

***Oregon Drug Courts***  
**Benton County Adult**  
**Drug Treatment Court:**  
**Process, Outcome, and**  
**Cost Evaluation**  
***Final Report***



*Submitted to:*

**Benton County Adult  
Drug Treatment Court**  
Corvallis, Oregon

*Submitted by:*

**NPC Research**  
Portland, Oregon

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# **Benton County Adult Drug Treatment Court Process, Outcome, and Cost Evaluation *Final Report***

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## EXECUTIVE SUMMARY

**D**rug courts are designed to guide offenders identified as drug-addicted into treatment that will reduce drug dependence and improve the quality of life for the offenders and their families. Benefits to society include substantial reductions in crime, resulting in reduced costs to taxpayers and increased public safety.

In late 2009, the Benton County Adult Drug Treatment Court (BCADTC) received a program grant from the Bureau of Justice Assistance. This grant included funds for evaluation. NPC Research was contracted to perform a process, outcome and cost evaluation.

The process study included an examination of BCADTC practices in relation to the 10 Key Components of drug court (NADCP, 1997) and recommendations for enhancements to the program to meet research based best practices results. The outcome evaluation included a criminal justice recidivism study comparing outcomes for drug treatment court participants to a matched group of offenders who were eligible for the program but did not participate. Outcomes were examined for up to five years after drug treatment court entry. The cost evaluation was a cost-benefit analysis that calculated the cost of the program and the costs of participant and comparison group criminal justice related outcomes including rearrests, court cases, time on probation, in jail and in prison.

### Process Evaluation

The purpose of the process assessment was to establish whether the program has the basic components needed to implement an effective drug treatment court. The assessment process examined the extent to which the program was implementing the 10 Key Components of drug courts (NADCP, 1997) and the best practices that research indicates are related to positive outcomes. Activities include a site visit to the drug treatment court, administration of an electronic assessment, and interviews in person and/or by telephone with the program coordinator and other drug treatment court team members.

The Benton County Adult Drug Treatment Court was implemented in November 2001. This program, which is designed to take a minimum of 12 months to complete, takes post-plea/post-adjudication and post-conviction participants. The program population consists of misdemeanor and felony offenders with drug possession, driving under the influence, forgery, and property offense charges. The drug treatment court's capacity is 75 participants. As of August 2011, 345 participants had entered the program, 158 participants had graduated, 93 participants were discharged unsuccessfully (terminated), 24 participants had not completed the program due to relocation or other issues, and 57 participants were still active.

Overall, the BCADTC has implemented its drug treatment court program within the guidelines of the 10 Key Components and has implemented many of the research based best practices of drug treatment courts. The BCADTC team includes representatives from a range of collaborating agencies, which contributes to more positive outcomes for participants, according to the latest research (e.g., Carey, Mackin, & Finigan, in press). Team members communicate well and regularly, and demonstrate a commitment to developing and maintaining an integrated drug treatment court team and following the best-practice guidelines for achieving success. The BCADTC provides a breadth of diverse and specialized services to program participants. It follows best practices for conducting drug tests (on a random basis at least twice per week) and shows a good balance of sanctions, rewards, and treatment responses which occur as soon as possible following the be-

havior that prompts the response. The judge is firm but fair with participants in the courtroom. Finally, this program has successfully established partnerships across community agencies.

Due to the BCADTC's commitment to following drug treatment court best practices and following the guidelines of the 10 Key Components, the program has been selected by the National Association of Drug Court Professionals (NADCP) to be a "mentor court." Mentor courts serve as models to other drug courts nationally. Other drug treatment court teams visit the BCADTC program and observe its operation so that they can take home a deeper understanding of best practices to their own programs. Mentor courts are also highlighted at the NADCP annual national conference.

## **Outcome Evaluation**

The purpose of an outcome evaluation is to determine whether the program has improved participant outcomes. In other words, did the program achieve its intended goals for its participants?

In this evaluation both short and long-term outcomes were assessed. The outcomes assessed included graduation rates and what participant characteristics predicted whether or not they successfully complete the program, as well as whether drug treatment court participants reduced their drug use and whether drug treatment court participants were re-arrested less often than similar individuals who did not participate in drug treatment court.

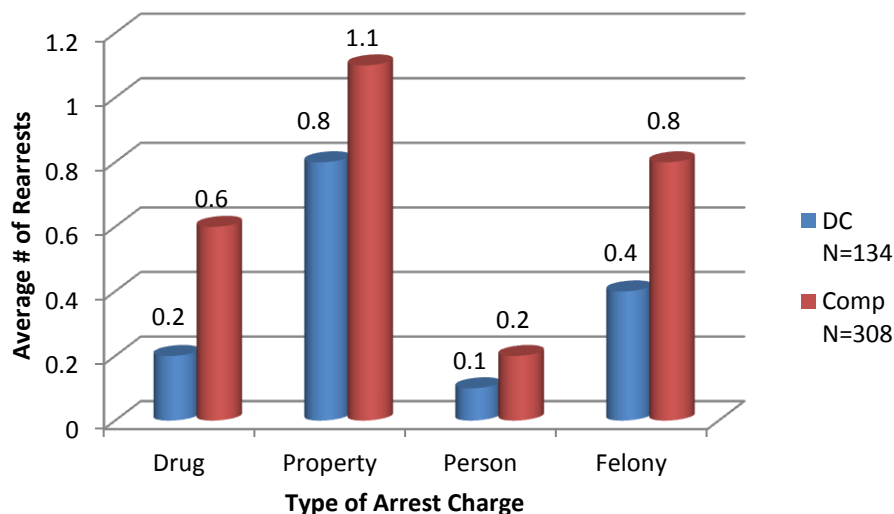
The outcome analyses were based on a cohort of BCADTC participants who entered the drug treatment court program from January 2002 through July 2007, and a matched comparison group of offenders eligible for drug treatment court but who received the traditional court process rather than BCADTC.

The key question of interest in an outcome evaluation of drug treatment courts is the following.

**Does participation in drug treatment court reduce the number of re-arrests for those individuals compared to traditional court processing?**

**YES.** BCADTC participants were re-arrested significantly less often than the comparison group each year for 5 years from drug treatment court entry ( $p < .001$ ). In addition, when examined by charge type, BCADTC participants had significantly fewer rearrests for each type of charge including drug, property, person and felony charges (see Figure E1 below).

**Figure E1. The Average Number of Re-Arrests per Person by Arrest Charge is Significantly Fewer for BCADTC Participants**



As a whole, the results of the outcome analysis for the Benton County Adult Drug Treatment Court were positive. Compared to offenders who experienced traditional court processes, the BCADTC participants (regardless of whether they graduated from the program):

- Had 3 times fewer drug charges in 3 years after drug treatment court entry,
- Had half as many person charges,
- Had half as many felony charges
- Had 27% fewer property charges,
- Were significantly less likely to be re-arrested for any charge within 3 years, and
- Had significantly fewer rearrests for drug charges every year for 5 years after program entry (indicating reductions in drug use).

Further analyses showed that the drug treatment court is keeping participants in the program longer than the intended 12-month length of the program and that graduates were significantly more likely to spend longer (about 20 months) in the program.

The graduation rate for the BCADTC program is 63%, which is significantly higher than the national average of 50%. However, the BCADTC team will still spend some time working toward ways to assist participants in addressing challenges to following program requirements so that an even greater number can stay in the program longer and successfully complete the program.

Overall, the drug treatment court program has been successful in its main goals of reducing drug use and recidivism among its participants and increasing public safety.

## Cost Evaluation

A *cost-benefit* evaluation calculates the cost of the program and also the cost of the outcomes, resulting in a cost-benefit ratio. For example, the cost of the program is compared to the cost-savings due to the reduction in re-arrests. In some drug treatment court programs, for every dollar spent on the program, over \$10 is saved due to positive outcomes.<sup>1</sup> This evaluation was a *cost-benefit* analysis.

The BCADTC cost evaluation was designed to address the following study questions:

- How much does the BCADTC program cost?
- What is the cost impact on the criminal justice system of sending offenders through drug treatment court compared to traditional court processing?

### TRANSACTION AND INSTITUTIONAL COST ANALYSIS

The cost approach utilized by NPC Research is called Transactional and Institutional Cost Analysis (TICA). The TICA approach views an individual's interaction with publicly funded agencies as a set of transactions in which the individual utilizes resources contributed from multiple agencies. Transactions are those points within a system where resources are consumed and/or change hands. In the case of drug treatment courts, when a drug treatment court participant appears in court or has a drug test, resources such as judge time, defense attorney time, court facilities, and urine cups are used. Court appearances and drug tests are transactions. In addition, the TICA approach recognizes that these transactions take place within multiple organizations and institutions that work together to create the program of interest. These organizations and institutions contribute to the cost of each transaction that occurs for program participants. TICA is an intuitively appropriate approach to conducting costs assessment in an environment such as a drug treatment court, which involves complex interactions among multiple taxpayer-funded organizations.

The cost evaluation involves calculating the costs of the drug treatment court program, and the costs of outcomes (or impacts) after program entry (or the equivalent for the comparison group). In order to determine if there are any benefits (or avoided costs) due to drug treatment court program participation, it is necessary to determine what the participants' outcome costs would have been had they not participated in drug treatment court. One of the best ways to do this is to compare the costs of outcomes for drug treatment court participants to the outcome costs for similar individuals that were eligible for drug treatment court but who did not participate. The comparison group in this cost evaluation is the same as that used in the preceding outcome evaluation.

The main question of interest in the cost evaluation is the following.

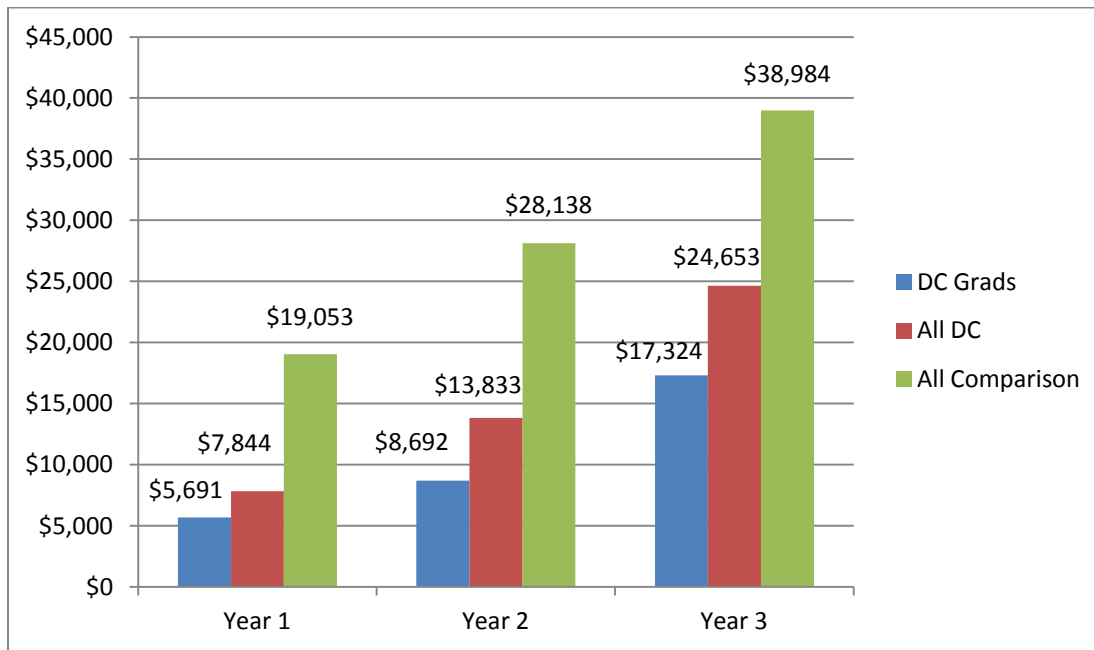
What is the cost impact on the criminal justice system of sending offenders through drug treatment court compared to traditional court processing? Or more specifically, does the BCADTC save money?

**YES.** Figure E2 provides a graph of the costs for graduates, all participants and the comparison group over 3 years. BCADTC participants, regardless of whether they graduated from the program, cost less (i.e., save money) at every time point.

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<sup>1</sup> See drug court cost-benefit studies at [www.npcresearch.com](http://www.npcresearch.com)

**Figure E2. Criminal Justice Recidivism Cost Consequences per Person: Drug Court Participants Cost Less Than Comparison Group Members Over 3 Years**



The cost savings illustrated in Figure E2 are those that have accrued in just the 3 years since program entry. Many of these savings are due to positive outcomes while the participant is still in the program. Therefore, it is reasonable to state that **savings to the state and local criminal justice systems are generated from the time of participant entry into the program.**

These savings will also continue to grow with the number of new participants that enter the program each year. If the BCADTC program continues to serve a cohort of **41** new participants annually, the conservative savings of \$7,886 per participant (not including victimizations) over 3 years results in an annual savings of **\$323,326** per cohort, which can then be multiplied by the number of years the program remains in operation and for additional cohorts per year. After 5 years, the accumulated savings come to over **\$4.8 million**. When victimizations are included, the savings of \$14,331 per participant over 3 years results in an annual savings of \$587,571 per cohort. After 5 years, the accumulated savings, including victimization savings, come to over **\$8.8 million**.

Although the Benton County Adult Drug Treatment Court is a substantial taxpayer investment, over time it results in significant cost savings and a return on its investment. The program investment cost is \$15,915 per drug treatment court participant. The benefit due to significantly reduced recidivism for drug treatment court participants over the three years included in this analysis came to \$14,331. If these cost savings are projected just two more years (to 5 years) the savings come to **\$23,885** per participant resulting in a cost-benefit ratio of **1:1.50**. That is, for taxpayer every dollar invested in the program, there is \$1.50 return. This ratio increases over time as the investment is repaid and the savings continue to accumulate. At 10 years the cost-benefit ration comes to \$3.00 saved for every \$1 invested in the program.

In summary, the BCADTC program had:

- A criminal justice system cost savings of **\$14,331** per participant over 3 years,
- Criminal justice system costs that were 59% less during program participation (during the first year after program entry) compared to non-drug treatment court participants during the same time period,
- A 150% return on its investment after 5 years (a 1:1.5 cost benefit ratio), and
- A 300% return on its investment after 10 years (a 1:3 cost benefit ratio).

As the existence of the BCADTC continues, the savings generated by drug treatment court participants due to reduced substance use and decreased criminal activity can be expected to continue to accrue, repaying investment in the program and beyond. Taken together these findings indicate that the BCADTC is both beneficial to participants and beneficial to Oregon taxpayers.

Taken as a whole, these results demonstrate that the BCADTC program is effective in reducing recidivism and reducing drug use while using fewer criminal justice system resources during program participation.

## BACKGROUND

**D**rug courts are designed to guide offenders identified as drug-addicted into treatment that will reduce drug dependence and improve the quality of life for the offenders and their families. Benefits to society include substantial reductions in crime, resulting in reduced costs to taxpayers and increased public safety.

In the typical drug treatment court program, participants are closely supervised by a judge who is supported by a team of agency representatives operating outside of their traditional roles. The team typically includes a drug treatment court coordinator, case managers, substance abuse treatment providers, prosecuting attorneys, defense attorneys, law enforcement officers, and parole and probation officers who work together to provide needed services to drug treatment court participants. Prosecuting and defense attorneys modify their traditional adversarial roles to support the treatment and supervision needs of program participants. Drug treatment court programs blend the resources, expertise and interests of a variety of jurisdictions and agencies.

Drug treatment courts have been shown to be effective in reducing criminal recidivism (GAO, 2005), improving the psycho-social functioning of offenders (Kralstein, 2010), and reducing taxpayer costs due to positive outcomes for drug treatment court participants (including fewer re-arrests, less time in jail and less time in prison) (Carey & Finigan, 2004; Carey, Finigan, Waller, Lucas, & Crumpton, 2005). Some drug treatment courts have been shown to cost less to operate than processing offenders through business-as-usual in the court system (Carey & Finigan, 2004; Carey et al., 2005).

In late 2009, the Benton County Adult Drug Treatment Court (BCADTC) received a program grant from the Bureau of Justice Assistance. This grant included funds for evaluation. NPC Research was contracted to perform a process, outcome and cost evaluation.

Located in Portland, Oregon, NPC Research has conducted research and program evaluation for over 20 years. Its clients have included the Department of Justice (including the National Institute of Justice and the Bureau of Justice Assistance); the Substance Abuse and Mental Health Services Administration (CSAP and CSAT in particular); state court administrative offices in Oregon, California, Maryland, Michigan, Minnesota, and Missouri; the Robert Wood Johnson Foundation; and many other local and state government agencies. NPC Research has conducted process, outcome and cost evaluations of drug treatment courts nationally. Having completed over 125 drug treatment court evaluations (including adult, juvenile, DUI and family treatment drug treatment courts), NPC is one of the most experienced firms in this area of evaluation research.

This document is the final report containing the process, outcome and cost results from the Benton County Adult Drug Treatment Court evaluation. The process study included an examination of BCADTC practices in relation to the 10 Key Component of drug treatment court (NADCP, 1997) and recommendations for enhancements to the program to meet research based best practices results. The outcome evaluation included a criminal justice recidivism study comparing outcomes for drug treatment court participants to a matched group of offenders who were eligible for the program but did not participate. Outcomes were examined for up to 5 years after drug treatment court entry. The cost evaluation was a cost-benefit analysis that calculated the cost of the program and the costs of participant and comparison group criminal justice related outcomes including rearrests, court cases, time on probation, in jail and in prison.



## PROCESS EVALUATION

### Process Report Description and Purpose

The purpose of this process report is to establish whether a program has the basic components needed to implement an effective drug treatment court. The assessment process examined the extent to which the program is implementing the 10 Key Components of drug courts (NADCP, 1997) and the best practices that research indicates are related to positive outcomes. Activities include a site visit to the drug treatment court, administration of an electronic assessment, and interviews in person and/or by telephone with the program coordinator and other drug treatment court team members.

A synthesis of the information collected through these activities provides NPC with a general understanding of the drug treatment court's organization and current processes, assists NPC in determining the direction and content of further questions and technical assistance needs and supports, and informed the outcome and cost evaluation of the program.

### Methods

NPC staff conducted the following activities with the Benton County Adult Drug Treatment Court (referred to as BCADTC in the remainder of the report) for the process evaluation:

1. Assessment completed by the program coordinator in collaboration with the drug treatment court team
2. A site visit by NPC staff to:
  - a. Observe a staffing meeting and a drug treatment court session
  - b. Determine the drug treatment court team's understanding of the 10 Key Components
  - c. Share the current status of the research in these areas
  - d. Learn more about the drug treatment court's program policies and procedures and how they are implementing these as they relate to the 10 Key Components and best practices
  - e. Review and discuss data elements and program operations, and address any questions that arise
3. A write-up of the results for this report which summarizes program characteristics and practices, analyzes the degree to which this program is following guidelines based on the 10 Key Components, and provides recommendations for program improvement and enhancement.

### *Electronic Program Assessment*

An electronic assessment was used to gather program process information from the drug treatment court coordinator, in conjunction with members of the drug treatment court team. This assessment, which provides a consistent method for collecting structure and process information from drug treatment courts, was developed based on three main sources: NPC's extensive experience with drug treatment courts, the American University Drug treatment court Survey, and a published paper by Longshore et al. (2001), which lays out a conceptual framework for drug treatment courts. The assessment covers a number of areas, particularly areas related to the 10

Key Components—including eligibility guidelines, specific drug treatment court program processes (e.g., phases, treatment providers, drug and alcohol testing, fee structure, re-wards/sanctions), graduation, aftercare, termination, and identification of drug treatment court team members and their roles. The use of an electronic assessment allows NPC to begin building an understanding of the program, as well as to collect information to support a thorough review of the site.

## General Summary of Findings and Recommendations

The Benton County Adult Drug Treatment Court was implemented in November 2001. This program, which is designed to take a minimum of 12 months to complete, takes post-plea/post-adjudication and post-conviction participants. The program population consists of misdemeanor and felony offenders with drug possession, driving under the influence, forgery, and property offense charges. The drug treatment court's capacity is 75 participants. As of August 2011, 345 participants had entered the program, 158 participants had graduated, 93 participants were discharged unsuccessfully (terminated), 24 participants had not completed the program due to relocation or other issues, and 57 participants were still active.

The recommendations in this report are based on research in many drug treatment courts and on practical experience working with individual courts and collaborating with people who do this work. Research has demonstrated that drug treatment courts that have performed monitoring and evaluation and make changes based on the feedback have significantly better outcomes including 50% reductions in recidivism rate and twice the cost savings (Carey, Finigan, & Pukstas, 2008; Carey, Waller, & Weller, 2010).

Overall, the BCADTC has implemented its drug treatment court program within many of the guidelines of the 10 Key Components. Among its many positive attributes, the program should be specifically commended for the following practices:

- **Commendation:** The BCADTC team includes representatives from a range of collaborating agencies, which contributes to more positive outcomes for participants, according to the latest research (e.g., Carey, Mackin, & Finigan, in press). Team members demonstrate a commitment to developing and maintaining an integrated drug treatment court team and following the best-practice guidelines for achieving success.
- **Commendation:** The BCADTC is commended for having law enforcement represented on the drug treatment court team. The research in this area has shown that greater law enforcement involvement increases graduation rates and reduces recidivism and outcome costs (Carey, Finigan, & Pukstas, 2008).
- **Commendation:** Regular email communication. Drug treatment courts that shared information among team members through email had 65% lower recidivism than drug treatment courts that did not use email (e.g., Carey, Finigan, & Pukstas, 2008; Carey, Waller, & Weller, 2010).
- **Commendation:** The program coordinates treatment through a single organization. Research has shown that coordinating treatment through one or two treatment providing agencies is related to significantly lower recidivism. The BCADTC is commended for following best practices in this area.

- **Commendation:** All BCADTC team members attend staffing meetings. Programs where all team members attend staffings had 50% lower recidivism than programs that did not include all team members.
- **Commendation.** The defense attorney and prosecutor appear to successfully take a non-adversarial team approach while participating in meetings and drug treatment court proceedings. Overall, the BCADTC appears to have successfully integrated this key component
- **Commendation.** The BCADTC has written program eligibility requirements and all referring agencies have copies of the requirements. This ensures that there are no misunderstandings and helps to expedite entry into the program.
- **Commendation:** The BCADTC allows offenders with charges in addition to drug charges into the program including forgery and property offenses. Research has shown that programs that allow non-drug charges in the program have 95% greater reductions in recidivism than programs that allow only drug offenses.
- **Commendation:** The BCADTC provides a breadth of diverse and specialized services to program participants.
- **Commendation:** The BCADTC performs drug tests a minimum of two times per week in the first phase of the program. Research shows that testing at least two times per week is related to significantly lower recidivism and higher cost savings.
- **Commendation.** The BCADTC has implemented frequent and random drug testing that is observed by staff trained to safeguard the collection process.
- **Commendation.** Overall, the BCADTC shows a good balance of sanctions and rewards, and treatment responses occur as soon as possible following the behavior that prompts the response. The program is commended for training team members in sanctions and rewards and implementing a coordinated strategy to govern drug treatment court responses to participants' compliance.
- **Commendation:** During status review hearings, the judge spoke with each participant for at least three minutes. Best practices research shows that programs where judges spend at least three minutes per participants have significantly lower recidivism and higher cost savings.
- **Commendation.** Overall, this program has successfully established partnerships across community agencies. The drug treatment court team should continue discussing possible new community connections and resources (especially in regards to housing), build upon current partnerships, and generate ideas for more outside support to enhance the program and to be responsive to changes in the environment and participant needs.

Although this program is functioning very well in many areas, NPC's review of program operations resulted in some recommendations for program enhancements. It is recognized that it will not always be feasible to implement all of these recommendations due to budgetary, policy or infrastructure limitations. It is important for the team to be as flexible as possible and do what they can to work around the barriers that are not changeable, in order to accomplish the ultimate goal of doing what is best for the participants.

The following recommendations represent the primary areas of suggested program improvement that arose in the interviews and observations during the site visit. Based on what NPC Research has learned about the BCADTC program and on our experience working with over 100 other drug treatment courts, the key issues that should be addressed by this program are summarized below. Background information, more detailed explanations, and additional recommendations are presented within each of the 10 Key Components in the main body of the report.

- **Make sure all team members have a copy of the policy and procedures manual.** Not all team members were aware that there is a policy and procedures manual for the BCADTC. It is recommended that all team members be given a copy so that they can refer to it to clarify program requirements. In addition, we recommend that all team members write a role description that defines their role on the drug treatment court team and lists their specific duties so that all team members are clear on who is responsible for what activities.
- **Work towards reaching program capacity.** As of October 2010, the program was not running at its capacity of 75. The team should work together to determine what barriers are preventing eligible participants from entering the program (e.g., potential participants are not being identified for referral, some referring agency staff are not aware of the program, etc.), and address those barriers so that the drug treatment court may operate at capacity. (One suggestion from the team was to allow more distribution/delivery charges into drug treatment court in order to reach program capacity.) A team member said that it will become increasingly challenging to get people into drug treatment court because sentencing guidelines make it difficult to provide the leverage many people need to get into the program. If offenders have to choose between 30 days in jail or a year and a half in an intensively supervised program, most pick the quickest and easiest option.
- **Find ways to strengthen and sustain the alumni group and other aftercare plans.** Program participants should continue to be asked to write a relapse prevention/aftercare plan as a part of their graduation requirements (including how to recognize triggers, what to do about them, attending the alumni group, and other activities to engage in after the program) with a hard copy kept by both the participant and the team. This should be written with their case manager (or whomever is most appropriate) at the beginning of their last phase in the program and then participants should start “living” the plan, including attending the alumni group, in their last phase well before graduation. The judge can ask about specific parts of the plan at court sessions and see how the participant is doing. This allows participants to get practice doing their aftercare plan (the behaviors and activities they will continue to adhere to throughout their lives) while they still have the support of the program. Aftercare is a clinical best practice, supporting individuals in their transition to a drug-free lifestyle. When the drug treatment court team meets to discuss policy issues, consider adding a discussion item to brainstorm about possible community connections and resources or ideas for generating outside support to enhance the activities available to the alumni group, including activities that would benefit the community that the alumni could perform together such as volunteering at the food bank or Habitat for Humanity.
- **Determine if there are ways to reduce turnover at the treatment provider.** Treatment staff turnover is an issue for the BCADTC. New Beginnings is also having trouble finding qualified people to fill the open counselor positions and as a result clients aren’t finding the treatment they need. If positions aren’t filled in a timely manner, the BCADTC may want to consider looking at other treatment provider options.

- **Drug test on weekends.** The BCADTC is in the process of arranging for random drug tests to be possible on weekends, so that participants have less opportunity to predict when they will be able to use drugs or alcohol without detection. Making the weekend tests random in nature will hold the participants more accountable for staying clean.
- **Consider not applauding for participants who are being sanctioned.** Observations made during court appearances showed that almost every participant was applauded (usually in response to clean time), even those who were receiving sanctions. This may dilute the meaning of the applause for people who are doing well.
- **Discuss personalized rewards during staffing meetings.** The BCADTC team may want to consider spending a little time discussing personalized rewards during staffing meetings, as it was noticed during the staffing meeting observation that little time was spent discussing rewards.
- **Use a written reward/sanction and treatment response schedule.** The BCADTC team should keep a printed reward/sanction and treatment response schedule on the table during staffing meetings for referencing and reminders when deciding on sanctions and rewards. The team could create this schedule from the section on incentives and sanctions in the policies and procedures manual, or create one based on an example from another drug treatment court (see Appendix C). It is further recommended that the team try to make the sanctions and rewards more personalized and creative within the standard guidelines, while still maintaining a level of consistency.
- **Consider being flexible about jail sanction days.** The BCADTC team may want to consider allowing participants to serve their jail sanctions on weekends so that job and school schedules will not be interrupted and cause further life issues for participants and their families.
- **Consider decreasing the required frequency of participant court appearances.** As research has shown that court appearances once every 2 weeks are related to significantly better outcomes (Marlowe et al., 2006; Carey, Finigan, & Pukstas, 2008, Carey, Mackin, & Finigan, in process), the BCADTC should consider reducing the frequency of drug treatment court appearances to once every 2 weeks for participants in the first phase (except for very high-risk participants). This change will allow the judge to spend more time per participant when they are in the court room. It may also help reduce program costs and help increase program capacity.
- **Train a back-up judge.** Having a back-up judge who is familiar with the drug treatment court model is suggested, in case of illness or vacation of the current judge. It was noted by the team that there are few judges available in the county and little interest by the currently available judges, so the BCADTC may want to look into having a judge from another county be the back-up judge. Also, if a new judge eventually replaces the current drug treatment court judge, try to build in as much transition time as possible from the current to the incoming drug treatment court judge, so that the replacement judge can learn the drug treatment court model (and understand his/her role in the program). If possible, have the incoming judge attend formal training on the drug treatment court model and behavior modification, allow the judge to observe drug treatment court hearings and learn directly from the experience of the sitting judge, and arrange time for the current judge to be available for consultation or questions.

Overall the BCADTC has implemented a program that follows the guidelines of the 10 Key Components of drug courts and many of the research based best practices. It is clear that the drug treatment court team members care about this program and are dedicated to doing what they feel is best for the participants. This dedication should help ensure that the program will continue to improve over time. The team should set aside time to discuss the overall findings and recommendations in this report, both to enjoy the recognition of its accomplishments and to determine how to respond to the recommendations provided. Appendix A contains a document providing some guidelines for how to organize the recommendations and make plans to implement any changes.

The following section of the report presents each of the 10 Key Components with the BCADTC practices and recommendations in more detail as well as additional recommendations within each component.

## **Benton County Adult Drug Treatment Court Process Study Detailed Results**

The Benton County Adult Drug Treatment Court was implemented in November 2001. This program, which is designed to take a minimum of 12 months to complete, takes post-plea/post-adjudication and post-conviction participants. The program population consists of misdemeanor and felony offenders with drug possession, driving under the influence, forgery, and property offense charges.

### **KEY COMPONENT #1: DRUG COURTS INTEGRATE ALCOHOL AND OTHER DRUG TREATMENT SERVICES WITH JUSTICE SYSTEM CASE PROCESSING.**

*Assessment Question: Has an integrated drug court team emerged?*

The focus of this key component is on the integration of treatment services with traditional court case processing. Practices that illustrate an adherence to treatment integration include the role of the treatment provider in the drug treatment court system and the extent of collaboration of all the agencies involved in the program.

In the original monograph on the 10 Key Components (NADCP, 1997), drug treatment court is described as a collaboration between ALL members of a team made up of treatment, the judge, the prosecutor, the defense attorney, the coordinator, case managers, and other community partners. Each team member sees the participant from a different perspective. Participation from all partners contributes to the strength of this model and is one of the reasons it is successful at engaging participants and changing behavior. It is important to keep team members engaged in the process by ensuring they have input on drug treatment court policies and feel their role and contribution is valued.

### National Research

Previous research (Carey, Finigan, Waller, Lucas, & Crumpton, 2005; Carey, Finigan, & Pukstas, 2008; Carey, Waller, & Weller, 2010) has indicated that greater representation of team members from collaborating agencies (e.g., defense attorney, treatment, prosecuting attorney) at team meetings and court hearings is correlated with positive outcomes for clients, including reduced recidivism and, consequently, reduced costs at follow-up. Greater law enforcement involvement increases graduation rates and reduces outcome costs (Carey, Finigan, & Pukstas, 2008).

Research has also demonstrated that drug treatment courts with one or two treatment providers or a central agency coordinating treatment resulted in more positive participant outcomes including

higher graduation rates and lower recidivism costs (Carey et al., 2005; Carey, Finigan, & Pukstas, 2008).

#### Benton County Process

- The drug treatment court team is composed of the judge, coordinator, judicial assistant, deputy district attorney, defense attorney, probation representative, police department representative, case manager, and counselor. All agencies that work directly with participants are represented on the drug treatment court team.
- All team members attend weekly drug treatment court staffing meetings where they review participants' progress.
- The BCADTC has a steering/policy committee and meets quarterly to discuss policy issues.
- The BCADTC has a staffing team extended meeting and meets monthly to discuss policy issues.
- New Beginnings Treatment Center (part of the County Health Department) provides treatment to BCADTC participants.
- The treatment provider communicates with the court verbally at staffing meetings and during court sessions, through written progress reports and via telephone and email. Information from the treatment provider is usually given to the court in a timely way.

#### Suggestions/Recommendations

- **Commendation:** The BCADTC team includes representatives from a range of collaborating agencies, which contributes to more positive outcomes for participants, according to the latest research (e.g., Carey, Mackin and Finigan, in process). Team members demonstrate a commitment to developing and maintaining an integrated drug treatment court team and following the best-practice guidelines for achieving success.
- **Commendation:** The BCADTC is commended for having law enforcement represented on the drug treatment court team. The research in this area has shown that greater law enforcement involvement increases graduation rates and reduces recidivism and outcome costs (Carey, Finigan & Pukstas, 2008).
- **Commendation:** Regular email communication. Drug treatment courts that shared information among team members through email had 65% lower recidivism than drug treatment courts that did not use email (e.g., Carey, Finigan & Pukstas, 2008; Carey, Waller, & Weller, 2010).
- **Commendation:** The program coordinates treatment through a single organization. Research has shown that coordinating treatment through one or two treatment providing agencies is related to significantly lower recidivism. The BCADTC is commended for following best practices in this area.
- **Commendation:** All BCADTC team members attend staffing meetings. Programs where all team members attend staffings had 50% lower recidivism than programs that did not include all team members.
- **Make sure all team members have a copy of the policy and procedures manual.** Not all team members were aware that there is a policy and procedures manual for the

BCADTC. It is recommended that all team members be given a copy so that they can refer to it to clarify program requirements. In addition, we recommend that all team members write a role description that defines their role on the drug treatment court team and lists their specific duties so that all team members are clear on who is responsible for what activities.

**KEY COMPONENT #2: USING A NON-ADVERSARIAL APPROACH, PROSECUTION AND DEFENSE COUNSEL PROMOTE PUBLIC SAFETY WHILE PROTECTING PARTICIPANTS' DUE PROCESS RIGHTS.**

*Assessment Question: Are the Defense Attorney and Prosecuting Attorney satisfied that the mission of each has not been compromised by drug treatment court?*

This key component is concerned with the balance of three important issues. The first issue is the nature of the relationship between the prosecution and defense counsel in drug treatment court. Unlike traditional case processing, drug treatment court case processing favors a non-adversarial approach. The second issue is to ensure the drug treatment court remains responsible for promoting public safety. The third issue is to ensure the protection of participants' due process rights.

National Research

Research by Carey et al. (2008) and Carey et al. (2010) found that participation by the prosecution and defense attorneys in team meetings and at drug treatment court status review hearings had a positive effect on graduation rates and recidivism<sup>2</sup> costs.

In addition, drug treatment courts that allowed non-drug-related charges also showed lower recidivism costs. Allowing participants into the drug treatment court program only post-plea was associated with lower graduation rates and higher investment<sup>3</sup> costs while drug courts that mixed pre-trial and post-trial offenders had similar outcomes as drug courts that keep those populations separate (Carey, et. al., in process).

Benton County Process

- The prosecutor and defense attorney are included as part of the drug treatment court team and attend staffing meetings and drug treatment court sessions regularly.
- The prosecutor and defense attorney identify and refer potential participants to the program.
- The prosecutor and defense attorney positions do not rotate.

Suggestions/Recommendations

- **Commendation.** The defense attorney and prosecutor appear to successfully take a non-adversarial team approach while participating in meetings and drug treatment court proceedings. Overall, the BCADTC appears to have successfully integrated this key component. There are no suggestions for this area at this time.

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<sup>2</sup> Recidivism costs are the expenses related to the measures of participant outcomes, such as re-arrests, jail time, probation, etc. Successful programs result in lower recidivism 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.

<sup>3</sup> 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.

### **KEY COMPONENT #3: ELIGIBLE PARTICIPANTS ARE IDENTIFIED EARLY AND PROMPTLY PLACED IN THE DRUG COURT PROGRAM.**

*Assessment Questions: Are the eligibility requirements being implemented successfully? Are potential participants being placed in the program quickly? Is the original target population being served?*

The focus of this component is on the development and effectiveness of the eligibility criteria and referral process. Different drug treatment courts have different eligibility and exclusion criteria. Some drug treatment courts include criteria unrelated to the defendant's criminal history or addiction severity, such as requiring that participants admit to a drug problem or meet other "suitability" requirements. Research reveals that the most effective drug treatment courts have clearly defined eligibility criteria. It is advisable to have these criteria written and provided to all potential referral sources. Drug treatment courts also differ in how they determine if a client meets entry criteria. While drug treatment courts are always targeting clients with a substance use problem, the drug treatment court may or may not use a substance abuse screening instrument to determine eligibility. The same may apply to mental health screens. A screening process that includes more than just an examination of legal eligibility may take more time, but also results in more accurate identification of individuals who are appropriate for the services provided by the drug treatment court.

Related to the eligibility process is how long it takes a drug court participant to move through the system from arrest to referral to drug court entry. The goal is to implement an expedient process. The length of time that passes between arrest to referral and referral to drug court entry, the key staff involved in the referral process, and whether there is a central agency responsible for treatment intake, are all factors that impact the expediency of program entry.

#### 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 outcome costs, though their investment costs were higher.

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

Other research found that drug treatment courts that included a screen for suitability and excluded participants who were found unsuitable had the same outcomes (e.g., the same graduation rates) as drug treatment courts that did not screen for suitability and did not exclude individuals based on suitability (Carey & Perkins, 2008).

#### Benton County Process

- Potential participants may be identified by the district attorney, defense attorney, circuit court, and probation.
- The BCADTC program eligibility requirements are written. All referring team agencies have copies of the eligibility criteria.
- Misdemeanor and felony offenders with drug possession, driving under the influence, forgery, and property offense charges are targeted for participation in the program.

- Offenders who are on narcotic replacement therapy and those with current violence charges or prior convictions for violence are excluded from the program.
- The SASSI is used to determine whether an offender is eligible for the drug treatment court program. Offenders are also assessed for suitability before allowing them to participate. The BCADTC has sometimes refused program entry to those who were considered unsuitable.
- Participants are screened for co-occurring mental disorders, as well as suicidal ideation. Participants with co-occurring disorders are required to have mental health treatment as part of their drug treatment court-related treatment.
- A full substance abuse treatment assessment is conducted on offenders to determine the level of care.
- The BCADTC does not have a window or back-out period when participants can try the program but decide not to participate.
- The estimated time between participant arrest and referral to the drug treatment court program is between 8 and 14 days. The estimated time between drug treatment court referral and program entry is 15-30 days, for a total estimated time from arrest to drug treatment court entry of up to 44 days.
- The drug treatment court's capacity is 75 participants. As of August 2011, 345 participants had entered the program, 158 participants had graduated, 93 participants were discharged unsuccessfully (terminated), 24 participants have not completed the program due to relocation or other issues, and 57 participants were still active.

#### Suggestions/Recommendations

- **Commendation.** The BCADTC has written program eligibility requirements and all referring agencies have copies of the requirements. This ensures that there are no misunderstandings and helps to expedite entry into the program.
- **Commendation:** The BCADTC allows offenders with charges in addition to drug charges into the program including forgery and property offenses. Research has shown that programs that allow non-drug charges in the program have 95% greater reductions in recidivism than programs that allow only drug offenses.
- **Work towards reaching program capacity.** As of October 2010, the program was not running at its capacity of 75. The team should work together to determine what barriers are preventing eligible participants from entering the program (e.g., potential participants are not being identified for referral, some referring agency staff are not aware of the program, etc.), and address those barriers so that the drug treatment court may operate at capacity. (One suggestion from the team was to allow more distribution/delivery charges into drug treatment court in order to reach program capacity.) A team member said that it will become increasingly challenging to get people into drug treatment court because sentencing guidelines make it difficult to provide the leverage many people need to get into the program. If offenders have to choose between 30 days in jail or a year and a half in an intensively supervised program, most pick the quickest and easiest option.
- **Work to decrease the length of time from arrest to program entry.** Since prompt program placement is shown to lead to higher cost savings, it is advisable to continue to monitor the referral process and refine systems to keep the time from arrest to entry as

short as possible. BCADTC's current estimated average of 23 to 44 days from arrest to drug treatment court entry slightly exceeds the research-based time limit of 20 days. It is recommended that the time from arrest to court entry is tracked and measured using real data to ensure that the actual amount of time matches the estimated time and that this window does not widen. The program may want to conduct a review to determine if there are places where time could be saved between arrest and identification for drug treatment court. An excellent resource for drug treatment court referral and entry protocols, as well as other sample drug treatment court procedures can be found at [http://www.dcpj.ncjrs.org/dcpj/dcpj\\_adult.html](http://www.dcpj.ncjrs.org/dcpj/dcpj_adult.html). An analysis of case flow to identify bottlenecks or structural barriers, and points in the process where potential adjustments to procedures could facilitate quicker placement into drug treatment court would be helpful. In addition, a more systematic identification and referral process may be able to shorten the time between arrest and drug treatment court entry.

Decreasing the time from arrest to drug treatment court entry could happen by having one person at the District Attorney's Office be assigned to review/screen all drug cases. In addition, the Defense Attorney consortium person at an offender's initial court appearance could be trained in drug treatment court eligibility (at the first court appearance, a diversion/drug court packet could be handed out to the client with eligibility information).

After reviewing this recommendation with the BCADTC team, they responded with the following information and suggestions. "The person doing the assigning of defense attorney still has to wait for the client to get in touch with the attorney (and the defense attorney needs the police report in order to do the screening) and for the District Attorney to do the offer. It may be possible for the drug treatment court defense attorney to be the assigned defense attorney for cases that may be drug treatment court eligible or at least have all drug cases be referred to him. (He is willing to do this. He just needs the other attorneys or court to send him the underlying judgment and a copy of the probation violation report).

In addition, the judge could release people from jail (probation violators) as long as they report to drug treatment court. The vast majority of clients are coming in on probation violations (and no defense attorney is present), so the District Attorney would still have to screen first. All Deputy District Attorneys, as well as probation officers, are trained so that they are aware of drug treatment court. The BCADTC could also create a form that flags a probation violator for the District Attorney and assign them to the drug treatment court defense attorney so he can talk to them about drug treatment court. This would ensure that everyone gets an alcohol and drug evaluation before they get into drug treatment court and make sure they are all appropriate."

#### **KEY COMPONENT #4: DRUG COURTS PROVIDE ACCESS TO A CONTINUUM OF ALCOHOL, DRUG AND OTHER TREATMENT AND REHABILITATION SERVICES.**

*Assessment Question: Are diverse and specialized treatment services available?*

The focus of this key component is on the drug treatment court's ability to provide participants with a range of treatment services appropriate to their clinical needs. Success under this component is highly dependent on success under the first component (i.e., ability to integrate treatment services within the program). Compliance with Key Component #4 requires having a range of treatment modalities or types of service available. However, drug treatment courts still have deci-

sions about how wide a range of treatment and habilitation services to provide, available levels of care, and which services are important for their target population.

### National Research

Programs that have requirements for 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 recidivism costs (Carey et al., 2008). Clear requirements of this type may make compliance with program goals easier for participants and also may facilitate program staff in determining 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.

Research has found that clients who participate in group treatment sessions 2 or 3 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 (such as with transportation, childcare, or employment), and may lead to clients having difficulty complying with program requirements and completing the program. Conversely, it appears that one or fewer sessions per week is too little service to demonstrate positive outcomes. In addition, drug treatment courts that include a focus on relapse prevention were shown to have higher graduation rates and lower recidivism than drug treatment courts that did not (Carey et al., 2010).

The American University National Drug Court Survey (Cooper, 2000) showed that most drug treatment courts have a single treatment provider agency. NPC, in a study of 18 drug treatment courts in four different states (Carey et al., 2008), 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 recidivism related costs. More recent research supported this finding, revealing that reductions in recidivism decrease as the number of treatment agencies increase (Carey et al., in process).

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

### Benton County Process

- New Beginnings Treatment Center (part of the County Health Department) provides treatment to BCADTC participants. All team members perform case management. The counselor, probation, and drug treatment court coordinator perform home visits.
- The BCADTC program consists of three phases, and incorporates weekly individual counseling/case management sessions in the first phase which decreases to once every 3 weeks in the last phase. Group treatment session attendance is required three times weekly in the first phase and one time weekly in the last phase. Participants are also required to attend self-help groups throughout the program.
- *Services required for all participants are based on assessed level of care and include:* outpatient individual and group treatment sessions, gender-specific treatment sessions, health education, and self-help meeting attendance. *Services required for some participants include:* residential treatment, mental health counseling, psychiatric services, language-specific or culturally-specific programs, parenting classes, prenatal/perinatal program, anger management/violence prevention classes, job training, employment assis-

tance, GED/education assistance, and housing/homelessness assistance. *Services offered to participants but not required include:* detoxification, family/domestic relations counseling, health care, transportation, and child care for participants with small children. Acupuncture, dental care, and prescription drugs for substance abuse are not offered.

- The BCADTC has a phase when participants learn relapse prevention and an aftercare program for participants that is available after graduation. An alumni group meets occasionally and provides support for current participants.

#### Suggestions/Recommendations

- **Commendation:** The program coordinates treatment through a single organization. Research has shown that coordinating treatment through one or two treatment providing agencies is related to significantly lower recidivism. The BCADTC is commended for following best practices in this area.
- **Commendation:** The BCADTC provides a breadth of diverse and specialized services to program participants.
- **Find ways to strengthen and sustain the alumni group and other aftercare plans.** Program participants should be asked to write a relapse prevention/aftercare plan (including how to recognize triggers, what to do about them, attending the alumni group, and other activities to engage in after the program) with a hard copy kept by both the participant and the team. It can be written with their case manager (or whomever is most appropriate) at the beginning of their last phase in the program and then participants should start “living” the plan, including attending the alumni group, in their last phase. The judge can ask about specific parts of the plan at court sessions and see how the participant is doing. This allows participants to get practice doing their aftercare plan (the behaviors and activities they will continue to adhere to throughout their lives) while they still have the support of the program. Aftercare is a clinical best practice, supporting individuals in their transition to a drug-free lifestyle. When the drug treatment court team meets to discuss policy issues, consider adding a discussion item to brainstorm about possible community connections and resources or ideas for generating outside support to enhance the activities available to the alumni group, including activities that would benefit the community that the alumni could perform together such as volunteering at the food bank or Habitat for Humanity.
- **Determine if there are ways to reduce turnover at the treatment provider.** Treatment staff turnover is an issue for the BCADTC. New Beginnings is also having trouble finding qualified people to fill the open counselor positions and as a result clients aren’t finding the treatment they need. If positions aren’t filled in a timely manner, the BCADTC may want to consider looking at other treatment provider options.

#### **KEY COMPONENT #5: ABSTINENCE IS MONITORED BY FREQUENT ALCOHOL AND OTHER DRUG TESTING.**

*Assessment Question: Compared to other drug courts, and to research findings on effective testing frequency, does this court test frequently?*

The focus of this key component is on the use of alcohol and other drug testing as a part of the drug treatment court program. Drug testing is important both for court supervision and for participant accountability. It is generally seen as a key practice in participants’ treatment process. This

component encourages frequent testing but does not define the term “frequent” so drug treatment courts develop their own guidelines on the number of tests required. Related to this component, the drug treatment court must assign responsibility for these tests and the method for collection.

### National Research

Research on drug courts in California (Carey et al., 2005) found that drug testing that occurs randomly, at least 3 times per week, is the most effective model. If testing occurs more frequently (that is, more than 3 times per week), the random component becomes less important as it is difficult to find time to use in between frequent tests.

Outcomes for programs that tested more frequently than 3 times per week were no better or worse than outcomes for those that tested 3 times per week. However, less frequent testing resulted in less positive outcomes.

In addition to frequency of testing, it is important to ensure that drug testing is random, unexpected, and fully observed during sample collection, as there are numerous ways for individuals to predict when testing will happen and therefore use in between tests or submit a sample that is not their own. In focus groups with participants after they left their programs, individuals have reported many ways they were able to “get around” the drug testing process, including sending their cousin to the testing agency and bringing their 12-year-old daughter’s urine to submit.

### Benton County Process

- Drug testing is both random and for cause (if a client appears to be under the influence). Participants must call a UA line every weekday to see if their number has come up and report to New Beginnings Treatment Center to submit their UA. Participants are tested randomly a minimum of 2 times per week throughout their time in the program.
- Drug testing is mainly performed through urinalysis (UAs) and breath tests. UA samples are sent out to a lab for testing and results are obtained within 2 to 3 days.
- All UAs are fully observed by same gender staff who are trained to safeguard the collection process. The majority of drug tests are conducted by the treatment provider, but probation also does drug testing.

### Suggestions/Recommendations

- **Commendation:** The BCADTC tests randomly at least 2 times per week. Research shows that testing at least 2 times per week is related to significantly lower recidivism and higher cost savings.
- **Commendation.** The BCADTC has implemented frequent and random drug testing that is observed by staff trained to safeguard the collection process.
- **Drug test on weekends.** The BCADTC is in the process of arranging for random drug tests to be possible on weekends, so that participants have less opportunity to predict when they will be able to use drugs or alcohol without detection. Making the weekend tests random in nature will hold the participants more accountable for staying clean.

## KEY COMPONENT #6: A COORDINATED STRATEGY GOVERNS DRUG COURT RESPONSES TO PARTICIPANTS' COMPLIANCE.

*Assessment Questions: Do program staff 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?*

The focus of this component is on how the drug treatment court team responds to client behavior during program participation, including how the team works together to determine an effective, coordinated response. Drug treatment courts have established a system of rewards and sanctions that determine the program's response to acts of both non-compliance and compliance with program requirements. This system may be informal and implemented on a case-by-case basis, a formal system applied evenly to all clients, or a combination of both. The key staff involved in decisions about appropriate responses to participant behavior varies across courts. Drug treatment court team members may meet and decide on responses, or the judge may decide on the response in court. Drug treatment court participants may (or may not) be informed of the details on this system of rewards and sanctions, so their ability to anticipate a response from their team may vary significantly across programs.

### National Research

The drug treatment court judge is legally and ethically required to make the final decision regarding sanctions or rewards, based on expert and informed input from the drug treatment court team. All drug treatment courts surveyed in an American University study reported that they had established guidelines for their sanctions and rewards policies, and nearly two-thirds (64%) reported that their guidelines were written (Cooper, 2000).

Drug treatment courts that responded to infractions immediately, particularly by requiring participants to attend the next scheduled court session, had twice the cost savings.

In addition, research has found that drug treatment courts that had their guidelines for team responses to participant behavior written and provided to the team had higher graduation rates and higher cost savings due to lower recidivism (Carey et al., 2008; Carey et al., 2010).

### Benton County Process

- Initial decisions about sanctions and rewards are made during staffing meetings prior to drug treatment court. The judge has the authority to make the final decision about whether to impose the rewards and sanctions suggested by the team, but the judge makes an effort to ensure that the decisions that are handed down are from the entire team.
- Weekly meetings to discuss participants' behavior and progress are attended by all team members.
- All team members have been trained in the use of rewards and sanctions to modify the behavior of drug treatment court participants.
- Participants receive rewards, which are given in a standardized way for specific behaviors and sometimes on a case-by-case basis. Most rewards are intangible (such as applause), although participants also receive tangible rewards, such as gift cards to local businesses and phase completion certificates. In addition, if all participants are clean and sober in a given week, they have a pizza party. Staff can provide rewards outside of court sessions. Particularly effective rewards include "A Team" recognition for total com-

pliance since last court date, participant of the month, and group activities to celebrate clean time milestones.

- Participants know what specific behaviors lead to rewards and sanctions, but they are not given a written list of possible rewards/sanctions or a written list of the behaviors that lead to rewards/sanctions. Participants have been asked if the rewards they receive are meaningful to them.
- The drug treatment court team members have access to a written copy of the guidelines for program response to participant behavior, but not all team members have it.
- Sanctions are sometimes standardized, and are sometimes on a case-by-case basis.
- Sanctions are imposed immediately after the non-compliant behavior if possible, or at the first court session after the non-compliant behavior. Sanctions may be imposed outside of court by team members other than the judge.
- Sanctions are graduated so that the severity increases with more frequent or more serious infractions. Court responses to participant non-compliance include writing essays, community service, residential treatment, more frequent UAs, more frequent court appearances, increased treatment sessions, return to an earlier phase, work crew, and jail time. Jail for lying about use is a particularly effective sanction.
- Jail time is sometimes used after the third positive drug test, and rarely after the first or second positive drug test. Jail sanctions are often 1 day, and sometimes 2-6 days. Jail is sometimes used as an alternative for detoxification or residential when detoxification or residential treatment is not available.
- Participants are required to pay fees to probation as part of the program. Total fees paid per participants are estimated to be \$665. Fees do not vary according to participants' ability to pay.
- Participants in phase 2 or 3 who fail a UA (no show, dilute or positive results) are assessed \$20 per incidence.
- Participants must be drug-free a minimum of 90 days before they can graduate, but there is not a minimum number of clean drug tests before a participant can graduate.
- In order to graduate, participants are required to have a job or be in school, have a sober housing environment, complete treatment and develop a relapse prevention plan, complete community service, write a sobriety plan, pay all drug treatment court fees, pay all court-ordered fines and fees not related to drug treatment court, complete a GED (if they have no diploma), prepare a list of tips for current participants, and complete a parenting class (if they are parents of minor children).
- New arrests for trafficking or violence, new arrests/convictions for DUI, and absconding from the program for more than 30 days would all prompt removing an individual from participation in the BCADTC program (termination).
- Charges that led participants to drug treatment court are dismissed upon graduation. Other graduation incentives include the early termination of probation or not serving a jail, prison, or probation sentence.

### Suggestions/Recommendations

- **Commendation.** Overall, the BCADTC shows a good balance of sanctions and rewards, and treatment responses occur as soon as possible following the behavior that prompts the response. The program is commended for training team members in sanctions and rewards and implementing a coordinated strategy to govern drug treatment court responses to participants' compliance.
- **Consider not applauding for participants who are being sanctioned.** Observations made during court appearances showed that almost every participant was applauded (usually in response to clean time), even those who were receiving sanctions. This may dilute the meaning of the applause for people who are doing well.
- **Discuss personalized rewards during staffing meetings.** The BCADTC team may want to consider spending a little time discussing personalized rewards during staffing meetings, as it was noticed during the staffing meeting observation that little time was spent discussing rewards.
- **Use a written reward/sanction and treatment response schedule.** The BCADTC team should keep a printed reward/sanction and treatment response schedule on the table during staffing meetings for referencing and reminders when deciding on sanctions and rewards. The team could create this schedule from the section on incentives and sanctions in the policies and procedures manual, or create one based on an example from another drug treatment court (see Appendix C). It is further recommended that the team try to make the sanctions and rewards more personalized and creative within the standard guidelines, while still maintaining a level of consistency.
- **Consider being flexible about jail sanction days.** The BCADTC team may want to consider allowing participants to serve their jail sanctions on weekends so that job and school schedules will not be interrupted and cause further life issues for participants and their families.

### **KEY COMPONENT #7: ONGOING JUDICIAL INTERACTION WITH EACH PARTICIPANT IS ESSENTIAL.**

*Assessment Question: Compared to other drug courts, and to effective research-based practice, do this court's participants have frequent contact with the judge? What is the nature of this contact?*

The focus of this component is on the judge's role in drug treatment court. The judge has an extremely important function for drug treatment court in monitoring client progress and using the court's authority to promote positive outcomes. While this component encourages ongoing interaction, drug treatment courts must still decide more specifically how to structure the judge's role. Courts need to determine the appropriate amount of courtroom interaction between the participant and the judge, including the frequency of status review hearings, as well as how involved the judge is to be with the participant's case. Outside of the court sessions, depending on the program, the judge may or may not be involved in team discussions, progress reports and policymaking. One of the key roles of the drug treatment court judge is to provide the authority to ensure that appropriate treatment recommendations from trained treatment providers are followed.

### 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.

Research in California, Oregon, Michigan, Maryland, Missouri and Guam (Carey et al., 2005; 2008; 2010; in process) demonstrated that, on average, participants have the most positive outcomes if they attend approximately one court appearance every 2 weeks in the first phase of their involvement in the program. Marlowe et al. (2006) also demonstrated that bi-weekly court sessions were more effective for high risk offenders, whereas less frequent sessions (e.g., monthly) were as effective for lower risk offenders.

In addition, programs in which the judge remained on the bench for at least 2 years had the most positive participant outcomes. It is recommended that drug courts either avoid fixed terms, or require judges with fixed terms to serve 2 years or more, and that courts with fixed terms consider having judges rotate through the drug court more than once, as experience and longevity are correlated with more positive participant outcomes and cost savings (Carey et al., 2005; Finigan, Carey, & Cox, 2007).

### Benton County Process

- Drug treatment court participants typically attend drug treatment court sessions once per week in the first phase, with court attendance reducing over the phases so that participants appear once per month by the last phase.
- The drug treatment court judge is assigned to the drug treatment court indefinitely.
- The drug treatment court judge has attended official drug treatment court training sessions and workshops, observed other drug treatment courts, and received training by previous drug treatment court judges. In addition, the judge has attended professional drug treatment court-related conferences.
- The judge speaks directly to participants during their court appearances, consistently follows the recommendations provided by the team, and provides consistent follow-through on warnings to participants. Observations made during treatment court appearances revealed that the judge was clear and direct with participants and did a good job of explaining why participants were getting the sanctions they did. The judge also did a good job of talking a negative participant around to a more positive, action-oriented outlook. The judge allowed participant to talk but was able to redirect appropriately when participants went on too long.

### Suggestions/Recommendations

- **Commendation:** The judge spoke with each participant for at least three minutes. Best practices research shows that programs where judges spend at least three minutes per participants have significantly lower recidivism and higher cost savings.
- **Consider decreasing the required frequency of participant court appearances.** As research has shown that court appearances once every 2 weeks are related to significantly better outcomes (Marlowe et al., 2006; Carey, Finigan, & Pukstas, 2008, Carey, Mackin, & Finigan, in process), the BCADTC should consider reducing the frequency of drug

treatment court appearances to once every 2 weeks for participants in the first phase (except for very high-risk participants). This change will allow the judge to spend more time per participant when they are in the court room. It may also help reduce program costs and help increase program capacity.

- **Train a back-up judge.** Having a back-up judge who is familiar with the drug treatment court model is suggested, in case of illness or vacation of the current judge. It was noted by the team that there are few judges available in the county and little interest by the currently available judges, so the BCADTC may want to look into having a judge from another county be the back-up judge. Also, if a new judge eventually replaces the current drug treatment court judge, try to build in as much transition time as possible from the current to the incoming drug treatment court judge, so that the replacement judge can learn the drug treatment court model (and understand his/her role in the program). If possible, have the incoming judge attend formal training on the drug treatment court model and behavior modification, allow the judge to observe drug treatment court hearings and learn directly from the experience of the sitting judge, and arrange time for the current judge to be available for consultation or questions.

#### **KEY COMPONENT #8: MONITORING AND EVALUATION MEASURE THE ACHIEVEMENT OF PROGRAM GOALS AND GAUGE EFFECTIVENESS.**

*Assessment Question: Are evaluation and monitoring integral to the program?*

This component encourages drug treatment court programs to monitor their progress towards their goals and evaluate the effectiveness of their practices. The purpose is to establish program accountability to funding agencies and policymakers as well as to themselves and their participants. Further, regular monitoring and evaluation provides programs with the feedback needed to make adjustments in program practices that will increase effectiveness. Finally, programs that collect data and are able to document success can use that information to gain additional funding and community support. Monitoring and evaluation require the collection of thorough and accurate records. Drug treatment courts may record important information electronically, in paper files or both. Ideally, drug treatment courts will partner with an independent evaluator to help assess their progress. Lastly, it is important to determine how receptive programs are to modifying their procedures in response to feedback.

#### National Research

Carey, Finigan, and Pukstas (2008) and Carey et al. (2009) 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 electronic records that are critical to participant case management and to an evaluation, 2) the use of program statistics by the program to make modifications in drug treatment court operations, 3) the use of program evaluation results to make modification to drug treatment court operations, and 4) the participation of the drug treatment court in more than one evaluation by an independent evaluator.

#### Benton County Process

- The BCADTC collects data electronically for participant tracking. These data include information provided by the treatment provider. The program monitors the information it collects on program participants to assess whether it is moving toward its goals. The BCADTC has made adjustments in policy or practice based on this monitoring.

- The BCADTC has had an outside evaluator measure whether the program is being implemented as intended and whether the program is achieving its intended outcomes. Adjustments in policy or practice have been made based on feedback from the outside evaluation.

#### Suggestions/Recommendations

- **Commendation:** Overall, the program has implemented best practices within Key Component #8. We suggest that the team set aside time to discuss the findings and recommendations in this process evaluation, both to enjoy the recognition of its accomplishments and to determine whether any program adjustments are warranted. Appendix A contains a brief set of guidelines for how to review program feedback and next steps in making changes to the program. In addition, the outcome evaluation results can be very beneficial to the program if it is looking to apply for grants to fund additional positions, etc., or for local funders/agencies to help them access resources. These results can document needs as well as show how well the program has done.

#### **KEY COMPONENT #9: CONTINUING INTERDISCIPLINARY EDUCATION PROMOTES EFFECTIVE DRUG COURT PLANNING, IMPLEMENTATION, AND OPERATIONS.**

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

This component encourages ongoing professional development and training of drug court staff. Team members need to be updated on new procedures and maintain a high level of professional and technical knowledge. Drug courts must decide who receives this training and how often. This can be a challenge during implementation as well as for courts with a long track record. Drug courts are encouraged to continue organizational learning and share lessons learned with new hires.

#### National Research

Carey et al. (2008; in process) found that drug treatment court programs requiring all new hires to complete formal training or orientation, and requiring *all* drug treatment court team members to attend regular trainings were associated with higher graduation rates and greater cost savings due to lower recidivism.

#### Benton County Process

- In addition to on-the-job training, all drug treatment court team members have received training or education specifically on the drug treatment court model.
- Drug treatment court team members have received training specifically about the target population of the court including age, gender, race/ethnicity and drugs of choice. They have also received training on strength-based philosophy and practices. Team members have attended drug treatment court related trainings specific to their role on the drug treatment court team, and have brought new information on drug treatment court practices including drug addiction and treatment to meetings.
- New drug treatment court team members are trained on the drug treatment court model before or soon after starting work.
- All drug treatment court team members have had training specifically in the use of rewards and sanctions to modify the behavior of drug treatment court participants.

### Suggestions/Recommendations

- **Commendation and recommendation to continue training all team members.** Regular and formal training of team members is a best practice. The BCADTC has done an excellent job of focusing on training. The program should continue to ensure that all drug treatment court staff members, including treatment providers, receive training about the drug treatment court model, their role in the drug treatment court setting, addiction, and rewards and sanctions as well as education on the program's specific target population. All staff should have regular opportunities for refresher training and updated information to stay current in the field. We recommend that a training log be kept that includes each team member and that staff attend training (online, and/or at in-person training sessions or conferences) at least once per year.

### **KEY COMPONENT #10: FORGING PARTNERSHIPS AMONG DRUG COURTS, PUBLIC AGENCIES, AND COMMUNITY-BASED ORGANIZATIONS GENERATES LOCAL SUPPORT AND ENHANCES DRUG COURT PROGRAM EFFECTIVENESS.**

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

This component encourages drug courts to develop partnerships with other criminal justice, service, nonprofit and commercial agencies. For these collaborations to be true “partnerships,” regular meetings and collaborations with the partners should occur. If successful, the drug court will benefit from the expertise that resides in all of the partner agencies and participants will enjoy greater access to a variety of services. Drug courts must still determine what partners are available and decide with whom to partner and how formal to make these partnerships. Other important factors to weigh include who will be considered as part of the main drug court team; who will provide input primarily through policymaking; and what types of services will be available to clients through these partnerships.

### 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.

In addition, Carey et al. (2005) and Carey et al. (2010) found that drug courts that had formal partnerships with community agencies that provide services to drug court participants had better outcomes than drug courts that did not have these partnerships.

### Benton County Process

- The BCADTC has developed and maintained relationships with organizations that can provide services for participants in the community and refers participants to those services when appropriate. Some of these services include financial responsibility classes, transportation assistance and educational services.
- The drug treatment court team includes representatives from community agencies that work regularly with drug treatment court participants.

- The BCADTC is currently funded by BJA, the State Criminal Justice Commission, and the County. The program plans to sustain funding for drug treatment court in the future using these same sources.

#### Suggestions/Recommendations

- **Commendation.** Overall, this program has successfully established partnerships across community agencies. The drug treatment court team should continue discussing possible new community connections and resources (especially in regards to housing), build upon current partnerships, and generate ideas for more outside support to enhance the program and to be responsive to changes in the environment and participant needs.

#### **ADDITIONAL RESOURCES**

The appendices at the end of this document contain resources to assist the program in making any changes based on the feedback and recommendation in this report. Appendix A provides a brief “how-to” guide for beginning the process of changing program structure and policies. Appendix B contains a list of incentives and sanctions used in drug treatment court programs across the country for use in developing new ideas for court and treatment responses that will change participant behavior in more positive directions. Appendix C provides an example from a currently operating drug treatment court of their reward and sanction guidelines. Appendix D provides a list of data elements that programs should collect for case management, self-monitoring and evaluation. Other important and useful resources for drug treatment courts are available at this Web address: [http://www.dcpj.ncjrs.org/dcpj/dcpj\\_adult.html#ias](http://www.dcpj.ncjrs.org/dcpj/dcpj_adult.html#ias)

## OUTCOME EVALUATION

**T**he purpose of an outcome evaluation is to determine whether the program has improved participant outcomes. In other words, did the program achieve its intended goals for its participants? An outcome evaluation can examine short-term outcomes that occur while a participant is still in the program. This includes whether the program is delivering the intended amount of services, whether participants are receiving the right services, whether participants are successfully completing the program in the intended amount of time, whether drug use is reduced and what factors lead to participants successfully completing the program. An outcome evaluation can also measure longer term outcomes (sometimes called an “impact evaluation”) including participant outcomes after program completion. In the case of drug treatment court programs, one of the largest impacts of interest is recidivism. Are program participants avoiding the criminal justice system “revolving door?” How often are participants being re-arrested, spending more time on probation and in jail?

In this evaluation both short and long-term outcomes were assessed. This portion of the evaluation examined graduation rates and what participant characteristics predicted whether or not they successfully complete the program, as well as whether drug treatment court participants reduced their drug use and whether drug treatment court participants were re-arrested less often than similar individuals who did not participate in drug treatment court.

This section of the report includes a description of the research strategy and methods used for studying participant outcomes. This is followed by a presentation of the outcome results.

### Outcome Evaluation Methods

#### RESEARCH STRATEGY

The criminal justice system outcome that is most commonly used to measure the effectiveness of drug treatment courts is the recidivism of drug treatment court participants after they leave drug treatment court programs. Re-arrests are defined in this study as any new arrest excluding minor traffic citations or infractions. NPC Research identified a sample of participants who entered the BCADTC between January 2002 and July 2007. This time frame allowed for the availability of at least 3 years (and up to 5 years) of recidivism data post-program entry for all program participants. This timeframe also allowed for recidivism outcomes for at least two years post program exit.

A comparison group was identified from a list of court cases for individuals arrested on a drug court eligible charge who have appropriate criminal histories as well as other factors that would have made them eligible for drug court. The majority of these individuals were arrested prior to the implementation of the program while others did not come to the attention of the drug court team for various reasons. The full comparison group selection process is described under the section on Sample Selection.

The drug treatment court participants and comparison individuals were matched on age, gender, ethnicity, indication of prior drug use, type of charge for the index case arrest (drug, property or other) and criminal history, including prior arrests and prior drug arrests.

Both groups were examined through existing administrative databases for a period up to 5 years from the date of drug treatment court entry. For comparison group members, an equivalent “start date” was calculated by adding the mean number of days from drug treatment court eligible arrest

to drug treatment court entry (for drug treatment court participants), to the eligible arrest date of comparison group members. The evaluation team utilized the data sources described below, to determine whether there was a difference in re-arrests, incarceration and other outcomes of interest between the drug treatment court and comparison group.

In addition, research has demonstrated the importance of completing substance abuse treatment in the realization of desirable societal effects. These positive effects include substance abuse cessation, reduced criminal behavior and improved employment outcomes (Finigan, 1996). Similarly, an initial indicator of the success of a drug treatment court program is the rate of program participant graduation (completion of treatment). Therefore, the graduation rates were calculated for BCADTC and compared to the national average for drug treatment court programs.

Any differences in demographics and criminal history between drug treatment court graduates and non-graduates were also examined to determine if there were indications of specific groups that would need additional attention from the drug treatment court program to increase successful outcomes.

## **OUTCOME/IMPACT STUDY QUESTIONS**

The outcome evaluation was designed to address the following study questions:

- Does participation in drug treatment court reduce the number of re-arrests for those individuals compared to traditional court processing?
- Does participation in drug treatment court reduce levels of substance abuse?
- How successful is the program in bringing program participants to completion and graduation within the expected time frame?
- What participant characteristics predict successful outcomes (program completion, decreased recidivism)?

## **DATA COLLECTION AND SOURCES**

### *Administrative Data*

NPC staff members adapted procedures developed in previous drug court evaluation projects for data collection, management, and analysis of the BCADTC data. Once all data were gathered on the study participants, the data were compiled, cleaned and moved into SPSS for statistical analysis. The evaluation team employed univariate and multivariate statistical analyses using SPSS (described in more detail in the data analysis section). The majority of the data necessary for the outcome evaluation were gathered from the administrative databases described below and in Table 1.

**Table 1. Benton County Adult Drug Treatment Court Evaluation Data Sources**

<b>Database</b>	<b>Source</b>	<b>Example of Variables</b>
<i>The Oregon Treatment Court Management System (OTCMS)</i>	Benton County Adult Drug Treatment Court	For drug court participants only: Demographics, time spent in drug court, court sessions, drug test results, discharge status
<i>Department of Corrections (DOC)</i>	Oregon Department of Corrections (DOC)	Start and end dates for parole, probation; Start and end dates for prison time
<i>Oregon Judicial Information Network (OJIN)</i>	Oregon Judicial Department	Incident dates (arrests), dates of case filings, charges, sentences
<i>Local Sheriff Jail Data</i>	Benton County	Jail entry and exit dates

#### ***The Oregon Treatment Court Management System***

In 2000, the Oregon Judicial Department (OJD), working with the Oregon Association of Drug Court Professionals (OADCP), secured a Department of Justice Statewide Enhancement Grant to create a data collection system. These funds were used to develop the Oregon Treatment Court Management System (OTCMS), a Management Information System (MIS) that serves as a participant case management tool and program data depository. The OTCMS is currently used by 45 of Oregon's 47 adult, juvenile, and Family Treatment Drug Courts. OTCMS is the primary data source for Oregon drug treatment court process and outcome evaluations as well as the data source for reporting performance measures to the state.

#### ***Department of Corrections (DOC)***

The DOC database contains information on demographics and service data including the start and end dates and level of supervision for probation, parole, and post-prison supervision. These data were used to examine participant and comparison group criminal justice recidivism and to determine criminal justice recidivism-related costs.

#### ***Oregon Judicial Information Network (OJIN)***

OJIN is a case tracking system that stores Oregon State Court case information from multiple sources and counties in a single database. It lists all events related to a case, including all hearings scheduled. It is valuable for demographics, key case dates, and case findings as well as criminal justice recidivism information that include case filings and charges for all types of arrest. These data were used for criminal justice recidivism analyses and related costs.

## SAMPLE SELECTION

As described above, a selection was made of a sample of individuals who had participated in drug treatment court and a sample of individuals who had not for the comparison group.

### *Benton County Drug Treatment court Participant Sample*

NPC selected the total number of participants who entered BCADTC between December 2001 and October 2007. This time interval was chosen to allow at least 36 months of follow-up for every participant post drug court start. For this time period, there were 177 drug treatment court participants who began the program. This number includes 111 graduates and 66 non-graduates. This was an intent-to-treat model. That is, all individuals who entered the program were included in the analysis, regardless of whether they graduated or how long they remained in the program.

### *Comparison Group*

A potential comparison group was identified from a list of court cases for individuals who were arrested on a drug treatment court-eligible charge between January 2001 and October 2007. This list was further refined by including only those who met the eligibility requirement for the drug treatment court program in Benton County in terms of arrest histories (individuals with convictions for violent or drug sales charges were excluded). Arrest histories were examined for the comparison group to ensure that these individuals were not diversion candidates and did not have their charges dismissed. Based on interviews with drug treatment court staff members responsible for eligibility decisions, this group was then examined for other factors that would have made them good candidates for the drug treatment court program. For those individuals who could be located in the Department of Corrections data system, a positive UA test was further indication of a possible substance abuse issue. For those not found in the DOC data system, a drug charge anywhere within their criminal history served as this indication. The two groups were matched<sup>4</sup> on age, gender, ethnicity, indication of prior drug use, type of charge for the index case arrest (drug, property or other) and criminal history, including total prior arrests, as well as prior drug, person and property arrests and prior felonies. Any potential remaining differences between the drug treatment court and comparison group on these factors were controlled for in the analyses.

## DATA ANALYSES

Once all data were gathered on the study participants, the data were compiled and cleaned and moved into SPSS for statistical analysis. The analyses used to answer specific questions were as follows.

1. *Does participation in drug treatment court reduce the number of re-arrests for those individuals compared to traditional court processing?*

Univariate analysis of covariance (ANCOVA) were performed to compare the mean number of re-arrests for all drug treatment court participants with the comparison group for each year up to five years after drug treatment court entry. The means reported were adjusted (controlled for) in the analysis based on [gender](#), age at program entry (or equivalent in the comparison group), eth-

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<sup>4</sup> The groups were matched using what we call “bin matching” so that the two groups were not only not significantly different on each of the listed characteristics separately but were also proportionally similar on combined characteristics. For example, there were similar proportions of females between 18-25 who were white and had two prior felony arrests, etc. This has a comparable result to performing propensity score matching but allows the analyst more control over each of the factors.

nicity, and number of prior arrests (both person and felony arrests).<sup>5</sup>The non-adjusted means for graduates are included in the results for reference but should not be compared directly with the comparison group as the comparison group includes an unknown number of individuals who, had they participated in drug treatment court, may have terminated from the program and are therefore not equivalent to drug treatment court graduates.

Crosstabs were run to examine differences in recidivism rate (the number/percentage of individuals rearrested at least once during the specified time period) between drug treatment court and the comparison group for each year up to five years following program start. Chi-square analyses as well as ordinal tests were used to identify any significant differences in re-arrest rates between drug treatment court and comparison group participants.

Does participation in drug treatment court reduce levels of substance abuse?

Reliable drug testing results were not available in the administrative database for all drug treatment court participants or the comparison group. So, it was not possible to perform analyses on more direct measures of reductions in drug use.

However, another way of estimating relapse, or continued drug use, is the number of new arrests with drug charges. Although it is highly likely that this underestimates the actual frequency of use, it is reasonable to assume that the proportional difference between the drug treatment court and comparison group for new drug charges may approximate the difference in the two groups for actual drug use.

Univariate analysis of covariance (ANCOVA) were performed to compare the means of all drug treatment court participants with the comparison group for each year up to five years after drug treatment court participation. The reported means were adjusted (controlled for) in the analyses based on gender, age at index case arrest, ethnicity, and number of prior arrests (felony, person and drug arrests). As explained above, the mean for graduates is included for reference but should not be compared directly with the comparison group.

How successful is the program in bringing program participants to completion and graduation within the expected time frame?

Whether a program is bringing its participants to completion in the intended time frame is measured by program graduation (successful completion) rates, and by the amount of time participants spend in the program. The program graduation rate is the percentage of participants who graduated from the program out of the total group of participants who started during a specified time period and who have all left the program either by graduating or being unsuccessfully discharged (that is, none of the group is still active and all have had an equal chance to graduate). The Benton County graduation rate was compared to the national average drug treatment court graduation rate and the differences were discussed qualitatively.

To measure whether the program is graduating participants in its expected time frame, the average amount of time in the program was calculated for participants who had enrolled in the BCADTC program between January 2004 and July 2007 and have been successfully discharged from the

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<sup>5</sup> Time at risk was NOT controlled for in the analysis as the intention of the analysis is to determine whether drug court participation (which typically occurs in the community) reduces recidivism more effectively than business-as-usual, which typically includes at least some incarceration. If incarceration was used for non-drug court participants and was effective in reducing crime, then controlling for this factor would prevent us from determining which path (drug court or business as usual) was more effective.

program. The average length of stay for graduates and for all participants was compared to the intended time to program completion and the differences discussed qualitatively.

What participant characteristics predict program success and decreased recidivism?

Graduates and unsuccessfully discharged participants were compared on the basis of demographic characteristics and number of arrests during the 2 years prior to drug treatment court entry to determine whether any significant patterns predicting program graduation or recidivism could be found. In order to best determine which demographic characteristics were related to successful drug treatment court completion, Chi-square and independent samples t-tests were performed to identify which factors were significantly associated with program success. A logistic regression was used including all variables in the model to determine if any factors were significantly related to graduation status above and beyond the other factors.

Participant characteristics and arrest history were also examined in relation to whether an individual was rearrested following drug treatment court entry. Chi-square and independent samples t-test were performed to identify which factors were significantly associated with recidivism.

## Outcome Evaluation Results

Table 2 provides the demographics for the study sample of drug treatment court participants and the comparison group. Independent samples t-tests and chi-square analyses showed no significant differences between groups on the characteristics listed in the table except for prior felonies. The drug treatment court group had significantly larger numbers of prior felonies. The two groups were unable to be matched on this variable without “un-matching” other key characteristics. This difference was controlled for statistically in all analyses comparing the two groups.

**Table 2. Drug Treatment Court Participant and Comparison Group Characteristics**

	All Drug Court Participants N = 177	Comparison Group N = 321
Gender	51% male 49% female	57% male 43% female
Ethnicity		
White	92%	93%
African American	4%	4%
Latino	3%	2%
Other	1%	1%
Mean Age at Program Entry	31 years	31 years
Range	18 – 54 years	18 – 60 years
Drug of Choice <sup>6</sup>		
Methamphetamine	83%	Unavailable
Marijuana	65%	
Alcohol	45%	
Cocaine	12%	
Heroin	5%	
Average number of all arrests in the 2 years prior to program entry	2.2	2.0
Average number of arrests with <b>drug</b> charges in the 2 years prior to program entry	1.1	1.2
Average number of arrests with <b>property</b> charges in the 2 years prior to program entry	1.9	1.9
Average number of arrests with <b>person</b> charges in the 2 years prior to program entry	0.23	0.27
Average number of arrests with <b>felony</b> charges in the 2 years prior to program entry <sup>7</sup>	0.76	0.23

<sup>6</sup> Percentages do not add up to 100% as most participants are poly drug users.

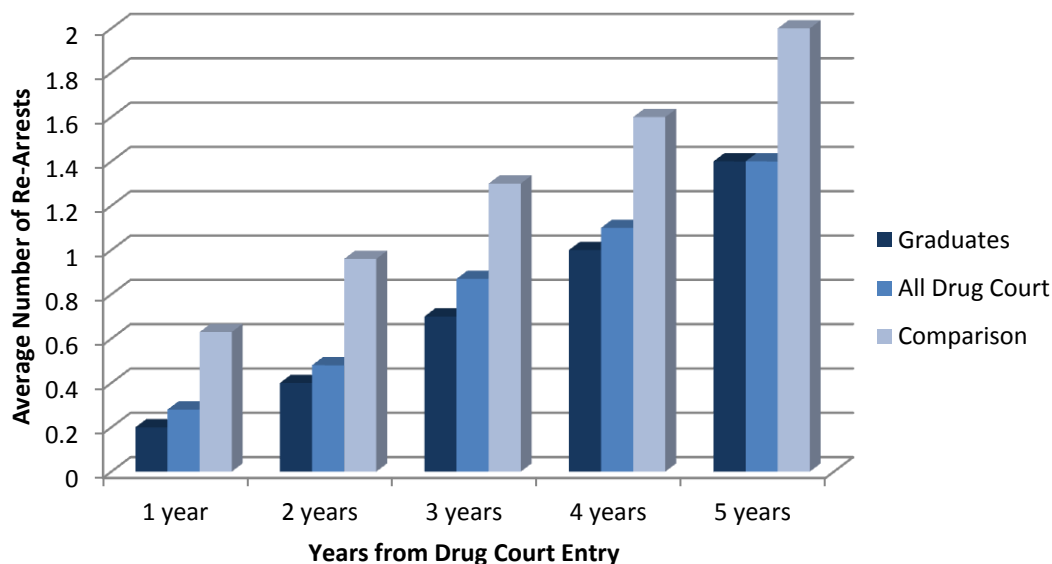
The source of information on primary drug of choice for the program participants was intake assessment data. Assessment information was not available on the comparison group. Data on drugs used was available on approximately half the comparison group based on either positive drug testing results or the specific possession charge, but there is no certainty that these drugs were their drugs of choice. However, based on the available information, comparison group individuals appeared to use (methamphetamine, cocaine and marijuana) the same types of drugs commonly used by drug treatment court participants.

## Research Question #1: Recidivism

*Does participation in drug treatment court reduce the number of re-arrests for those individuals compared to traditional court processing?*

**YES.** Drug treatment court participants were re-arrested significantly less often than the comparison group each year for 5 years from drug treatment court entry ( $p < .001$ ). Figure 1 illustrates the average number of re-arrests each year for 5 years after entering the drug treatment court program for BCADTC graduates, all BCADTC participants, and the comparison group. The reported average number of re-arrests was adjusted for age, ethnicity (Caucasian or non-Caucasian), gender, and prior felony and person arrests.

**Figure 1. Average Number of Cumulative Re-Arrests for Graduates, All Drug Treatment Court Participants, and the Comparison Group Over 5 Years**

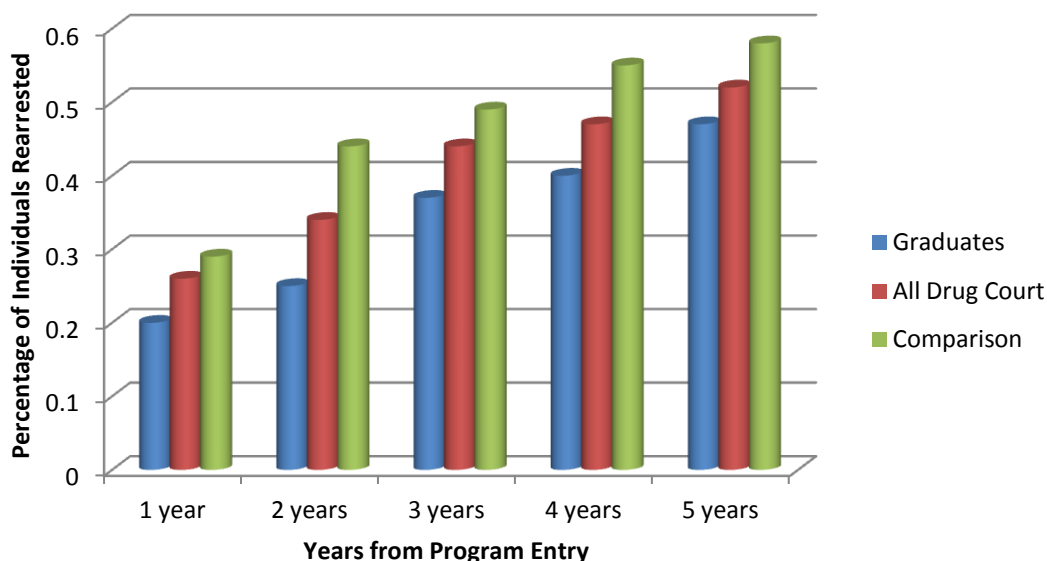


Note: N sizes by group and time period are as follows: 1 year: Graduates  $n = 97$ , All Drug Court Participants  $n = 158$ , Comparison Group  $n = 321$ ; 2 Years: Graduates  $n = 93$ , All Drug Court Participants  $n = 153$ , Comparison Group  $n = 321$ ; 3 Years: Graduates  $n = 81$ , All Drug Court Participants  $n = 134$ , Comparison Group  $n = 308$ ; 4 Years: Graduates  $n = 65$ , All Drug Court Participants  $n = 107$ , Comparison Group  $n = 270$ ; 5 Years: Graduates  $n = 43$ , All Drug Court Participants  $n = 73$ , Comparison Group  $n = 232$ .

<sup>7</sup> ( $p < .001$ )

Recidivism rates, the percent of individuals re-arrested out of the total, were also lower for drug treatment court participants, although the rates were only significantly lower in the 2 years after drug treatment court entry (see Figure 2). This indicates that although fewer drug treatment court participants were rearrested over time, the real impact (as demonstrated in Figure 1) is in the number of times a participant was rearrested, with drug treatment court participants having significantly fewer rearrests.

**Figure 2. Percent of Graduates, All Drug Treatment Court Participants, and Comparison Group Participants who were Re-Arrested Over 5 years**



Note: N sizes by group and time period are as follows: 1 year: Graduates n = 97, All Drug Court Participants n = 158, Comparison Group n = 321; 2 Years: Graduates n = 93, All Drug Court Participants n = 153, Comparison Group n = 321; 3 Years: Graduates n = 81, All Drug Court Participants n = 134, Comparison Group n = 308; 4 Years: Graduates n = 65, All Drug Court Participants n = 107, Comparison Group n = 270; 5 Years: Graduates n = 43, All Drug Court Participants n = 73, Comparison Group n = 232.

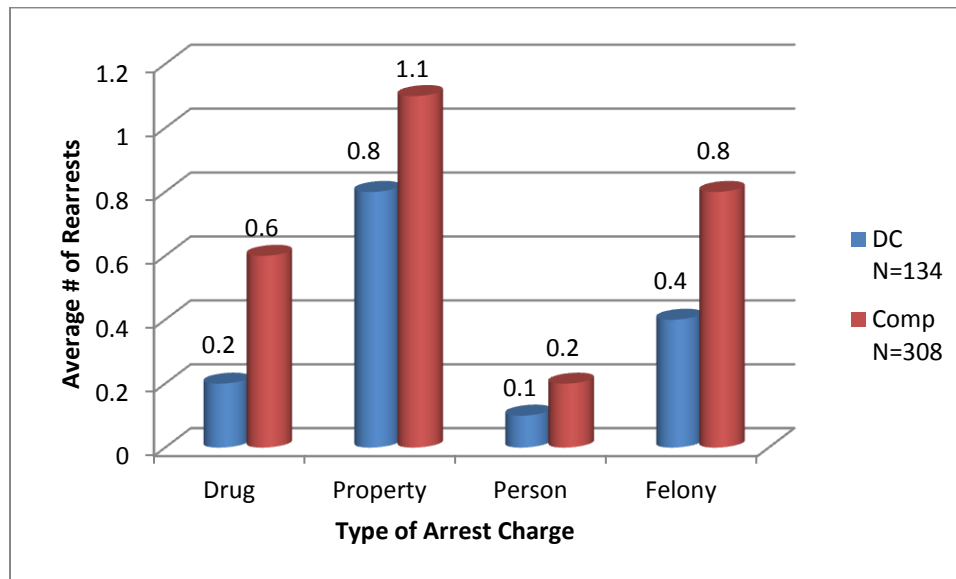
To present a more descriptive picture of the criminality of the groups, arrests were coded as drug charges (e.g., possession), property charges (e.g., theft), person charges (e.g., assault) as well as felony charges.<sup>8</sup> Figure 3 presents the results of this analysis. In this analysis, because the numbers of the specific types of arrests were small, the 3 years following drug treatment court entry was chosen instead of 5 years as there is a larger sample size of drug treatment court participants who have three full years of outcome data available. Figure 3 demonstrates that drug treatment court participants were re-arrested significantly less often for all types of arrests ( $p=.000$ ). Re-arrests for drug treatment court participants for each type of arrest was less than half the number of arrests for the comparison group. These findings demonstrate that involvement in the Benton County Adult Drug Treatment Court program, regardless of exit status, is associated with a reduction in criminality.

There has been some question about whether drug treatment court programs, which redirect offenders from incarceration into treatment in the community, endanger public safety. These find-

<sup>8</sup> When an individual received more than one charge per arrest, a single arrest could be coded as both a person and drug crime. Therefore, the numbers in Figure 3 do not reflect the total average arrests in Figure 1.

ings demonstrate that involvement in the program, regardless of exit status, is associated with a reduction in victimizations (person and property crimes) compared to traditional court processing. This provides evidence consistent with drug court studies nationally, that drug court programs increase public safety above business as usual. The BCADTC is successfully accomplishing one of their key goals, an increase in public safety.

**Figure 3. Average Number of Re-Arrests per Person by Arrest Charge at 3 Years – Drug Treatment Court Versus Comparison**



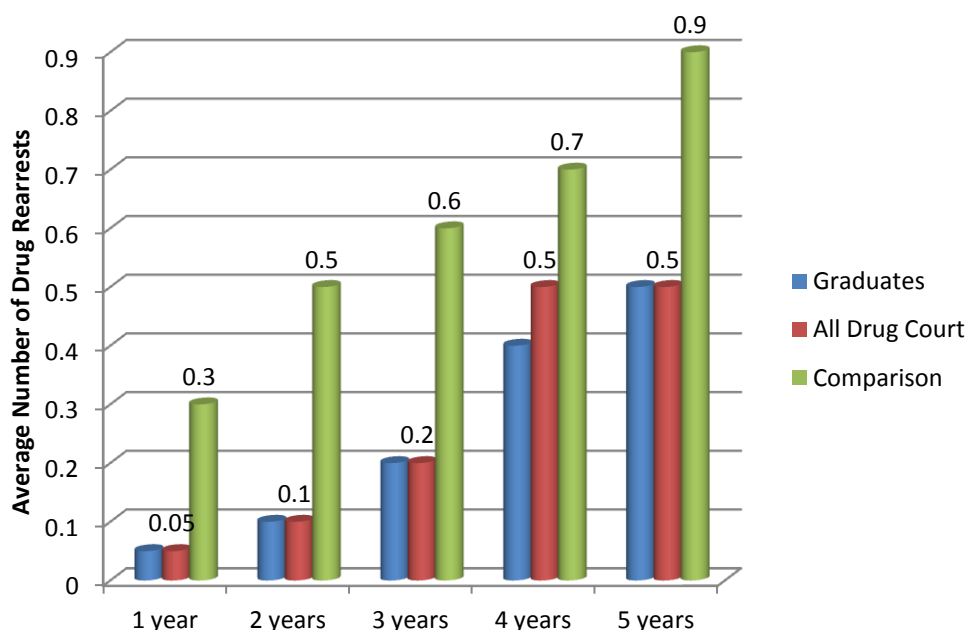
## Research Question #2: Reducing Substance Abuse

*Does participation in drug treatment court reduce levels of substance abuse?*

**YES.** Drug treatment court participants had smaller numbers of rearrests with drug charges up to 5 years after drug treatment court entry.

For objective measures of substance use, we typically use two types of data, drug test results and new arrests with drug charges. However, the available drug testing data was not reliable during the time of our sample so for this study, rearrests with drug charges was the main measure of any reductions in drug use. By comparing the number of re-arrests for drug-related crimes, we can observe differences between drug treatment court participants and comparison group over time and reasonably suppose that the proportional difference in number of rearrests is similar to the proportional difference in drug use.

Figure 4 demonstrates that over a 5-year period, BCADTC participants, regardless of completion status had significantly fewer rearrests with drug charges than the comparison group. The average number of drug arrests per graduate is also provided as a point of interest (though these numbers should not be compared to the comparison group as the graduates and the comparison group are not comparable).

**Figure 4. Mean Number of Drug-Related Re-Arrests Each Year for 5 Years**

Note: N sizes by group and time period are as follows: 1 year: Graduates n = 97, All Drug Court Participants n = 158, Comparison Group n = 321; 2 Years: Graduates n = 93, All Drug Court Participants n = 153, Comparison Group n = 321; 3 Years: Graduates n = 81, All Drug Court Participants n = 134, Comparison Group n = 308; 4 Years: Graduates n = 65, All Drug Court Participants n = 107, Comparison Group n = 270; 5 Years: Graduates n = 43, All Drug Court Participants n = 73, Comparison Group n = 232.

Figure 4 shows that the number of rearrests with drug charges for drug treatment court participants is at least half that of comparison group members at almost every time point. It is interesting to note that all participants, regardless of whether they graduated had similar numbers of drug rearrests as graduates alone. This implies that even those participants who were terminated from the program have obtained benefit from their participation. Overall, these findings show that participation in the BCADTC is associated with a reduction in drug crimes and suggest that there is also be a reduction in substance use.

### Research Question #3: Program Completion

Is this program successful in bringing program participants to completion and graduation within the expected time frame?

Whether a program is bringing its participants to successful completion and doing so in the intended time frame is measured by program graduation (completion) rate, and by the amount of time participants spend in the program. Program *graduation rate* is the percentage of participants who graduated from the program, out of a cohort of participants who started during a similar time frame and who have left the program either by graduating or being unsuccessfully discharged. Since the program's inception in 2002 through July 2007 (the time period of this sample), 63% of drug treatment court program participants completed the BCADTC program successfully (111 graduates out of a total of 176 participant). This is substantially higher than the national average graduation rate of 50% (Cooper, 2000).

Although the BCADTC is doing very well in graduation participants compared to the national average, a program goal is still to continue to strive toward having as many participants succeed as possible. In order to graduate, participants must comply with the program practices and requirements. Therefore, for programs to increase their graduation rates, they must increase the number of participants that comply with program requirements. One strategy drug treatment court staff can use in dealing with this complex population is to provide additional assistance so participants can learn new skills to successfully meet program requirements. Teams should be asking themselves, “how can we help as many participants as possible understand the lessons this program has to teach?” To successfully increase graduation rates, drug treatment court teams must consider the challenges participants face, continually review program operations and adjust as necessary. This can include practices such as finding transportation for participants that have none (e.g., having participants with cars get rewards for picking up those without transportation and bringing them to treatment and court sessions, or providing bus passes) or assisting participants with childcare while they participate in program requirements. The analysis for Research Question #4 will examine more closely the difference between graduates and non-graduates to determine if there are any clear trends for non-graduates that will point to a need for different types of services.

To measure whether the program is following its expected time frame for participant completion, the average amount of time in the program was calculated for participants who had enrolled in the BCADTC program and have graduated from the program. The minimal requirements of the BCADTC would theoretically allow for graduation at approximately 12 months from the time of entry to graduation. The average length of stay in drug treatment court for all participants, both graduates and non-graduates) was 558 days (approximately 18 months). Graduates spent an average of 610 days in the program or about 20 months, ranging from 12 months to 3 years in the program. Approximately 25% graduated within about 12 months, and 50% graduated within 18 months of program entry. Participants who did not graduate spent, on average, slightly more than 15 months in the program. These results show that the BCADTC participants stay in the program longer than the intended time period and that, in order to graduate, participants tend to stay in the program much longer, between 18 months and two years. The BCADTC may want to review their participant experiences (and talk with participants) to determine whether there are particular places or times in the process where participants tend to get stuck or slow down and see if there are ways to help participants past these delays.

## Research Question #4: Predictors of Program Success

### *Are there participant characteristics that predict program success?*

**YES.** Graduates were significantly more likely to be older, have alcohol as their primary drug of choice, spend longer in the program, have more drug tests, fewer days in jail and have fewer person crimes in the two years before drug treatment court entry

Graduates and unsuccessfully discharged participants were compared on demographic characteristics and criminal history to determine whether there were any patterns in predicting program graduation. The following analyses included participants who entered the program from January 2002 through July 2007. Of the 176 people who entered the program during that time period, 65 (37%) were unsuccessfully discharged from the program and 111 (63%) had graduated.

Analyses were performed to determine if there were any demographic or criminal history characteristics of participants that were related to successful drug treatment court completion, including gender, age, ethnicity, drug of choice, length of time in the program, number of drug tests, num-

ber of jail sanctions and number of arrests in the 2 years before drug treatment court entry. Table 3 shows the results for graduates and non-graduates.

**Table 3. Characteristics of BCADTC Graduates Compared to Non-Graduates**

	Graduates (n = 111)	Non-Graduates (n = 65)	Statistically Significant?
Male	49%	57%	No
Mean age at index case arrest	32	28	<b>Yes</b>
Race			No
White	89%	95%	
African American	6%	0%	
Latino	4%	3%	
Other	1%	1%	
Drug of choice			
Methamphetamine	84%	82%	No
Marijuana	64%	65%	No
Alcohol	50%	37%	<b>Yes</b>
Cocaine	12%	12%	No
Heroin	4%	7%	No
Mean number of days in program	610	468	<b>Yes</b>
Average number of drug tests	157	97	<b>Yes</b>
Average number of jail sanction days	3	8	<b>Yes</b>
Average number of all arrests in the 2 years prior to program entry	2.2	2.3	No
Average number of arrests with <b>drug</b> charges in the 2 years prior to program	1.3	1.2	No
Average number of arrests with <b>proper-</b> <b>ty</b> charges in the 2 years prior to program	1.9	2.1	No
Average number of arrests with <b>person</b> charges in the 2 years prior to program	.22	.35	<b>Yes</b>
Average number of arrests with <b>felony</b> charges in the 2 years prior to program	.76	.77	No

Note: Yes = ( $p < .05$ ).

Table 3 illustrates that graduates were significantly more likely to be older, have alcohol as their primary drug of choice, spend longer in the program, have more drug tests, fewer days in jail and have fewer person crimes in the two years before drug treatment court entry. Even when controlling for number of days in the program, graduates had significantly more drug tests and spent less time in jail for sanctions. This implies two things: 1) Participants that are drug tested more often

are more likely to graduate from the program, and 2) Although participants who were terminated were more likely to be non-compliant and therefore end up with jail sanctions, the increased time in jail did not result in better outcomes for those participants. Jail appears to be something that should be used sparingly.

Older participants commonly do better in drug treatment court programs. The BCADTC may want to look at some of their participants, particularly those between 18 and 25 years to see if the program requirements and services being provided to these participants are age appropriate. In particular, AA/NA programs are typically not designed for younger individuals.

Although studies have shown that drug treatment courts that accept participants with prior violent charges have the same recidivism outcomes as drug treatment courts that do not (Carey, Finigan, & Pukstas, 2008; Carey, Waller, & Weller, 2010), the result that non-graduates had a greater number of prior person crimes may indicate a need for additional services for these individuals such as anger management, domestic violence counseling or criminal thinking classes.

## OUTCOME SUMMARY

The outcome analyses were based on a cohort of BCADTC participants who entered the drug treatment court program from January, 2002, through July, 2007, and a matched comparison group of offenders eligible for drug treatment court but who received the traditional court process rather than BCADTC.

The results of the outcome analysis for the Benton County Adult Drug Treatment Court are positive. Compared to offenders who experienced traditional court processes, the BCADTC participants (regardless of whether they graduated from the program):

- Had 3 times fewer drug charges in 3 years after drug treatment court entry,
- Had half as many person charges,
- Had half as many felony charges
- Had 27% fewer property charges,
- Were significantly less likely to be re-arrested for any charge within 3 years, and
- Had significantly fewer rearrests for drug charges every year for 5 years after program entry (indicating reductions in drug use).

The graduation rate for the BCADTC program is 63%, which is significantly higher than the national average of 50%. However, the BCADTC team should still spend some time working toward ways to assist participants in addressing challenges to following program requirements so that an even greater number can stay in the program longer and successfully complete the program.

Overall, the drug treatment court program has been successful in its main goals of reducing drug use and recidivism among its participants and increasing public safety.

## COST EVALUATION

**I**n cost evaluation there is an important distinction between the meaning of the term “cost-effective” and the term “cost-benefit.” A *cost-effectiveness* analysis calculates the cost of a program and then examines whether the program led to its intended positive outcomes. For example, a cost-effectiveness analysis of drug treatment courts would determine the cost of the drug treatment court program and then look at whether the number of re-arrests were reduced by the amount the program intended (e.g., a 50% reduction in re-arrests compared to those who did not participate in the program).

A *cost-benefit* evaluation calculates the cost of the program and also the cost of the outcomes, resulting in a cost-benefit ratio. For example, the cost of the program is compared to the cost-savings due to the reduction in re-arrests. In some drug court programs, for every dollar spent on the program, over \$10 is saved due to positive outcomes.<sup>9</sup> This evaluation was a *cost-benefit* analysis.

The BCADTC cost evaluation was designed to address the following study questions:

How much does the BCADTC program cost?

What is the cost impact on the criminal justice system of sending offenders through drug treatment court compared to traditional court processing?

This section of the report describes the research design and methodology used for the cost analysis of the BCADTC program. The next section presents the cost results in order of the questions listed above.

### Cost Evaluation Methodology

#### COST EVALUATION DESIGN

##### *Transaction and Institutional Cost Analysis*

The cost approach utilized by NPC Research is called Transactional and Institutional Cost Analysis (TICA). The TICA approach views an individual’s interaction with publicly funded agencies as a set of *transactions* in which the individual utilizes resources contributed from multiple agencies. Transactions are those points within a system where resources are consumed and/or change hands. In the case of drug treatment courts, when a drug treatment court participant appears in court or has a drug test, resources such as judge time, defense attorney time, court facilities, and urine cups are used. Court appearances and drug tests are transactions. In addition, the TICA approach recognizes that these transactions take place within multiple organizations and institutions that work together to create the program of interest. These organizations and institutions contribute to the cost of each transaction that occurs for program participants. TICA is an intuitively appropriate approach to conducting costs assessment in an environment such as a drug treatment court, which involves complex interactions among multiple taxpayer-funded organizations.

##### *Cost to the Taxpayer*

In order to maximize the study’s benefit to policymakers, a “cost-to-taxpayer” approach was used for this evaluation. This focus helps define which cost data should be collected (costs and avoided costs involving public funds) and which cost data should be omitted from the analyses (e.g., costs to the individual participating in the program).

<sup>9</sup> See drug court cost-benefit studies at [www.npcresearch.com](http://www.npcresearch.com)

The central core of the cost-to-taxpayer approach in calculating benefits (avoided costs) for drug treatment court specifically is the fact that untreated substance abuse will cost various tax-dollar funded systems money that could be avoided or diminished if substance abuse were treated. In this approach, any cost that is the result of untreated substance abuse and that directly impacts a citizen (through tax-related expenditures or through crimes perpetrated by a substance abuser) is used in calculating the benefits of substance abuse treatment.

### *Opportunity Resources*

Finally, NPC's cost approach looks at publicly funded costs as "opportunity resources." The concept of opportunity *cost* from the economic literature suggests that system resources are available to be used in other contexts if they are not spent on a particular transaction. The term opportunity *resource* describes these resources that are now available for different use. For example, if substance abuse treatment reduces the number of times that a client is subsequently incarcerated, the local sheriff may see no change in his or her budget, but an opportunity resource will be available to the sheriff in the form of a jail bed that can now be filled by another person, who, perhaps, possesses a more serious criminal justice record than does the individual who has received treatment and successfully avoided subsequent incarceration.

## **COST EVALUATION METHODS**

The cost evaluation involves calculating the costs of the drug treatment court program, and the costs of outcomes (or impacts) after program entry (or the equivalent for the comparison group). In order to determine if there are any benefits (or avoided costs) due to drug treatment court program participation, it is necessary to determine what the participants' outcome costs would have been had they not participated in drug treatment court. One of the best ways to do this is to compare the costs of outcomes for drug treatment court participants to the outcome costs for similar individuals that were eligible for drug treatment court but who did not participate. The comparison group in this cost evaluation is the same as that used in the preceding outcome evaluation.

### *TICA Methodology*

The TICA methodology is based upon six distinct steps. Table 4 lists each of these steps and the tasks involved. Step 1 (determining drug treatment court process) was performed during site visits, through analysis of court and drug treatment court documents, and through interviews with key informants. Step 2 (identifying program transactions) and Step 3 (identifying the agencies involved with transactions) were performed through observation during site visits and by analyzing the information gathered in Step 1. Step 4 (determining the resources used) was performed through extensive interviewing of key informants, direct observation during site visits, and by collecting administrative data from the agencies involved in drug treatment court. Step 5 (determining the cost of the resources) was performed through interviews with drug treatment court and non-drug treatment court staff and with agency finance officers, as well as analysis of budgets found online or provided by agencies. Step 6 (calculating cost results) involved calculating the cost of each transaction and multiplying this cost by the number of transactions. All the transactional costs for each individual were added to determine the overall cost per drug treatment court participant/comparison group individual. This was generally reported as an average cost per person for the drug treatment court program, and outcome/impact costs due to re-arrests, jail time and other recidivism costs. In addition, due to the nature of the TICA approach, it was also possible to calculate the cost for drug treatment court processing for each agency as well as outcome costs per agency.

The costs to the criminal justice system outside of the drug treatment court program consist of those due to re-arrests, subsequent court cases, probation time, parole time, jail time, local control time,

prison time, and victimizations. Program costs consist of all drug treatment court sessions, case management, individual drug treatment, group drug treatment, residential drug treatment, assessments, drug tests, alcohol tests, and jail sanctions.

**Table 4. The Six Steps of TICA**

	Description	Tasks
Step 1:	Determine flow/process (i.e., how program participants move through the system)	Site visits/direct observations of program practice Interviews with key informants (agency and program staff) using a drug court typology and cost guide (See guide on <a href="http://www.npcresearch.com">www.npcresearch.com</a> )
Step 2:	Identify the transactions that occur within this flow (i.e., where clients interact with the system)	Analysis of process information gained in Step 1
Step 3:	Identify the agencies involved in each transaction (e.g., court, treatment, police)	Analysis of process information gained in Step 1 Direct observation of program transactions
Step 4:	Determine the resources used by each agency for each transaction (e.g., amount of judge time per transaction, amount of attorney time per transaction, number of transactions)	Interviews with key program informants using program typology and cost guide Direct observation of program transactions Administrative data collection of number of transactions (e.g., number of court appearances, number of treatment sessions, number of drug tests)
Step 5:	Determine the cost of the resources used by each agency for each transaction	Interviews with budget and finance officers Document review of agency budgets and other financial paperwork
Step 6:	Calculate cost results (e.g., cost per transaction, total cost of the program per participant)	Indirect support and overhead costs (as a percentage of direct costs) are added to the direct costs of each transaction to determine the cost per transaction The transaction cost is multiplied by the average number of transactions to determine the total average cost per transaction type These total average costs per transaction type are added to determine the program and outcome costs.

## Cost Evaluation Results

### RESEARCH QUESTION #1: PROGRAM COSTS

How much does the BCADTC program cost?

As described in the cost methodology, the Transactional and Institutional Cost Analysis (TICA) approach was used to calculate the costs of each of the transactions that occurred while participants were engaged in the program. Transactions are those points within a system where resources are consumed and/or change hands. Program transactions for which costs were calculated in this analysis included drug treatment court sessions, case management, individual drug treatment, group drug treatment, residential drug treatment, assessments, drug tests, alcohol tests, and jail sanctions. The costs for this study were calculated to include taxpayer costs only. All cost results provided in this report are based on fiscal year 2010 dollars.

#### *Program Transactions*

A Drug Treatment Court session, for the majority of drug treatment courts, is one of the most staff and resource intensive program transactions. These sessions include representatives from the following agencies:

- Circuit Court (Judge, Judicial Assistant, Treatment Court Specialist, and Drug treatment court Coordinator);
- District Attorney (Deputy District Attorney);
- Defense Attorney (contracted private defense attorney);
- Law Enforcement (Probation and Parole Sergeant, Police Lieutenant);
- County Health Department's New Beginnings Treatment Center (Program Manager, Case Manager, Counselors).

The cost of a ***Drug Treatment Court Appearance*** (the time during a session when a single program participant interacts with the judge) is calculated based on the average amount of court time (in minutes) each participant interacts with the judge during the drug treatment court session. This includes the direct costs of each drug treatment court team member present, the time team members spend preparing for the session, the agency support costs, and jurisdictional overhead costs. The cost for a single drug treatment court appearance is **\$69.64** per participant.

***Case Management*** is based on the amount of staff time dedicated to case management activities during a regular work week and is then translated into a total cost for case management per participant per day (taking staff salaries and benefits, and support and overhead costs into account).<sup>10</sup> The agencies involved in case management are the Sheriff's Office, Circuit Court, and New Beginnings Treatment Center. The daily cost of case management is **\$6.48** per participant.

***Drug Treatment*** is provided by the County Health Department's New Beginnings Treatment Center. The following rates are only the cost to taxpayers. Individual treatment per participant is **\$52.17** per session. Group treatment per participant is **\$23.24** per person per session. Residential treatment is \$25.00 per day (up to \$1,000 total). Assessments are **\$274.14**. All rates were provided to NPC by the drug treatment court coordinator and representatives of the County Health Department.

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<sup>10</sup> Case management includes meeting with participants, evaluations, phone calls, referring out for other help, answering questions, reviewing referrals, consulting, making community service connections, assessments, documentation, file maintenance, and residential referrals.

**Drug Testing** is performed by New Beginnings Treatment Center. The following rates are only the cost to taxpayers. The cost per UA test is **\$4.70**. The cost per ETG alcohol test is **\$10.75**. Drug and alcohol testing costs were obtained from the drug treatment court coordinator.

**Jail Sanctions** are provided by the Sheriff's Office. The cost of jail was acquired from a representative of the Sheriff's Office. The cost of jail is **\$150.00** per day.

#### Program Costs

Table 5 displays the unit cost per program related event, the number of events and the average cost *per individual* for each of the drug treatment court events for program graduates and for all participants. The sum of these transactions is the total per participant cost of the drug treatment court program. The table includes the average for drug treatment court graduates (N= 110) and for all drug treatment court participants (N = 175), regardless of completion status. It is important to include participants who were discharged as well as those who graduated as all participants use program resources, whether they graduate or not.

**Table 5. Program Costs per Participant**

Transaction	Unit Cost	Avg. # of Events for DC Graduates Per Person	Avg. Cost per DC Graduate Per Person	Avg. # of Events for all DC Participants Per Person	Avg. Cost per DC Participant Per Person
Drug Court Session	\$69.64	42.5	\$2,960	40.1	\$2,793
Case Management	\$6.48	612.1	\$3,966	558.7	\$3,620
Individual Treatment	\$52.17	31.0	\$1,617	27.2	\$1,419
Group Treatment	\$23.24	280.6	\$6,521	244.2	\$5,675
Assessment	\$274.14	1.0	\$274	1.0	\$274
Residential Treatment	\$25.00	22.2	\$555	23.8	\$595
UA Drug Testing	\$4.70	156.9	\$737	135.2	\$635
Alcohol Testing	\$10.75	14.3	\$154	14.3	\$154
Jail Sanctions	\$150.00	3.4	\$510	5.0	\$750
<b>Total</b>			<b>\$17,294</b>		<b>\$15,915</b>

The unit cost multiplied by the number of events per person results in the cost for each transaction during the course of the program. When the costs of the transactions are summed the result is a total program cost per participant of \$15,915. The cost per graduate is \$17,294. The two main contributors to the cost of the program are treatment and case management.

#### *Program Costs per Agency*

Another useful way to examine program costs is by agency. Table 6 displays the cost per drug treatment court participant by agency for program graduates and for all participants.

**Table 6. Program Costs per Participant by Agency**

Agency	Avg. Cost per DC Graduate Per Person	Avg. Cost per DC Participant Per Person
Circuit Court	\$1,085	\$1,017
District Attorney	\$267	\$252
Public Defender	\$387	\$365
Sheriff's Office	\$1,600	\$1,751
Police Department	\$100	\$95
Treatment	\$13,855	\$12,435
<b>Total</b>	<b>\$17,294</b>	<b>\$15,915</b>

Table 6 shows that the treatment agency (providing treatment, drug testing, and case management) is 78% of the total program costs. The next largest cost (just 11%) is for the Sheriff's Office due to jail sanctions and case management and then the Circuit Court (6%) for drug treatment court appearances.

#### *Program Costs Summary*

In sum, the largest portion of the BCADTC costs are due to drug and alcohol treatment (an average of \$7,963, or 50% of total costs). Case management (\$3,620 or 23% of total costs) and drug/alcohol testing (an average of \$789 or 5%) are also significant program costs. When program costs are evaluated by agency, the largest portion of costs accrues to the treatment agency (\$12,435 or 78% of total costs) for treatment, drug testing, and case management.

## RESEARCH QUESTION #2: OUTCOME/RECIDIVISM COSTS

What is the cost impact on the criminal justice system of sending offenders through drug court compared to traditional court processing?

### *Outcome Costs*

The Transactional and Institutional Cost Analysis (TICA) approach was used to calculate the costs of each of the criminal justice system outcome transactions that occurred for drug treatment court and comparison group participants. Transactions are those points within a system where resources are consumed and/or change hands. Outcome transactions for which costs were calculated in this analysis included re-arrests, subsequent court cases, probation time, parole time, jail time, local control time, prison time, and victimizations. Only costs to the taxpayer were calculated in this study. All cost results represented in this report are based on fiscal year 2010 dollars or updated to fiscal year 2010 dollars using the Consumer Price Index.

The outcome cost analyses were based on a cohort of adult drug treatment court participants and a matched comparison group of offenders who were eligible for the adult drug treatment court program through their criminal history but who did not attend the program. These individuals were tracked through administrative data for at least 3 years post program entry (and a similar time period for the comparison group). This study compares recidivism costs for the two groups over 3 years and the recidivism costs for participants by agency.

The 3 year follow-up period was selected to allow a large enough group of both drug treatment court and comparison individuals to be representative of the program, as well as to allow more robust cost numbers through use of as long a follow-up period as possible (with as many individuals as possible having at least some time during the follow-up period that represented time after program involvement). All drug treatment court participants included in the analysis had exited the program (graduated or were unsuccessful at completing the program).

The outcome costs experienced by drug treatment court graduates are also presented below. Costs for graduates are included for informational purposes but should not be directly compared to the comparison group. If the comparison group members had entered the program, some may have graduated while others would have terminated. The drug treatment court graduates as a group are not the same as a group made up of both potential graduates and potential non-graduates.

The outcome costs discussed below do not represent the entire cost to the criminal justice system. Rather, the outcome costs include the transactions for which NPC's research team was able to obtain outcome data and cost information on both the drug treatment court and comparison group from the same sources. However, we believe that the costs represent the majority of system costs. Outcome costs were calculated using information from the Oregon Department of Corrections, Benton County Circuit Court, Benton County District Attorney, Benton County Sheriff's Office, Corvallis Police Department, and the contracted defense attorney. The methods of calculation were carefully considered to ensure that all direct costs, support costs and overhead costs were included as specified in the TICA methodology followed by NPC.

Finally, note that some possible costs or cost savings related to the program are not considered in this study. These include the number of drug-free babies born, health care expenses, and drug treatment court participants legally employed and paying taxes. The gathering of this kind of information is generally quite difficult due to HIPAA confidentiality laws and due to the fact that much of the data related to this information are not collected in any one place, or collected at all. Although NPC examined the possibility of obtaining this kind of data, it was not feasible within the time frame or budget for this study. In addition, the cost results that follow do not take into account other less tang-

ible outcomes for participants, such as improved relationships with their families and increased feelings of self-worth. Although these are important outcomes to the individual participants and their families, it is not possible to assign a cost to this kind of outcome. (It is priceless). Other studies performed by NPC have taken into account health care and employment costs. For example, Finigan (1998) performed a cost study in the Portland, Oregon, adult drug treatment court which found that for every dollar spent on the drug treatment court program, \$10 was saved due to decreased criminal justice recidivism, lower health care costs and increased employment.

#### *Outcome Transactions*

The cost of an **Arrest** was gathered from representatives of the Corvallis Police Department and the Benton County Sheriff's Office (the two main arresting agencies in Benton County). The cost per arrest incorporates the time of the law enforcement positions involved in making an arrest, law enforcement salaries and benefits, support costs and overhead costs. The average cost of a single arrest at the two law enforcement agencies is **\$224.96**.

**Court Cases** include all court cases, including those cases that are dismissed as well as those cases that result in arraignment and are adjudicated. Court case costs are shared among the Circuit Court, the District Attorney, and the contracted defense attorney. Using budget and caseload information obtained from the Oregon Office of Public Defense Services and information found online and from agency representatives, the cost of a Circuit Court case was found to be **\$3,255.32**.

**Probation** is provided by Community Corrections (a division of the Benton County Sheriff's Office). The cost of probation was acquired from a representative of Community Corrections, using statewide budget and caseload information. The cost per person per day of probation is **\$8.11**.

**Parole** is also provided by Community Corrections (a division of the Benton County Sheriff's Office). The cost of parole was acquired from a representative of Community Corrections, using statewide budget and caseload information. The cost per person per day of parole is **\$12.34**.

**Jail** is provided by the Benton County Sheriff's Office. Jail costs were acquired from a representative of the Sheriff's Office and from budgetary information found online. The cost of jail is **\$150.00** per day.

**Local Control** is when an offender with a prison sentence of 1 year or less serves his or her time in county jail instead of state prison. Local control costs used in this analysis were the same as the jail costs provided above, but costs were assigned to the Oregon Department of Corrections as it reimburses the county jail for the offender's time in local control. The cost of local control is **\$150.00** per day.

**Prison** is provided by the Oregon Department of Corrections. The statewide cost per person per day of prison is **\$84.46**, which was found on the Department's website.

**Victimizations** were calculated from the National Institute of Justice's *Victim Costs and Consequences: A New Look* (1996).<sup>11</sup> The costs were updated to fiscal year 2010 dollars. **Property crimes**

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<sup>11</sup> The costs for victimizations were based on the National Institute of Justice's *Victim Costs and Consequences: A New Look* (1996). This study documents estimates of costs and consequences of personal crimes and documents losses per criminal victimization, including attempts, in a number of categories, including fatal crimes, child abuse, rape and sexual assault, other assaults, robbery, drunk driving, arson, larceny, burglary, and motor vehicle theft. The reported costs include lost productivity, medical care, mental health care, police and fire services, victim services, property loss and damage, and quality of life. In our study, arrest charges were categorized as violent or property crimes, and therefore costs from the victimization study were averaged for rape and sexual assault, other assaults, and robbery and attempted robbery to create an estimated cost for violent crimes, arson, larceny and attempted larceny, burglary and attempted

are **\$12,349** per event and *person crimes* are **\$40,004** per event. Victimization data was calculated only for the statewide average costs.

#### *Outcome Cost Results*

Table 7 shows the average number of recidivism-related events per offender for drug treatment court graduates, all drug treatment court participants (regardless of graduation status) and the comparison group over 3 years.

**Table 7. Average Number of Recidivism Events After Drug Court Entry per Person Over 3 Years from Drug Court Entry**

Recidivism Related Events	Drug Court Graduates Per Person (n=81)	Drug Court Participants Per Person (n=134)	Comparison Group Per Person (n=308)
Re-Arrests	0.69	0.87	1.30
Court Cases	0.69	0.87	1.30
Probation Days	144.80	149.19	277.07
Parole Days	0.00	9.55	25.46
Jail Days	18.44	23.25	34.74
Local Control Days	0.01	3.87	4.33
Prison Days	10.60	17.97	57.82
Property Victimizations	0.59	0.77	1.13
Person Victimizations	0.07	0.13	0.18

Overall, as demonstrated in Table 7, drug treatment court participants use fewer criminal justice system resources than the comparison group with fewer re-arrests, new court cases, days on probation, days on parole, days in jail, days in local control, and days in prison. Drug treatment court participants also have fewer property and person victimizations than the comparison group. Table 8 provides the average cost per graduate, per drug treatment court participant and per comparison group member for each type of recidivism event.

Table 8 presents the outcome costs for each transaction for graduates, all drug treatment court participants (graduates and terminated participants) and the comparison group.

**Table 8. Recidivism (Outcome) Costs per Participant over 3 years**

Transaction	Unit Costs	Drug Court Graduates Per Person (n=81)	Drug Court Participants Per Person (n=134)	Comparison Group Per Person (n=308)
Arrests	\$224.96	\$155	\$196	\$292
Court Cases	\$3,255.32	\$2,246	\$2,832	\$4,232
Probation	\$8.11	\$1,174	\$1,210	\$2,247
Parole	\$12.34	\$0	\$118	\$314
Jail	\$150.00	\$2,766	\$3,488	\$5,211
Local Control	\$150.00	\$2	\$581	\$650
Prison	\$84.46	\$895	\$1,518	\$4,883
Subtotal		<b>\$7,238</b>	<b>\$9,943</b>	<b>\$17,829</b>
Property Victimizations	\$12,349.00	\$7,286	\$9,509	\$13,954
Person Victimizations	\$40,004.00	\$2,800	\$5,201	\$7,201
Total		<b>\$17,324</b>	<b>\$24,653</b>	<b>\$38,984</b>

Because victimizations were not calculated using the TICA methodology, the cost results are presented first without then with victimization costs. Not including victimizations, Table 8 shows that the majority of adult drug treatment court outcome costs are due to jail (an average of \$3,488, or 35% of total costs) and court cases (an average of \$2,832, or 28% of total costs). The majority of outcome costs for the comparison group were due to jail (an average of \$5,211, or 29% of total costs) and prison (an average of \$4,883 or 27% of total costs). The largest outcome cost savings for the drug treatment court group (when compared to the comparison group) was for prison, with an average savings per participant of \$3,365 (or 43% of total outcome cost savings). The difference in cost between the drug treatment court participants and the comparison group is \$7,886 per participant. When costs due to victimizations are included, the difference increases to \$14,331 per participant. This difference is the benefit, or savings, due to drug treatment court participation.

#### *Outcome Costs per Agency*

These same outcome costs were also examined by agency. The transactions shown above are provided by one or more agencies. If one specific agency provides a service or transaction (for example, Corrections provides prison days), all costs for that transaction accrue to that specific agency. If several agencies all participate in providing a service or transaction (for example, the Circuit Court, District Attorney, and Public Defender are all involved in court cases), costs are split proportionately amongst the agencies involved. Table 9 provides the cost for each agency and the difference in

cost between the drug treatment court participants and the comparison group per person. A positive number in the difference column indicates a cost savings for drug treatment court participants.

**Table 9. Recidivism (Outcome) Costs per Participant by Agency over 3 years**

Agency	Drug Court Outcome Costs per Participant	Comparison Group Outcome Costs per Individual	Difference/ Savings per Individual
Circuit Court	\$1,341	\$2,004	\$663
District Attorney	\$1,137	\$1,699	\$562
Public Defender	\$354	\$529	\$175
Community Corrections	\$1,328	\$2,561	\$1,233
Law Enforcement	\$3,684	\$5,503	\$1,819
Corrections	\$2,099	\$5,533	\$3,434
Subtotal	<b>\$9,943</b>	<b>\$17,829</b>	<b>\$7,886</b>
Victimizations	\$14,710	\$21,155	\$6,445
<b>Total</b>	<b>\$24,653</b>	<b>\$38,984</b>	<b>\$14,331</b>

Table 9 shows that every agency has a benefit, or savings, as a result of drug treatment court. As demonstrated in Tables 8 and 9, the total cost of recidivism for the Benton County Adult Drug Treatment Court per drug treatment court participant (regardless of graduation status) was \$9,943, while the cost per comparison group member was \$17,829. The difference between the drug treatment court and comparison group represents a benefit of **\$7,886** per participant. When victimization costs are added, the difference in costs jumps substantially with drug treatment court participants costing a total of **\$14,331 less** per participant than non-drug treatment court offenders due to fewer victim crimes for participants.

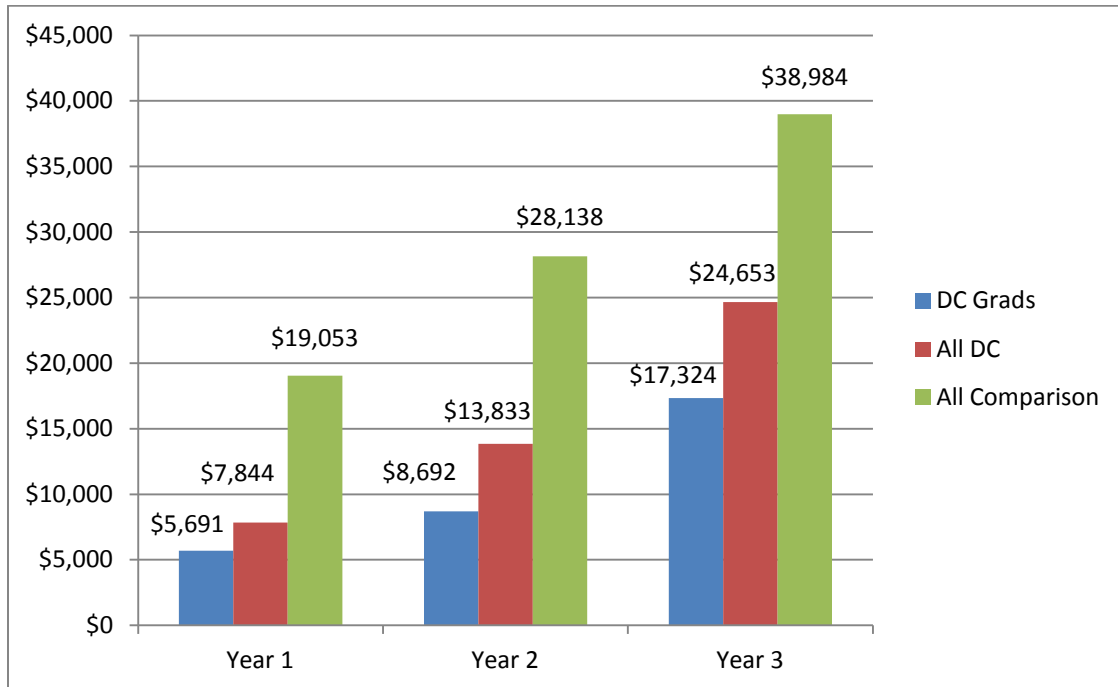
#### *Cost-Benefit Analysis*

Overall, the Benton County Adult Drug Treatment Court results in significant cost savings and a return on taxpayer investment in the program. The program investment cost is \$15,915 per drug treatment court participant. The benefit due to significantly reduced recidivism for drug treatment court participants over the three years included in this analysis came to \$14,331. If these cost savings are projected just two more years (to 5 years) the savings come to **\$23,885** per participant resulting in a cost-benefit ratio of **1:1.50**. That is, for taxpayer every dollar invested in the program, there is \$1.50 return. This ratio increases over time as the investment is repaid and the savings continue to accumulate. At 10 years the cost-benefit ratio comes to **1:3.00**. These are criminal justice system savings only. If other system costs, such as health care and child welfare were included, studies have shown that an even higher return on investment can be expected, up to \$10 saved per \$1 invested in the program (Finigan, 1998).

### Cost Conclusion

Figure 5 provides a graph of the costs for graduates, all participants and the comparison group over 3 years.

**Figure 5. Criminal Justice Recidivism Cost Consequences per Person: Drug Court Participants and Comparison Group Members Over 3 Years**



The cost savings illustrated in Figure 5 are those that have accrued in just the 3 years since program entry. Many of these savings are due to positive outcomes while the participant is still in the program. Therefore, it is reasonable to state that **savings to the state and local criminal justice systems are generated from the time of participant entry into the program.**

These savings will also continue to grow with the number of new participants that enter the program each year. If the BCADTC program continues to serve a cohort of **41** new participants annually, the conservative savings of \$7,886 per participant (not including victimizations) over 3 years results in an annual savings of **\$323,326** per cohort, which can then be multiplied by the number of years the program remains in operation and for additional cohorts per year. After 5 years, the accumulated savings come to over **\$4.8 million**. When victimizations are included, the savings of \$14,331 per participant over 3 years results in an annual savings of \$587,571 per cohort. After 5 years, the accumulated savings, including victimization savings, come to over **\$8.8 million**.

If drug treatment court participants continue to have positive outcomes in subsequent years (as has been shown in other drug treatment courts NPC has evaluated, e.g., Carey et al., 2005; Finigan, Carey, & Cox, 2007) then these cost savings can be expected to continue to accrue over time, repaying the program investment costs and providing further savings in opportunity resources to public agencies. These findings indicate that drug treatment court is both beneficial to participants and beneficial to Benton County and Oregon taxpayers.

## SUMMARY AND CONCLUSIONS

**D**rug courts are complex programs designed to deal with some of the most challenging problems that communities face. Drug treatment courts bring together multiple and traditionally adversarial roles plus stakeholders from different systems with different training, professional language, and approaches. They take on groups of clients that frequently have serious substance abuse treatment needs. Adults with substance abuse issues involved in the criminal justice system must be seen within an ecological context; that is, within the environment that has contributed to their attitudes and behaviors. This environment includes their neighborhoods, families, friends, and formal or informal economies through which they support themselves. The drug treatment court must understand the various social, economic and cultural factors that affect them.

The BCADTC has been responsive to the community needs and strives to meet the challenges presented by substance dependant individuals. This program is demonstrating exemplary practices within each of the 10 Key Components, and had positive recidivism outcomes as well as producing substantial savings to the taxpayer.

**Outcome Summary.** The outcome analyses were based on a cohort of BCADTC participants who entered the drug treatment court program from January, 2002, through July, 2007, and a comparison group of offenders eligible for drug treatment court but who received the traditional court process rather than BCADTC.

The results of the outcome analysis for the Benton County Adult Drug Treatment Court are positive. Compared to offenders who experienced traditional court processes, the BCADTC participants (regardless of whether they graduated from the program):

- Had 3 times fewer drug charges in 3 years after drug treatment court entry,
- Had half as many person charges,
- Had half as many felony charges
- Had 27% fewer property charges,
- Were significantly less likely to be re-arrested for any charge within 3 years, and
- Had significantly fewer rearrests for drug charges every year for 5 years after program entry (indicating reductions in drug use).

Further analyses showed that the drug treatment court is keeping participants in the program longer than the intended 12-month length of the program and that graduates were significantly more likely to spend longer (about 20 months) in the program.

The graduation rate for the BCADTC program is 63%, which is significantly higher than the national average of 50%. However, the BCADTC team should still spend some time working toward ways to assist participants in addressing challenges to following program requirements so that an even greater number can stay in the program longer and successfully complete the program.

Taken as a whole, the results of the outcome study show that the drug treatment court program has been successful in its main goals of reducing drug use and recidivism among its participants and increasing public safety.

**Cost-Benefit Summary.** Although the Benton County Adult Drug Treatment Court is a substantial taxpayer investment, over time it results in significant cost savings and a return on its investment. The program investment cost is \$15,915 per drug treatment court participant. The benefit due to sig-

nificantly reduced recidivism for drug treatment court participants over the three years included in this analysis came to \$14,331. If these cost savings are projected just two more years (to 5 years) the savings come to **\$23,885** per participant resulting in a cost-benefit ratio of **1:1.50**. That is, for taxpayer every dollar invested in the program, there is \$1.50 return. This ratio increases over time as the investment is repaid and the savings continue to accumulate. At 10 years the cost-benefit ratio comes to \$3.00 saved for every \$1 invested in the program.

Overall, the BCADTC program had:

- A criminal justice system cost savings of **\$14,331** per participant over 3 years,
- Criminal justice system costs that were 59% less during program participation (during the first year after program entry) compared to non-drug treatment court participants during the same time period,
- A 150% return on its investment after 5 years (a 1:1.5 cost benefit ratio), and
- A 300% return on its investment after 10 years (a 1:3 cost benefit ratio).

These savings will also continue to grow with the number of new participants that enter the program each year. If the BCADTC program continues to serve a cohort of just **41** new participants annually, the accumulated savings after 5 years come to over **\$8.8 million**.

As the existence of the BCADTC continues, the savings generated by drug treatment court participants due to reduced substance use and decreased criminal activity can be expected to continue to accrue, repaying investment in the program and beyond. Taken together these findings indicate that the BCADTC is both beneficial to participants and beneficial to Oregon taxpayers.

Taken as a whole, these results demonstrate that the BCADTC program is effective in reducing recidivism and reducing drug use while using fewer criminal justice system resources during program participation.

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## **APPENDIX A: GUIDE FOR USE OF NPC ASSESSMENT AND TECHNICAL ASSISTANCE REPORTS**



### **Brief Guide for Use of NPC Assessment and Technical Assistance Reports**

The 10 Key Component assessment results can be used for many purposes, including 1) improvement of program structure and practices for better participant outcomes (the primary purpose), 2) grant applications to demonstrate program needs or illustrate the program's capabilities, and 3) requesting resources from boards of county commissioners or other local groups.

#### When you receive the results:

- ☐ **Distribute copies of the report** to all members of your team, advisory group, and other key individuals involved with your program.
- ☐ **Set up a meeting** with your team and steering committee to discuss the report's findings and recommendations. Ask all members of the group to **read the report** prior to the meeting and **bring ideas and questions**. Identify who will **facilitate** the meeting (bring in a person from outside the core group if all group members would like to be actively involved in the discussion).
- ☐ **Contact NPC Research** if you would like research staff to be available by phone to answer questions.
- ☐ During the meeting(s), **review each recommendation**, discuss any questions that arise from the group, and **summarize the discussion, any decisions, and next steps**. You can use the format below or develop your own:

#### **Format for reviewing recommendations:**

Recommendation: Copy the recommendations from the electronic version of report and provide to the group.

Responsible individual, group, or agency: Identify who is the focus of the recommendation, and who has the authority to make related changes.

Response to recommendation: Describe the status of action related to the recommendation (some changes or decisions may already have been made). Indicate the following:

- ☐ 1. This recommendation will be accepted. (see next steps below)
- ☐ 2. Part of this recommendation can be accepted (see next steps below and indicate here which parts are not feasible or desirable, and why)
- ☐ 3. This recommendation cannot be accepted. Describe barriers to making related changes (at a future time point, these barriers may no longer exist) or reason why the recommendation is not desirable or would have other negative impacts on the program overall.

Next steps: Identify which tasks have been assigned, to whom, and by what date they will be accomplished or progress reviewed. Assign tasks only to a **person who is present**. If the appropriate person is not present or not yet identified (because the task falls to an agency or to the community, for example), identify who from the group will take on the task of identifying and contacting the appropriate person.

- Person: (Name)
- Task: (make sure tasks are specific, measurable, and attainable)
- Deadline or review date: (e.g., June 10<sup>th</sup>) The dates for some tasks should be soon (next month, next 6-months, etc.); others (for longer-term goals for example) may be further in the future.
- Who will review: (e.g., advisory board will review progress at their next meeting)

- **Contact NPC Research** after your meeting(s) to discuss any questions that the team has raised and not answered internally, or if you have requests for other resources or information.
- **Contract NPC Research** if you would like to hold a conference call with or presentation to any key groups related to the study findings.
- **Request technical assistance or training as needed** from NADCP/NDCI or other appropriate groups.
- **Add task deadlines to the agendas of future steering committee meetings**, to ensure they will be reviewed, or select a date for a follow-up review (in 3 or 6 months, for example), to discuss progress and challenges, and to establish new next steps, task lists, and review dates.

## **APPENDIX B: LIST OF POSSIBLE PROGRAM REWARDS AND SANCTIONS**



## Examples of Rewards and Sanctions Used By Other Drug Courts

### Drug Court Responses to Participant Behavior (Rewards and Sanctions) Ideas and Examples

The purpose of rewards and sanctions in drug court programs is to help shape participant behavior in the direction of drug court goals and other positive behaviors. That is, to help guide offenders away from drug use and criminal activity and toward positive behaviors, including following through on program requirements. Drug court teams, when determining responses to participant behavior, should be thinking in terms of behavior change, not punishment. The questions should be, “What response from the team will lead participants to engage in positive, pro-social behaviors?”

Sanctions will assist drug court participants in what *not* to do, while rewards will help participants learn they *should* do. Rewards teach that it can be a pleasant experience to follow through on program requirements and in turn, to follow through on positive life activities. It is important to incorporate both rewards and sanctions.

Below are some examples of drug court team responses, rewards and sanctions that have been used in drug courts across the United States.

#### Rewards

No cost or low cost rewards

Applause and words of encouragement from drug court judge and staff

Have judge come off the bench and shake participant’s hand.

Photo taken with Judge

A “Quick List.” Participants who are doing well get called first during court sessions and are allowed to leave when done.

A white board or magnetic board posted during drug court sessions where participants can put their names when they are doing well. There can be a board for each phase so when participants move from one phase to the next, they can move their names up a phase during the court session.

Decrease frequency of program requirements as appropriate—fewer self-help (AA/NA) groups, less frequent court hearings, less frequent drug tests.

Lottery or fishbowl drawing. Participants who are doing well have their names put in the lottery. The names of these participants are read out in court (as acknowledgement of success) and then the participant whose name is drawn receives a tangible reward (candy, tickets to movies or other appropriate events, etc.)

Small tangible rewards such as bite size candies.

Key chains, or other longer lasting tangible rewards to use as acknowledgements when participants move up in phase.

More visitation with children

Higher cost (generally tangible) rewards

Fruit (for staff that would like to model healthy diet!)

Candy bars

”The Basket” which is filled with candy bars—awarded drug court session when participant is doing *everything* “right”

Coffee bucks

Gift certificates for local stores.

Scholarships to local schools.

Tokens presented after specified number of clean days given to client by judge during court and judge announces name and number of clean days.

Swimming pass to local pool

### Treatment Responses

Increasing frequency of self-help groups, (for example, 30 AA/NA meetings in 30 days or 90 AA/NA meetings in 90 days).

Increasing frequency of treatment sessions

Residential treatment.

Increase one-on-one meetings with treatment counselors

Increase meetings with case manager

### Sanctions for Non-Compliant Behavior

Require participants to write papers or paragraphs appropriate to their non-compliant behavior and problem solve on how they can avoid the non-compliant behavior in the future.

“Showing the judge’s back.” During a court appearance, the judge turns around in his or her chair to show his/her back to the participants. The participant must stand there waiting for the judge to finish their interaction. (This appears to be a very minor sanction but can be very effective!)

Being reprimanded by the judge

“Sit sanctions.” Participants are required to come to drug court hearings (on top of their own required hearings) to observe. Or participants are required to sit in regular court for drug offenders and observe how offenders are treated outside of drug court.

Increasing frequency of drug court appearances

One day or more in jail. (Be careful, this is an expensive sanction and is not always the most effective!)

“Impose/suspend” sentence. The judge can tell a participant who has been non-compliant that he or she will receive a certain amount of time in jail (or some other sanction) if they do not comply with the program requirements and/or satisfy any additional requirements the staff requests by the next court session. If the participant does not comply by the next session, the judge imposes the sentence. If the participant does comply by the next session, the sentence is “suspended” and held over until the next court session, at which time, if the participant continues to do well, the sen-

tence will continue to be suspended. If the participant is non-compliant at any time, the sentence is immediately imposed.

Community service. The best use of community service is to have an array of community service options available. If participants can fit their skills to the type of service they are providing and if they can see the positive results of their work, they will have the opportunity to learn a positive lesson on what it can mean to give back to their communities. Examples of community service that other drug courts have used are: helping to build houses for the homeless (e.g., Habitat for Humanity), delivering meals to hungry families, fixing bikes or other recycled items for charities, planting flowers or other plants, cleaning and painting in community recreation areas and parks. Cleaning up in a neighborhood where the participant had caused harm or damage in the past can be particularly meaningful to the participants.

Rather than serve jail time, or do a week of community service, the participant works in the jail for a weekend.



## **APPENDIX C: SAMPLE OF DRUG COURT REWARD AND SANCTION GUIDELINES**



## **SANCTIONS**

### **I. Testing positive for a controlled substance**

- Increased supervision
- Increased urinalysis
- Community service
- Remand with a written assignment
- Incarceration (1 to 10 days on first; 1 week on second)
- Discharge from the program

#### **TREATMENT RESPONSE:**

- Review treatment plan for appropriate treatment services
- Write an essay about your relapse and things you will do differently
- Write and present a list of why you want to stay clean and sober
- Write and present a list of temptations (people, objects, music, and locations) and what you plan to put in their place.
- Make a list of what stresses you and what you can do to reduce these stresses.
- Residential treatment for a specified period of time (for more than 2 positive tests)
- Additional individual sessions and/or group sessions
- Extension of participation in the program
- Repeat Program Phase

#### **GOAL:**

- Obtain/Maintain Sobriety

### **II. Failing or refusing to test**

- Increased supervision
- Increased urinalysis
- Remand with a written assignment
- Increased court appearances (If in Phase II-IV)
- Incarceration (1 to 10 days on first; 1 week on second)
- Discharge from the program

#### **TREATMENT RESPONSE:**

- Review treatment plan for appropriate treatment services
- Residential treatment for a specified period of time
- Extension of participation in the program
- Repeat Program Phase

**GOAL:**

- Obtain/Maintain Sobriety and Cooperation to comply with testing requirements

**III. Missing a court session without receiving prior approval for the absence**

- Community service
- "Jury-box duty"
- Remand with a written assignment
- Increased court appearances
- Extension of participation in the program

**GOAL:**

- Responsible Behavior and Time Management

**IV. Being late to court, particularly if consistently late with no prior approval from the Court or Case Manager**

- Community service
- "Jury-box duty"
- Increased court appearances
- Extension of participation in the program

**GOAL:**

- Responsible Behavior

**V. Failure to attend the required number of AA/NA meetings or support group meetings**

- Increased supervision
- Community service
- "Jury-box duty"
- Increased court appearances
- Extension of participation in the program
- Written Assignment

**TREATMENT RESPONSE:**

- Review treatment plan for appropriate treatment services
- Written assignment on the value of support groups in recovery.
- Additional individual sessions and/or group sessions

**GOAL:**

- Improved Treatment Outcome

**VI. Failure to attend and complete the assigned treatment program**

- Increased supervision
- Community service
- Remand with a written assignment
- Extension of participation in the program
- Repeat Program Phase

**TREATMENT RESPONSE:**

- One or more weeks set back in previous Phase for additional support
- Attend Life Skills Group
- Residential treatment for a specified period of time (consist occurrence)
- Additional individual sessions and/or group sessions

**GOAL:**

- Improved Treatment Outcome

**VII. Demonstrating a lack of response by failing to keep in contact and/or cooperate with the Case Manager or Counselor**

- Community service
- "Jury-box duty"
- Remand with a written assignment
- Extension of participation in the program
- Repeat Program Phase

**TREATMENT RESPONSE:**

- Make up missed sessions
- Review treatment plan to ensure clients needs are being met
- Additional individual sessions and/or group sessions

**GOAL:**

- Demonstrate respect and responsibility

**VIII. Convicted of a new crime**

- Increased supervision
- Remand with a written assignment
- Increased court appearances
- Extension of participation in the program
- Repeat Program Phase
- Incarceration
- Discharge from the program

**TREATMENT RESPONSE:**

- Additional individual sessions and/or group sessions

**GOAL:**

- To promote a crime free lifestyle

**IX. Violence or threats of violence directed at any treatment staff or other clients**

- Discharge from the program

**X. Lack of motivation to seek employment or continue education**

- "Jury-box duty"
- Remand with a written assignment
- Increased court appearances
- Extension of participation in the program

**TREATMENT RESPONSE:**

- Additional individual sessions and/or group sessions

**GOALS:**

- Graduation and Job Preparedness

**XI. Refusing to terminate association with individuals who are using**

- Increased supervision
- Community service
- "Jury-box duty"
- Increased court appearances
- Extension of participation in the program
- Written Assignment

**TREATMENT RESPONSE:**

- Additional individual sessions and/or group sessions

**GOALS:**

- Develop a social network with clean and sober friends

**XII. Failure to comply with court directives**

- Increased supervision
- Community service
- "Jury-box duty"
- Remand with a written assignment
- Increased court appearances
- Extension of participation in the program
- Repeat Program Phase
- Remand into custody all free time
- Written assignment

**GOALS:**

- Develop a social network with clean and sober friends

**XIII. Lack of motivation to seek safe housing**

- Increased supervision
- Community service
- Written assignment

#### **XIV. Forging documentation required by the court for proof of compliance**

- Incarceration
- Discharge from the program

(If it appears to the prosecuting attorney, the court, or the probation department that the defendant if convicted of a misdemeanor that reflects the defendant's propensity for violence, or the defendant is convicted of a felony, or the defendant has engaged in criminal conduct rendering him or her unsuitable for participation in Drug Treatment Court, the prosecuting attorney, the court on its own, or the probation department may make a motion to terminate defendant's conditional release and participation in the Drug Treatment Court. After notice to the defendant, the court shall hold a hearing. If the court finds that the defendant has been convicted of a crime as indicated above, or that the defendant has engaged in criminal conduct rendering him or her unsuitable for continued participation in Drug Treatment Court, the court shall revoke the defendant's conditional release, and refer the case to the probation department for the preparation of a sentencing report.)

## REWARDS

If the participant complies with the program, achieves program goals and exhibits drug -free behavior, he/she will be rewarded and encouraged by the court through a series of incentives. Participants will be able to accrue up to 50 points to become eligible to receive a reward. After accruing 50 points, the participant will start over in point accrual until he/she reaches 50 points again. The points are awarded as follows:

<b>Achievement</b>	<b>Points Awarded</b>
• Step Walking (12 step)	3
• All required AA/NA Meetings Attended	1
• AA/NA Sheet turned in on time	1
• Attended all required treatment activities at the program	1
• Phase Change	5
• 3 Month Chip	2
• 6 Month Chip	4
• 9 Month Chip	6
• 1 year Chip	8
• Obtained a job (part time)	3
• Obtained a job (full time)	5
• Graduated from Vocational Training	5
• Obtained a GED	5
• Graduated from Junior College	5
• Obtained a Driver's License	4
• Bought a Car	4
• Obtained Safe Housing (Renting)	4
• Obtained Safe Housing (Buying)	5
• Taking Care of Health Needs	3
• Finding A Sponsor	3
• Helping to interpret	1
• Promotion/raise at work	3
• Obtaining MAP/Medi-Cal/Denti-Cal	3
• Parenting Certificate	2
• Judge's Discretion	1 to 5

Incentive items that are given to the participants (upon availability) include but are not limited to:

- Bus passes
- A donated bicycle that may be kept for the duration of time in Drug Court. After completion of drug court, the bicycle must be returned. (A terminated participant must return the bicycle forthwith.)
- Pencils, key chains: awarded for Phase changes
- Personal hygiene products
- Framing any certificate of completion from other programs, or certificates showing length of sobriety
- Haircuts
- Eye Wear
- Movie Passes
- Food Coupons



## **APPENDIX D: LIST OF DATA ELEMENTS FOR PROGRAM SELF-MONITORING**



## NPC Data Elements Worksheet

### DRUG COURT PROGRAM DATA

	Variable/Data element	Where located/ who collects? (electronic/ written records?)	When agency began collecting or plans to begin?	Notes
	<b>DEMOGRAPHICS &amp; ID</b> (collect from all possible sources)			
1a	Name			
2	SSN, state ID, FBI ID, DL#, DC case number, state TX number			
2a	○ Birth Date			
2b	○ Gender			
2c	○ Race/Ethnicity			
	<b>CLIENT INFORMATION</b>			
2d	○ Employment status at drug court entry			
2e	○ Employment status at drug court exit			
2f	○ Highest grade of school completed at time of drug court entry			
2g	○ Number and ages of children			
2h	○ Housing status at entry			
2i	○ Housing status at exit			
2j	○ Income at entry (if self-supporting)			
2k	○ Income at exit (if self-supporting)			
2l	○ Other demographics			
	<b>DRUG COURT SPECIFIC DATA</b>			
3	Drug court entry date			
4	Drug court exit date			
5	Date of drug court eligible arrest			
5a	Charge for DC arrest			
5b	Arresting agency			

	<b>Variable/Data element</b>	<b>Where located/ who collects? (electronic/ written records?)</b>	<b>When agency began collecting or plans to begin?</b>	<b>Notes</b>
6	Court case number for case leading to drug court participation			
7	Date of referral to drug court program and referral source			
8	Drug court status on exit (e.g., graduated, revoked, terminated, dropped out)			
9	If participation in drug court is revoked or terminated, reason			
10	Dates of entry into each phase			
11	Criminal/Juvenile justice status on exit (e.g., on probation, charge expunged, etc.)			
12	Dates of UAs			
13	Dates of positive UAs			
14	Dates of other drug tests			
15	Dates of other positive drug tests			
15a	Agency provided test results			
16	Drugs of choice (primary and secondary)			
17	Dates of drug court sessions			
18	Attitude toward treatment/readiness to change at entry			
19	Dates of services received with types of service received (see examples below) [Note: If dates not available, at least need different types of services rec'd and approximate time periods or the # of times the individual received a particular service].			
19a	○ Group A&D sessions			
19b	○ Individual A&D sessions			
19c	○ Mental health services			

	<b>Variable/Data element</b>	<b>Where located/ who collects? (electronic/ written records?)</b>	<b>When agency began collecting or plans to begin?</b>	<b>Notes</b>
19e	Agency providing TX			
20	Mental health or A&D diagnoses			
21	Aftercare services (dates and types), if applicable			
22	Dates of re-arrests/re-referrals during program participation			
23	Charge(s)/allegation(s) associated with re-arrests/re-referrals during program participation			
24	Outcome(s) of re-arrests/re-referrals (conviction, dismissed, etc.) during program participation			
25	Other noncompliant behavior (types, dates) during program participation			
26	Probation violations during program participation			
27	Rewards and sanctions (dates, types, and duration)			
27a	Detention/jail time as a sanction			