phase II, they attend once every 4 weeks; Phase III attendance is once per month, and Phase IV attendance is once every 3 months.

While the frequency of court attendance during Phases I and II is half as often as most drug court programs, Phase I's requirement is consistent with the frequency shown to have the most positive outcomes.

The role of the CCJDC Judge is not a rotating or voluntary position. The current Judge expects to stay in his position for the next several years.

Although one participant stated during the focus group that he did not find the Judge to be supportive, comments from the other focus group members did not corroborate that statement. Regarding this issue, one team member commented that the Judge is: "Very hands on, supportive."

During a drug court session observed by an NPC staff member, the Judge was respectful

and supportive of participants and their families. He spoke directly to each participant, and showed interest in their progress since the previous drug court session.

Recommendations

- Participants and their families have contact with the Judge with a frequency that has been found to have the most positive outcomes. The nature of the Judge's contact with participants and their families is supportive and respectful. No recommendations are needed in this area.

Key Component #8: Monitoring and evaluation measure the achievement of program goals and gauge effectiveness.

Research Question: Is evaluation and monitoring integral to the program?

Juvenile Strategy #5: Monitoring and evaluation

- Establish a system for program monitoring and evaluation to maintain quality of service, assess program impact, and contribute to the knowledge in the field.

Juvenile Strategy #16: Confidentiality

- Establish a confidentiality policy and procedures that guard the privacy of the youth while allowing the drug court team [and evaluators] to access key information.

National Research

Carey, Finigan, and Pukstas, 2008, found that programs with evaluation processes in place had better outcomes. Four types of evaluation processes were found to save the program money with a positive effect on outcome costs: 1) maintaining paper records that are critical to an evaluation, 2) regular reporting of program statistics led to modification of drug court operations, 3) results of program evaluations have led to modification to drug court operations, and 4) drug court has participated in more than one evaluation by an in-

dependent evaluator. Graduation rates were associated with some of the evaluation processes used. The second and third processes were associated with higher graduation rates, while the first process listed was associated with lower graduation rates.

Local Process

Treatment counselors, the DJS Case Manager and the Drug Court Coordinator are trained to enter information into the Statewide Maryland Automated Record Tracking (SMART) system, and are sharing compiled reports with the drug court team, where they are used in the decision-making process during staffings.

The CCJDC collects program data and sends reports, informed by that data, regularly to the Office of Problem-Solving Courts and to the Governor's Office of Crime Control and Prevention (grant sources). Program data are also used to update and adjust policies. (Policy decisions are made by the Advisory Board, which meets quarterly.)

- According to the Participant Handbook, "Hearings must abide by all Federal confidentiality laws in regards to treatment information." Participants and their parents/guardians must sign consent forms and releases for the CCJDC team to discuss their cases.

Recommendations

- Drug court staff members are encouraged to discuss the findings from this process evaluation as a team, to identify areas of potential program adjustment and improvement.

Key Component #9: Continuing interdisciplinary education promotes effective drug court planning, implementation, and operations.

Research Question: Is this program continuing to advance its training and knowledge?

National Research

The Carey, Finigan, and Pukstas, 2008, study found that drug court programs requiring all new hires to complete formal training or orientation; team members to receive training in preparation for implementation; and all drug court team members be provided with training were associated with positive outcomes costs and higher graduation rates.

It is important that all partner agency representatives understand the key components and best practices of drug courts, and that they are knowledgeable about adolescent development, behavior change, substance abuse, mental health issues and risk and protective factors related to delinquency.

Local Process

The original drug court team attended three 3-day federal drug court implementation trainings. Team members have also attended other drug court-related trainings and seminars. Several team members have been trained on the SMART data system.

The Coordinator informs the team about trainings that are being offered—about 5 to 10 each year—although budgetary considerations may prevent staff from attending some of these training meetings.

New team members receive "on the job" training and are provided with additional training when it is available and can be supported by department budgets.

The CCJDC Advisory Board meets quarterly. Most policies were developed in preparation for implementation of the drug court, and most revisions have been initiated by the

Coordinator and reviewed by the Advisory Board.

- Team members were found to have differences of perception and/or opinion about some aspects and processes of the program. These differences may be a communication issue and call for team education and clarification.

Some team members decline to take advantage of trainings that are offered.

Recommendations

- Ensure that, in addition to information about drug courts, all team members are strongly encouraged to receive formal training specific to their role within the program as soon as possible after they are assigned to the team, in addition to the on the job training that they receive. Also, continue to encourage ongoing training opportunities for all team members (as a refresher and for professional development), as the budget allows.
- Address any communication issues so that all team members are knowledgeable about the drug court’s process and any underlying issues (such as the number of potential participants that decline drug court and the reasons why).

Key Component #10: Forging partnerships among drug courts, public agencies, and community-based organizations generates local support and enhances drug court program effectiveness.

Research Question: Compared to other drug courts, has this court developed effective partnerships across the community?

Juvenile Strategy #6: Community partnerships

- Build partnerships with community organizations to expand the range of opportunities available to youth and their families.

National Research

Responses to American University’s National Drug Court Survey (Cooper, 2000) show that most drug courts are working closely with community groups to provide support services for their drug court participants. Examples of community resources with which drug courts are connected include self-help groups such as AA and NA, medical providers, local education systems, employment services, faith communities, and Chambers of Commerce.

Local Process

The CCJDC has developed strong community connections with numerous agencies. Agencies provide incentives, support participant and family activities, and offer opportunities for community service. Some examples of community involvement include the following: 1) the Director of the Charles County Library is a member of the Drug Court Advisory Board; 2) the Cooperative Extension Program of the University of Maryland helped implement vocation opportunities and self-esteem-based family-centered classroom trainings; and 3) the County Department of Recreation allows participants to take part in their programs at no cost.

Several team members gave credit to the Drug Court Coordinator for developing positive community relationships and arranging service and recreational opportunities for drug court youth.

Recommendations

- The CCJDC has created community relationships that generate local support and enhance drug court program effectiveness. No additional recommendations arose during the team interviews or focus groups, so the program should continue to monitor any needs that may arise in the future for program participants, and continue to generate creative ideas for individualized community service and mentoring opportunities for participants.

CHARLES COUNTY JUVENILE DRUG COURT: A SYSTEMS FRAMEWORK FOR PROGRAM IMPROVEMENT

Drug courts are complex programs designed to deal with some of the most challenging problems that communities face. Drug courts bring together multiple—traditionally adversarial—roles, and stakeholders from different systems with different training, professional language, and approaches. They take on groups of individuals that frequently have serious substance abuse treatment needs.

The challenges and strengths found in the CCJDC can be categorized into community, agency, and program-level issues. By addressing issues at the appropriate level, change is more likely to occur and be sustained. In this section of the report, we provide an analytic framework for the recommendations in the prior section.

Community Level

Individuals with substance abuse issues who are also involved in the juvenile justice system must be seen within an ecological context; that is, within the environment that has contributed to their unhealthy attitudes and behaviors. This environment includes the neighborhoods in which they live, their family members and friends, and the formal or informal economies through which they and their families support themselves. In an effort to better address the needs of these individuals, then, it is important to understand the various social, economic and cultural factors that affect them.

Social service and juvenile justice systems are designed to respond to community needs. To be most effective, it is important that these systems clearly understand the components and scope of those needs. System partners must analyze and agree on the specific problems to be solved, as well as what the contributing factors are, who is most affected, and

what strategies are likely to be most successful when addressing the problem. A needs analysis can help to define what programs and services should look like, who the stakeholders are, and what role each will play.

SUMMARY OF COMMUNITY-LEVEL RECOMMENDATIONS

The program should continue to monitor any needs that arise for program participants that may require community support, and continue to generate creative ideas for individualized community service and mentoring opportunities for the participants.

Agency Level

Once community and participant needs are clearly defined and the stakeholders identified, the next step is to organize and apply resources to meet the needs. No social service agency or system can solve complicated community problems alone. Social issues—compounded by community-level factors, such as unemployment, poverty, substance abuse, and limited education—can only be effectively addressed by agencies working together to solve problems holistically. Each agency has resources of staff time and expertise to contribute. At this level, partner agencies must come together in a common understanding of each other's roles and contributions. They must each make a commitment to their common goals.

This level of analysis is a place to be strategic, engage partners and advocates, leverage resources, establish communication systems (both with each other and with external stakeholders, including funders), and create review and feedback loop systems for program monitoring and quality improvement activities. Discussions at this level can solidify a process

for establishing workable structures for programs and services, as well as identify key individuals who will have ongoing relationships with the program and with other participating agencies and key stakeholders.

SUMMARY OF AGENCY-LEVEL RECOMMENDATIONS

It is recommended that program staff, DJS, and judicial staff have a policy discussion to determine whether there are places where time could be saved in the process from violation to drug court entry. Conducting an in-depth review and analysis of case flow can identify bottlenecks or structural barriers, and points in the process where potential adjustments to procedure could facilitate quicker placement into drug court.

New team members should receive formal drug court training as soon as possible after they are assigned to the team. In addition to information about drug courts, all team members should receive training specific to their role within the program. Continue to encourage ongoing training opportunities for all team members, as the budget allows.

Program Level

Once a common understanding of need exists and partner agencies and associated resources are at the table, programs and services can be developed or adjusted as needed to ensure that the program is meeting the identified needs and utilizing public funds as efficiently and effectively as possible. Program policies and procedures should be reviewed to ensure that they create a set of daily operations that works best for the community.

SUMMARY OF PROGRAM-LEVEL RECOMMENDATIONS

In order to increase the number of young people who enter drug court and receive its benefits, the following actions are recommended:

Station a Health Department representative at intake to perform drug testing. This would help identify individuals whose drug involvement contributed to their crimes, and may mean that they are eligible for drug court.

- If possible, arrange same gender home visits (provider of the same gender as the participant being visited), so that drug tests that take place in the home can be observed.
- Based on interview responses, some team members need to be updated on current drug testing procedures so that all team members are providing accurate information to the public and participants and their families.
- The drug court team and/or the Advisory Board should discuss the decline rate for young people who are offered an opportunity to enter drug court, determine the issue(s) behind it, and make the changes necessary to make drug court a more attractive option for youth. Potential areas to discuss include: whether screeners are screening some people who are not appropriate for the program, the person offering the program to potential participants is not sharing program benefits in a way that encourages youth to join, whether there is a barrier perceived by the youth that could be discovered by interviewing youth who decline the program (and subsequently remedied), finding ways to shorten the length of the program while keeping it effective; determining whether it is possible to add or change incentives to encourage individuals to decide in favor of participating in drug court; and to find or create a forum for private attorneys to learn about the benefits of juvenile drug court and respond to any concerns they may have.
- Encourage and support the treatment provider in incorporating additional strength-based practices into their work with drug court participants.

- Program staff should look at the composition of the youth participating in the program compared to the population in the juvenile justice system and in the general population to make sure that they are addressing cultural issues with staff and referring youth/families to appropriate services. The program may benefit from cultural competency training and a review of policies and practices to ensure that youth from all groups (including different racial/ethnic backgrounds, females and males, and older and younger youth) are being offered the opportunity to participate in drug court and to increase awareness of how all groups may be fairly represented.

Analyze program data to determine the ratio of sanctions to rewards and continue to monitor the frequency with which both are im-

posed. Use this information to make adjustments to the number of rewards and sanctions imposed. If it is discovered that sanctions are imposed more often than rewards, the team should brainstorm about additional ways to recognize and encourage compliant behaviors.

Clarify with parents/guardians when they might provide feedback to drug court staff so that this information would be available to the team when it makes decisions during staffings.

Consider the viability of changing time that drug court sessions are held, in addition to other ways in which the program could better accommodate parents'/guardians' work schedules.

Drug court staff members are encouraged to discuss the findings from this process evaluation as a team, to identify areas of potential program adjustment and improvement.

SUMMARY AND CONCLUSIONS

The Charles County Juvenile Drug Court seems to possess a thorough understanding of the 10 key components and 16 juvenile strategies and has been successful at implementing their drug court program.

Some particular findings (also included in the 10 key components summary) are:

Unique and/or Promising Practices:

- Library involvement to reinforce education
- SMART data used for decision making during staffings
- Individualized sanctions and rewards
- Transportation support to treatment appointments, court sessions and other activities provided to all participants
- A well-integrated team
- A number of community activities and support is available, including free gym memberships for participants and their families
- Treatment provider flexible to meet needs of participants and families
- Increased female participation in the program

Program capacity change implemented by the drug court team:

- Capacity goal changed from 15 to 25 participants

Areas that could benefit from more attention:

- Process and eligibility changes that could increase the number of young people who participate in drug court
- Barriers to reaching program capacity goal of 25 participants should be addressed
- Clarify to parents/guardians when to provide input so that it will be considered during the decision-making process (in pre-court team meetings)
- Provide cultural competency training and a review of policies and practices to ensure that youth from all groups are fairly represented and supported
- Explore ways to accommodate parent/guardian work schedules
- Increased observation of UA tests
- Increased education and communication among team members about the drug court's process

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**APPENDIX A: DRUG COURT TYPOLOGY
INTERVIEW GUIDE TOPICS**

Drug Court Typology Interview Guide Topics

The topic/subject areas in the Typology Interview Guide were chosen from three main sources: the evaluation team's extensive experience with drug courts, the American University Drug Court Survey, and a paper by Longshore et al. (2001), which lays out a conceptual framework for drug courts. The typology interview covers a number of areas—including specific drug court characteristics, structural components, processes, and organizational characteristics—that contribute to a more comprehensive understanding of the drug court being evaluated. Topics in the Typology Interview Guide also include questions related to eligibility guidelines, specific drug court program processes (e.g., phases, treatment providers, urinalyses, fee structure, rewards/sanctions), graduation, aftercare, termination, non-drug court processes (e.g., regular probation), identification of drug court team members and their roles, and a description of drug court participants (e.g., general demographics, drugs of use).

Although the typology guide is modified slightly to fit the context, process and type of each drug court (e.g., juvenile courts, adult courts), a copy of the generic drug court typology guide can be found at [www.npcresearch.com/Files/NPC_Research_Drug_Court_Typology_Interview_Guide_\(copyrighted\).pdf](http://www.npcresearch.com/Files/NPC_Research_Drug_Court_Typology_Interview_Guide_(copyrighted).pdf)

**APPENDIX B: PARTICIPANT FOCUS GROUP AND PARENT
RESPONSE SUMMARIES**

Participant Focus Group Results Summary

As described in the methodology section of this report, an NPC staff member conducted a focus group with five program participants on September 5, 2008, at the Charles County Health Department. Two of the participants were in Phase I and three were in Phase II of the program. Four participants were male, and one was female; four were Caucasian, and one was African American.

Following is list of questions that were asked during the focus group. Each question is followed by a summary of responses.

What did you like most about the drug court program/What worked?

- Free food we get sometimes to reward us for doing well in the program.
- I like the program because it is going to help me go back home and get out of this group home I am living in and return to live with my family.

What did you like most about the drug court program?

- The Addiction Counselor. She is real and genuine. She really helps with all types of problems.
- I like the fact that when you go to court, they tell you something good or nice. Of course, this is when you are doing well and what you are supposed to do. They remind me that I will get to go home with my family and that helps keep me on track.
- It has kept me clean. That is definitely a good thing.

What do you dislike about the drug court program?

- The whole team.
- The 7 p.m. curfew. The evening time after school goes by really fast, so it is easy to end up returning in the house after 7 p.m. Most times it is accidentally. The court never excuses this, even when it is not intentional. This is unfair.
- If you do not complete the program by a graduation that is held, and you complete one month after that graduation, you must remain on probation until the next scheduled graduation ceremony.
- Sometimes it is extremely hard having to do all this stuff: The appointments here and there, coming to court all of the time, being home on time and the pressure to do good in school.

How were you treated by the drug court staff and treatment providers?

- The Probation Officer is not doing her job. I am stuck in a group home and she never comes to see me. I thought she is supposed to check on me and make sure that I am doing okay. That never happens.
- All the counselors here at the treatment program are nice.
- [Counselor] really understands and she cooperates with us. She will help us work out our problems. She does not just blame us for not being perfect. She will help you find a solution to whatever we are dealing with. She will even help us work through a school problem.
- When I think about it, I realize that [Judge] is on my side, I guess overall, they try to make us see that they want us to get ourselves together.

Why did you decide to participate in drug court?

- My decision was so that I could keep working and not have to go to rehab. Because it was inpatient and long term, I would have lost my job. Drug court was a better choice.
- I had a choice: Drug court or long term rehab. If I had not taken either of those, I would have gone to the detention center.
- I decided to come to drug court to avoid being moved to another placement, another group home (that was more restrictive).
- I came to drug court to try and change my life. I really wanted to change and do better. I knew that if I did not come to drug court, I would get into more trouble and may end up in jail.

Are/were there any obstacles to you successfully completing the drug court program?

- The team is too strict with MRT plan development. [If one piece is missing or incomplete, it affects your ability to move through Phase II, according to the participant.] Sometimes you want to give up and not finish the program.
- I was placed on SCRAM for no reason.

Do you have any suggestions to improve the drug court program?

- There should be no mandatory field trips. I can see why we have to do most of the other stuff in the program. But if it is just a field trip, I should not be required to go. This affects my work schedule, and they do not care.
- They have a rule that you have to finish drug court by a certain time, and there is not much flexibility in that timeframe. I think that if you have valid reasons like work or family problems and you need to be extended, they should give us more time to complete the program. We should not always feel so pressured.
- They should come up with more incentives that are more encouraging. Something better than just a Wal-mart card.

Did your family participate in any way in the process?

- My mom comes here to the treatment program and talks to the counselor. She says that this helps her too. We do get along better and communicate better with each other.
- Yeah, my mom comes too. Sometimes she complains about being tired, but she still comes. [Two other participants stated that their families participate in the treatment end of the program.]
- My family coming to court gives me more confidence in court. [All of the participants stated that a family member comes to court with them.]

What educational support and linkages in the community have been provided?

How has drug court helped you with school?

- The only person that does that kind of thing is [counselor]. She will help us with anything. Like she will direct you to how to get a tutor for school and how to use the Guidance Counselor at school. She will also tell us where we might find a job and where to put in an application.
- Drug court has helped me with school by keeping track of how I am doing in school. Now I know that my mom will find out right away if I don't go to school or start failing a class. This makes me do what I am supposed to do in school.
- No one really has helped me much with school.

What is the drug court session like?

- I am sometimes a little nervous because I don't always know what is going to happen that day. Especially if I have been a little off track.
- [Judge] is not very supportive.
- It is okay. Once you are called and you go up there, it is easy listening to somebody else after you have finished. Everybody tells how you have been doing to the Judge. If you did not do what you were suppose to, he will send you to the Detention Center. That is always a little scary. Nobody wants to go there.

Why do you think there is a drug court?

- Drug court was designed to keep kids like us out of jail. And so that we can improve our lives.
- To give us more choices once we complete it. If we just kept using drugs and getting in trouble, then we would not be able to get a job easy or maybe go to college. If we graduate, we won't have a record and can do whatever we want.

What is the hardest part of drug court?

- I really think the curfew is the hardest thing to deal with. It is hard coming in at 7 p.m. when you are leaving all of your friends having a good time. Then we have to come in even earlier than our mom would normally make us. The rest is okay. It is so easy to mess up on the curfew and then get in trouble. I think there should be more flexibility with the curfew.
- It is really not that hard, you just have to make up in your mind that you have to follow the rules and do the stuff that they tell you. Yeah, it is a lot of appointments, but it beats the Detention Center.

What are your own individual goals in the program?

- I would like to graduate from the program, finish high school and then get a better job. I am not sure about college. I don't know if I am cut out for that right now.
- To keep bettering myself and to stay off of drugs. I am glad that I have a better relationship with my family. It has taken a long time to re-build trust with them again. I really don't like worrying them. I do want to graduate from the program.
- If I just finish the program I will be glad. It is a lot of pressure trying to do everything and worrying about all of the sanctions and stuff. Finishing the program while not smoking blunts and getting in trouble is a big step for me. I would like to get a job to help keep me occupied.
- I want to stay clean and keep leaving clean urine test. I am trying to get through one phase at a time. Each time that I go to court, I try to make sure I have a good two weeks so that when I go in front of the Judge, I don't have to worry about anything. I want to keep doing better in school too.

What do you remember was presented to you about the program, prior to accepting the program?

- They told us all about what we had to do and the rules and everything. My mom and I were worried that it might be more than I can handle. But after looking at all of the choices, this was my best bet. [The participant stated that the Drug Court Coordinator told them about all of the appointments, treatment, urine testing, law enforcement monitoring and court hearings. He said he remembers how overwhelming it sounded.

Two other participants stated that they were told about the requirements of the program by the Coordinator. They stated that all of the guidelines were explained to them and that there were really no surprises.]

Were you made aware of your other non-drug court options before you decided to enter drug court?

- Yes. I had a choice to go to long term rehab or the detention center. That was made real clear to me. That is why I chose drug court.
- I really only had the choice of drug court or Detention Center. That was a no-brainer. I am glad I am in drug court. I sure don't want to be in jail.
- I was offered rehab too. But, it would have been for a long time, and I did not want to be away from my family that long. Because I have been in trouble before, I knew I better do drug court, get myself together and maybe get rid of my record if I graduate.

Charles County Juvenile Drug Court Parent/Guardian Survey Response Summary

Nine parents/guardians answered questions in a survey about the juvenile drug court program on November 3, 2008, during a parent group meeting. A parent sealed the completed surveys in an envelope that was mailed directly to NPC Research so that responses remained confidential and anonymous and were not shared with treatment or drug court staff. Their responses are as follows:

1. As a parent/guardian of a child in drug court, what do you have to do because your child is in drug court? (What are *your* responsibilities?)

- To insure the child understands the rules
- To help them in the process
- To be there for them
- Ensuring my child follows all rules for participation in drug court, including:
 - Curfew
 - Attendance at Charles Co. Dept. of Health
 - Attendance at drug court sessions
 - Attendance at N/A (5) meetings per month
 - Participation in counseling conducted by Center for Children Family Therapy
- Attend family support meeting monthly
- Go to bi-monthly court hearings
- To keep [child] focused
- To help [child] in any way possible to make right choices
- See to it that [child] gets to where [child] needs to be, such as meetings, court dates, etc.
- I have to ensure [child] is in compliance with the program guidelines and times for schedule events. Fortunately, transportation is provided
- Report behavior issues
- Support my child's progression and/or digression
- Make sure [child] is in court
- Make sure [child] goes to the classes
- Help to ensure [child] stays out of trouble
- More time for appointments/court dates
- Re-arrange my schedule to bring [child] every month

2. How is your child different now compared to when he/she first started the program?

- They are more knowledgeable of the effects of drug use
- My child is refocused on goals and actions to prepare for life by:
 - Attending college
 - Obeying rules
 - Taking responsibility for actions
 - Realizing the connection between making correct decisions, accepting responsibility for actions, and making dreams come true through proper activities and following rules
- [Child] has settled down (i.e., is not drinking or doing drugs) and has only slipped up once or twice
- [Child] is making better choices
- [Child] is in school

- [Child] is now more aware of consequences to his actions
- [Child] is finally realizing that there are consequences to his behavior in society also.
- I am *extremely* worried about the influence other participants are having on [child] in a negative manner, especially during community events
- More pleasant
- We get along
- Cares more about others and himself
- Made goals
- Somewhat less aggressive
- Staying at home more
- More structure, more backbone, help for me
- [Child] still has an attitude at times, but is getting better

3. What is the best part of the drug court program?

- The way they keep the kids active
- The way they communicate with them [kids]
- The structure, the support, and participation of DJS, Drug Court and Dept. of Health
- Electronic Monitoring—it keeps my [child] away from parties!
- It holds kids accountable for their actions and helps get these kids clean
- The counseling and the testing on [child] that is done. I am glad they also have done psychological testing
- They are monitoring school work and behavior
- My child is off drugs
- Field trips
- Staff is awesome
- [Child] learning the consequences of [child's] behavior
- Extra support to help me help my child
- The activities they get to do through the Health Dept.
- [Child] gets to learn about different types of drugs and the effects of them

4. What is the worst part of the drug court program?

- They need to be more stern when kids show lack of respect for the program
- Parents should be included in the Drug Court Committee decision-making process. After all, the parents *should* know their child best of all parties involved, and the parents' input could be very helpful to all involved
- The classes that interrupt [child's] work schedule
- The time parents miss work and risk their jobs to be sure the child is in court, class, etc.
- Transportation needs to have a defined address when dropping off
- Missing work—not getting paid while in court or other events
- House arrest
- Influences of others in the program [this is a different parent than the one with a similar concern expressed in response to question 2]
- A lot of time for transportation & appointments/court dates
- Having to wait so long when it's supposed to start at a certain time

5. What would you change about this program to make it better for you and your child or for other families?

- I would change the way the PO communicates. They need to be more on point with the daily contact
- Once again, allow the parents to have 5 or 10 minutes to state relevant facts concerning their child to the Drug Court Committee during the decision-making process
- A better means of transportation
- Fewer court dates
- Same as above [Transportation needs to have a defined address when dropping off]
- Have graduation every other month instead of 2 times a year
- Let kids decide community service events—or at least have input
- Better drug and alcohol testing
- Tightening down on the consequences
- Nothing

6. Is there anything else that you think we should know about the juvenile drug court program?

- The program is a good thing when kids are having these problems
- It would be good to have a more in-depth informational resource, either a brochure or more information on the Charles County Web site
- They need to consider the parents have jobs and there is a lot of time missed or taking off or having to leave work early for things. And all families, especially 1 parent working, we need our jobs
- I very much appreciate the time and dedication the staff and officials put into this program to help my child