

Submitted to:

Bexar County Felony Drug Court San Antonio, Texas

Submitted by:

NPC Research Portland, Oregon

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Bexar County Felony Drug Court Process, Outcome, and Cost Evaluation Final Report

Submitted By
NPC Research

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BACKGROUND

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 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 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 court participants. Prosecuting and defense attorneys modify their traditional adversarial roles to support the treatment and supervision needs of program participants. Drug court programs blend the resources, expertise and interests of a variety of jurisdictions and agencies.

Drug 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 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 courts have been shown to cost less to operate than processing offenders through business-as-usual in the court system (Carey & Finigan).

The Bexar County Felony Drug Court was implemented in January 2004. This program, which is designed to last for 18 months, takes only post-conviction participants. The general program population consists of nonviolent offenders currently on probation assessed as high risk and high needs. It has a capacity to serve approximately 225 participants at one time.

In 2009, the Bexar County Felony Drug Court (BCFDC) received a program enhancement grant from the Substance Abuse and Mental Health Services Administration (SAMHSA). The program is using this enhancement grant in working towards three goals: 1) obtaining "on-demand" residential beds intended to treat 50 participants each year, 2) receiving training and technical assistance to improve the program, and 3) conducting a program evaluation including process, outcome and cost components. NPC Research performed an initial process assessment of the program as part of a technical assistance program through SAMHSA and completed a report in May of 2010. Midway through the 3-year grant, the BCFDC hired NPC Research to conduct a full process, outcome, and cost evaluation of the program. The process evaluation included in this report provides updated information from the assessment conducted in 2010 as well any changes made to the program since.

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 courts nationally. Having completed over 125 drug court evaluations (including adult, juvenile, DUI and family treatment drug 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 Bexar County Felony Drug Court evaluation. The process study included an examination of BCFDC practices in relation to the 10 Key Component 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 court participants to a matched group of offenders who were eligible for the program but did not participate. Outcomes were examined for up to 3 years after drug 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 re-arrests, court cases, time on probation, in jail and in prison.

PROCESS EVALUATION

Process Report Description and Purpose

A process evaluation considers a program's policies and procedures and examines whether the program is meeting its goals and objectives. Process evaluations generally determine whether programs have been implemented as intended and are delivering planned services to target populations. To do this the evaluator must have criteria or standards to apply to the program being studied. In the case of drug treatment courts, some nationally recognized guidelines have been established and used to assess drug court program processes. The standards established by the National Association of Drug Court Professionals (1997) are called the "10 Key Components of Drug Courts." Good process evaluation should provide useful information about program functioning in ways that can contribute to program improvement. The main benefit of a process evaluation is improving program practices with the intention of increasing program effectiveness for its participants. Program improvement leads to better outcomes and impacts and in turn, increased cost-effectiveness and cost-savings.

As the Bexar County Felony Drug Court received a process assessment in 2010, this report serves as an update to the original process assessment including any successes and challenges regarding implementation of previous recommendations.

Process Evaluation Methods

The information that supports the process evaluation was collected from an online program assessment, drug court staff interviews, drug court participant focus groups, observations of the Bexar County Felony Drug Court (referred to as BCFDC in the remainder of the report), and program documents such as the intake evaluation. The methods used to gather information from each source are described below.

ELECTRONIC PROGRAM SURVEY

An electronic survey was used to gather program process information from key program staff. This survey, which provides a consistent method for collecting structure and process information from drug courts, was developed based on four main sources: NPC's extensive experience with drug courts, the American University Drug Court Survey, a published paper by Longshore et al. (2001), which lays out a conceptual framework for drug courts, and the 10 Key Components established by the National Association of Drug Court Professionals (1997). The survey covers a number of areas, particularly areas related to the 10 Key Components—including eligibility guidelines, specific drug court program processes (e.g., phases, treatment providers, urinalyses, fee structure, rewards/sanctions), graduation, aftercare, identification of drug court team members and their roles, and a description of drug court participants (e.g., general demographics, drugs of use). The use of an electronic survey allows NPC to begin building an understanding of the program, as well as to collect information that will support a thorough review of the data collected about the site. The program completed this survey as part of their initial process evaluation in 2010 and did not complete it a second time.

SITE VISIT

An NPC evaluation staff member conducted a site visit in December 2011. During this visit, we observed a drug court hearing and staffing meeting, interviewed key drug court and community



team members, and facilitated a focus group (with current drug court participants and participants that successfully completed the program). These observations, interviews, and focus groups provided information about the structure, procedures, and routines used in the drug court.

KEY STAKEHOLDER INTERVIEWS

Key stakeholder interviews, conducted in person and by telephone, were a critical component of the process study. NPC staff conducted detailed interviews with individuals involved in the administration of the drug court, including the current judge, the drug court coordinator, the data specialists, treatment providers, case managers, probation officers, a defense attorney, and court security.

Interviews were conducted to determine if any changes had been made to the program since the initial process evaluation, including any implementation of recommendations. NPC's Drug Court Typology Interview Guide¹ was referenced for detailed questions about the program. This guide was developed from the same sources as the online survey and provides a consistent method for collecting structure and process information from drug courts. The information gathered through the use of this guide assisted the evaluation team in focusing on the day-to-day operations as well as the most important and unique characteristics of the drug court.

FOCUS GROUPS

NPC staff conducted a focus group with current participants and participants that successfully completed the program (N = 9). There were six men and three women in the focus group. Two individual in the focus group was in Phase 1, three in Phase 2, three in Phase 3 and one had successfully graduated from the program. The focus group, which took place during the December 2011 site visit, provided participants with an opportunity to share their experiences and perceptions regarding the drug court process.

DOCUMENT REVIEW

In order to better understand the operations and practices of the BCFDC, the evaluation team also reviewed program documents including the assessment form, past evaluations and reports, the current draft of the participant handbook, and other related documents.

www.npcresearch.com/Files/NPC Research Drug Court Typology Interview Guide (copyrighted).pdf

¹ The Typology Guide was originally developed by NPC Research under a grant from the Bureau of Justice Assistance and the Administrative Office of the Courts of the State of California. A copy of this guide can be found at the NPC Research Web site at

GENERAL SUMMARY OF PROCESS FINDINGS AND RECOMMENDATIONS

his section includes brief background information about the Bexar County Felony Drug Court and then a summary of the key results and recommendations, including updates made to the recommendations from the 2010 process assessment. The section following this summary provides the detailed results and recommendations for each key component. Please note that the commendations and recommendations in this summary do not include all commendations and recommendations and do not include the detailed information available in the main text of the report. Please see the main report for full information.

The Bexar County Felony Drug Court (BCFDC) was implemented in January 2004. This program, which is designed to last for 18 months, takes only post-plea and post-conviction participants. The general program population consists of nonviolent offenders currently on probation assessed as high risk and high needs. It has a capacity to serve approximately 225 participants at one time. As of August, 2013, there are 252 active participants (46 of which are on aftercare).

In 2009, the program received an Enhancement Grant from SAMHSA in order to accomplish the following three goals: 1) obtaining "on-demand" residential beds intended to treat 50 participants each year, 2) receiving training and technical assistance to improve the program, and 3) conducting a program evaluation including process, outcome and cost components.

Research has demonstrated that drug courts that have performed monitoring and evaluation and made changes based on the feedback have significantly better outcomes, including twice the reduction in recidivism rates and over twice the cost savings (Carey, Finigan, & Pukstas, 2008; Carey, Waller, & Weller, 2011; Carey, Mackin, & Finigan, 2012). The recommendations in this report are based on research performed in over 100 drug courts around the country and on practical experience working with individual courts and collaborating with the professionals who do this work.

Overall, the BCFDC follows the guidelines and best practices within the 10 Key Components of drug courts. Among its many positive attributes, the program should be specifically commended for the following practices:

• Experience on the bench. The current judge has been presiding over the court for over 6 years and is assigned indefinitely. Experience and longevity are correlated with more positive participant outcomes and cost savings according to research where judges have served for 2 years or more (Carey et al., 2008; Finigan, Carey, & Cox, 2007).

"He's honest. If he says I'm proud of you, he's proud of you. If he [asks] how's your wife doing, he cares how your wife is doing. But it's reciprocal, he expects honesty—he will not tolerate dishonesty."

- Focus Group Participant

• Immediate responses to participant behavior. Court response to participant behavior occurs as soon as possible following the behavior that prompts the response. The program has implemented a policy of having participants come to court the very next session



(even before their next regularly scheduled session) if they are found to be out of compliance with any program requirement, including missing a treatment session, having a missed or positive drug test result, or missing a meeting with a team member (e.g., probation or case manager). This practice is related to significant cost savings for programs that use it (Carey et al., 2012).

- A wide variety of services are made available to participants. The program offers gender specific services, mental health treatment, parenting classes, anger management classes, and family/domestic relations counseling all of which have been linked to greater reductions in recidivism (Carey et al., 2012).
- The program includes individuals with mental health issues and has puts services in place to appropriately assess and serve them. This inclusion and effort is likely to increase the cost savings of the system as a whole, by helping these offenders maintain their stability.
- The BCFDC invests in regular training. The BCFDC has engaged in a large amount of training for staff and is commended on their dedication to educating team members on a regular basis. Training has been linked to greater reductions in recidivism (Carey et al., 2008, 2012). In addition to training team members as a regular part of their drug court process, the program is continually investing in updated training and technical assistance, specifically funded by the SAMHSA grant.

Although this program is functioning well in many areas, NPC's review of program operations resulted in some recommendations for program improvements. 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 it 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 are a summary of some of the key recommendations made in the original assessment in 2010 with updates on the program's progress in these areas. Also included are a couple new recommendations based on the latest research.

Background information, more detailed explanations, and additional recommendations are presented within each of the 10 Key Components in the main body of the process section of the report.

- Continue training all team members. The program should continue to ensure that *all* drug court staff members, including treatment providers, receive training about the drug court model, their role in the drug 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.
 - 2013 Update Successfully Implemented: The team continues to send new members as well as established members of the team to trainings and conferences as funding is available. The effort and importance placed on training is clear in the BCFDC program.

- Assign a prosecuting attorney to the drug court program. We recommend having a dedicated attorney who is interested in and supportive of the drug court concept. The prosecutor should be trained in the drug court model and the prosecuting attorney's role in drug court. Because continuity in team roles strengthens relationships, and consequently team functioning, the program should work to maximize tenures to the extent feasible. All team members should be well integrated and have a stake in the program goals. Drug court training early on in the members' tenure will help ensure understanding and acceptance of the non-traditional roles that distinguish drug courts from usual court processing.
 - o **2013 Update:** While the education and training opportunities provided has created more buy in from the prosecutor's office, a lack of funding is still presenting as the main barrier to having a prosecutor on the team. The program is actively searching for funding opportunities that would bring a prosecuting attorney on board.
- Work to decrease the length of time from arrest to program entry for more participants. The length of time between arrest and drug court entry is longer than indicated by current best practices (less than 50 days). The BCFDC should conduct a review and analysis of the case flow from referral to drug court entry to identify bottlenecks or structural barriers, and points in the process where more efficient procedures may be implemented. Further, one team member could be assigned to review the systems of programs that are post-conviction that have shorter periods between eligibility determination and drug court entry and bring this information back to the team. The program should set a goal for how many days it should take to get participants into the program, and work toward achieving that goal. Distributing eligibility requirements to all referring agencies should also assist in streamlining the program referral and entry process.
 - 2013 Update: Due to the post-adjudication model, the program has been unable to dramatically reduce the time to entry. However, the program has worked to educate and create buy-in from other referring agencies, including the prosecutor's office and other presiding judges in the courts. Greater awareness of the program and its successes has resulted in more referrals, according to team members. The impact of the delay between arrest and entry is demonstrated in the cost analysis section of this report. This cost information can be used by the program in illustrating to their partners why they should consider implementing a swifter time to drug court entry. In addition, if participants are referred due to a probation violation, then the violation is actually the "trigger" that leads people to be referred to drug court and the time between the violation and program entry should be examined in future studies.
- 2013 New Recommendation: Increase the frequency of drug testing in later phases. Research shows that drug courts that test randomly at least two times per week during the first phase have better outcomes (Carey et al., 2008, 2012). In addition, drug testing needs to be maintained during the transition to less supervision and monitoring in other areas (such as treatment sessions and court appearances), to ensure that the participant is doing well with more independence (Marlowe, 2008). The program should consider increasing the number of tests administered, on average, to participants in later phases.
- 2013 Recommendation: Monitor case manager caseload. Make certain that there are adequate resources for thorough case management at all levels of the program ensuring that participant needs are being met. The American Parole and Probation Association



recommends caseload standards of 20 intensely supervised individuals for each agent (Burrell, 2006). Intensive supervision includes weekly meetings with a caseworker. For moderate-risk, less intensively supervised clients, the number increases to 50. The drug court program should try to stay as close to these guidelines as possible in order to achieve and maintain the structured nature of this program. Staff can have larger caseloads if supervision and case management responsibilities are shared, if some participants are in later program phases, or if some participants are lower risk and require less contact and support.

Overall the BCFDC has implemented a program that follows the guidelines of the 10 Key Components of Drug Courts and 10 Guiding Principles of DWI Courts.

The following section of the report presents the BCFDC practices and recommendations in greater detail as well as additional recommendations. This information is provided within the framework of the 10 Key Components.

Bexar County Felony Drug Court Process Study Detailed Results

The Bexar County Felony Drug Court was implemented in January 2004. This program, which is designed to last for 18 months, takes only post-plea and post-conviction participants. The general program population consists of nonviolent offenders currently on probation assessed as high risk and high needs. It has a capacity to serve approximately 225 participants at one time. As of August, 2013, there are 252 active participants (46 of which are on aftercare).

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

The focus of this 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 court system and the extent of collaboration of all the agencies involved in the program.

Key Component #1 focuses on the collaboration of a variety of agencies. The partnerships include the integration of treatment services with traditional court case processing, and the engagement of various other justice and service agencies, including probation, law enforcement, and community partners (child welfare, employment, housing, transportation, and other groups). Each professional who interacts with the participants observes them from a unique perspective, at different times of the day or week, and under varied circumstances. This offers holistic, useful information for the team to draw upon in determining court responses that will change participant behavior. 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. For these collaborations to be true "partnerships," regular meetings and collaborations with these 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.

National Research

A plethora of research (Carey et al., 2005, 2008, 2011, 2012) 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 participants, including reduced recidivism and, consequently, reduced costs at follow-up. Greater law enforcement involvement increases graduation rates, reduces recidivism and reduces outcome costs (Carey et al., 2008, 2012).

Research has also demonstrated that drug courts with one treatment provider or a single central agency coordinating treatment resulted in more positive participant outcomes including higher graduation rates and lower recidivism costs (Carey et al., 2005, 2008). Findings also indicated that when the treatment provider uses email to convey information to the team, the program has greater reductions in recidivism (Carey et al., 2012).

Bexar County Process

- The drug court team is composed of the judge, drug court coordinator, treatment representatives, defense attorney, case managers, probation, court clerk, Project Sparc representative, bailiff, tracking specialist and program analyst.
- Most of the team attends staffing meetings prior to drug court sessions where participant
 progress and drug court policies are discussed. The court clerk and bailiff do not always
 attend. During these meetings, all participants are discussed. Those doing well are briefly



discussed. The team goes over in detail noncompliance issues of those not doing well and possible treatment responses or sanctions. Not all probation officers and treatment representatives stay for the entirety of the staffing.

Participants had all positive things to say about team members. "We got the best of the best as far as the probation department is concerned." Regarding case managers; "they're so wonderful", "if you need help, they help you." Perhaps most telling, one participant noted, "I don't know if they've been there, but it feels like they have."

- The drug court team does not currently have a steering committee. They attempted to start one utilizing an existing committee for the re-entry court but the committee never fully materialized. There is, however, an advisory committee that meets at least quarterly composed of the judge, drug court coordinator, probation, defense attorney, treatment representatives, case managers, tracking specialist and program analyst.
- Mid Coast Family Services coordinates treatment for participants and refers to the appropriate agency based on their assessment. There are currently six main treatment agencies and five residential only agencies involved with the BCFDC.
- Treatment coordinators communicate with the court verbally at staffing meetings and drug court hearings, through written progress reports, office visits and via email. It is reported that information from the treatment provider is always given to the court in a timely way.

Commendations

• Regular email communication among the team members. Team members noted that updates occur regularly via email regarding participant behavior and court responses. Staff noted that information was timely and team members provide input as needed, and that protocols were in place to notify appropriate parties. Drug courts that shared information among team members through email had 65% lower recidivism than drug courts that did not use email (Carey et al., 2012).

Suggestions/Recommendations

- Implement a drug court steering committee. The BCFDC is working toward implementing a steering committee to meet regularly (we suggest quarterly) for the purpose of discussing and making decisions about drug court policy issues, promote understanding of each team member's role, and allow the team to become united on drug court goals. Committee members should include representatives from administration and off-site treatment and all drug court team members. In addition, including representatives from other community agencies, representatives of the business community and other interested groups in this committee could result in expanded understanding of and community support for the program, and may result in additional services and facilities for the program.
 - 2013 Update: Though the program worked to develop a regular steering committee, the committee has not been maintained. We recommend that the program continue to work toward implementing a steering committee that meets at least twice per year in order to achieve more community awareness and support.

- Work toward having all members of the team attend staffing meetings and drug court hearings. Previous research (Carey et al., 2005) has indicated that representation of all team members, particularly of the prosecuting attorney and defense attorney at team meetings and court sessions, is related to positive outcomes for clients, including reduced recidivism and, consequently, reduced costs at follow-up. In the current situation, since there is no available prosecutor for the team, we recommend that at least one BCFDC defense attorney attend all the pre-court staffing meetings and drug court sessions in order to stay informed on participant issues, to provide the team with the legal perspective of a defense attorney and to provide defense for participant in court in situations involving jail sanctions and terminations, etc.
 - o **2013 Update:** The defense counsel is now more regularly attending staffing meetings. However, due to the length and frequency of staffing, probation and treatment are unable to be present for the entirety of each meeting. When a probation officer is unable to be present for the meeting, he or she will send updates on his or her clients via another PO. While the main treatment providers try to stay the entire time, many smaller agencies only appear to discuss the few clients they are currently seeing.
- Work on updating and enhancing the policy and procedure manual. Hold a dedicated meeting to review, update, revise and create a policy and procedure manual. This document can be invaluable in ensuring that all partners are operating under the same assumptions; and for clarifying roles, responsibilities, and expectations.
 - **2013 Update:** The program has worked hard to create a participant handbook and policy and procedure manual. While it has not yet been distributed, as it is still in draft format, the program has worked with the Alumni Association to begin an orientation for new participants. New participants are able to meet with alumni and discuss the program, ask questions, and receive peer support.

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

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 court. Unlike traditional case processing, drug court case processing favors a non-adversarial approach. The second issue is to ensure the drug 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. (2011) found that participation by the prosecution and defense attorneys in team meetings and at drug court status review hearings had a positive effect on graduation rates and recidivism² costs.

In addition, drug courts that allowed non-drug-related charges also showed lower recidivism costs. Allowing participants into the drug court program only post-plea was associated with

² 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.



lower graduation rates and higher investment³ 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., 2008).

Bexar County Process

- Defense counsel is included as part of the drug court team and regularly attends staffing
 meetings and drug court sessions. The prosecuting attorney is not currently part of the
 team.
- Both the prosecutor's agency as well as defense attorneys are able to identify and refer potential participants to the program.
- The program accepts only post plea/post-adjudication and post-conviction participants.
- Offenders with current violent charges are not allowed into the program.
- The position of defense attorney rotates each month. There are currently six attorneys in this rotation who have been trained in the drug court model and have been associated with the BCFDC for multiple years. While the assigned defense attorney position rotates, all attorneys are available to the program throughout the year. The monthly assigned attorney is primarily there to sign up new participants.

Commendations

• The BCFDC defense attorney regularly attends team meetings and court sessions. Research indicates that when defense attorneys regularly attend staffing meetings, programs exhibit a 93% increase in cost savings, compared to programs that do not perform this practice (Carey et al., 2008, 2012).

Suggestions/Recommendations

- Assign a single defense attorney to the drug court program. Since the defense attorney position currently revolves and there is not one dedicated prosecuting attorney, we recommend having a dedicated prosecuting and defense attorney. While the current process for defense is a good solution to a lack of resources and appears to be working well for the team, it is best to only have one dedicated defense attorney. Because continuity in team roles strengthens relationships, and consequently team functioning, the program should work to maximize tenures to the extent feasible. It is recommended that this position rotate only when necessary and ideally no more frequently than every 2 years.
 - 2013 Update: The program has been unable to switch to a dedicated defense attorney.
- Assign a prosecuting attorney to the drug court program. We recommend having a dedicated attorney who is interested in and supportive of the drug court concept. The prosecutor should be trained in the drug court model and the prosecuting attorney's role in drug court. Because continuity in team roles strengthens relationships, and consequently team functioning, the program should work to maximize tenures to the extent feasible. All team members should be well integrated and have a stake in the program goals. Drug court training early on in the members' tenure will help ensure understanding and ac-

³ 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.

ceptance of the non-traditional roles that distinguish drug courts from usual court processing.

- 2013 Update: While the education and training opportunities provided has created more buy in from the prosecutor's office, a lack of funding is still presenting as the main barrier to having a prosecutor on the team. The program is actively searching for funding opportunities that would bring a prosecuting attorney on board.
- Hold a training for prosecution and defense attorneys. We recommend an expert to
 perform training for the San Antonio Criminal Lawyers Association. Since this association is primarily defense lawyers, inviting the prosecuting attorney's office is also recommended.
 - o 2013 Update Successfully Implemented.

Why should attorneys be a part of the drug court, especially if it is post-adjudication? "It is important to remember that in spite of all the innovation and brilliance of the drug court model, it is still basically a Court. As such, it has basic rules and principles which should not be compromised. Due process and the right to counsel at all proceedings are constitutional principles which do not change, no matter how good the outcomes, or how we phrase the justification. People have rights, and they must be protected. It may be true that these things cost money. It is also true that our freedoms as enshrined in our Constitution are not free and they must be protected." (Helen Harberts, Prosecutor, NADCP Staff, 2010).

The goal of problem-solving courts is to change behavior by coercing treatment while protecting both participant rights and public safety. Punishment takes place at the initial sentencing. After punishment, the focus of the court shifts to the application of science and research to produce a clean healthy citizen where there was once an addicted criminal, while also protecting the constitution and the constitutional rights of the client.

The role of the defense counsel continues to be advocacy, as long as it does not interrupt the behavior modification principles of timely response to participant behavior. Advocacy takes different forms and occurs at different times, but it is equally powerful and critical in the drug court setting regardless of whether the program is pre-adjudication or post-adjudication. Drug courts are not due process short cuts, they are the courts and counsel using their power and skills to facilitate treatment within constitutional bounds while monitoring the safety of the public and the participant. Drug court clients are seen more frequently, supervised more closely, and monitored more stringently than other offenders. Thus, they have more violations of program rules and probation. Counsel must be there to rapidly address legal issues, settle violations, and move the case back to treatment and program case plans.

The role of the prosecution is still to protect public safety, including that of the client. Prosecutors have tremendous power that can be used to facilitate the goals of the court. The power can be used to praise, engage, and encourage participants in the court. Prosecutors can be excellent participants in reinforcing incentives, or in instilling hope on "bad days." Sometimes a simple "I am glad to see you" makes a difference when it comes from such an unusual source. Prosecutors who understand the intellectual basis for drug courts, and who understand addiction and all the research can be a tremendous "value added" to the team. By having a prosecutor on board and prepared, cases move quickly and problems are resolved as they come up. This facilitates the effective use of sanctions and incentives, since delay is the enemy of behavior modification principles.



Prosecution and defense attorneys should not engage in activities with the court without the other attorney being present. Having prepared counsel on both sides present in court allows for contemporaneous resolution, court response, and return to treatment. Working together, attorneys can facilitate the goals of the court and simultaneously protect the client and the constitution.

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

The focus of this component is on the development and effectiveness of the eligibility criteria and referral process. Different drug courts have different eligibility and exclusion criteria. Some drug 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 courts have clearly defined eligibility criteria. It is advisable to have these criteria written and provided to all potential referral sources. Drug courts also differ in how they determine if a client meets entry criteria. While drug courts are always targeting clients with a substance use problem, the drug 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 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 et al. (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, although their investment costs were higher.

Those courts that expected 50 days or less from arrest to drug court entry had higher savings than those courts that had a longer time period between arrest and entry (Carey et al., 2012).

Other research found that drug 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 courts that did not screen for suitability and did not exclude individuals based on suitability (Carey & Perkins, 2008). Moreover, programs that did *not* exclude offenders with mental health issues had a significant cost savings compared with those that did (Carey et al., 2012).

Bexar County Process

- Potential participants may be identified by the prosecuting attorney, defense attorney, judges, probation officers, and law enforcement.
- The BCFDC program eligibility requirements are written. All referring team agencies have copies of the eligibility criteria.
- The ASI and DSM IV are used to determine whether an offender is eligible for the drug court program.

- Participants are screened for co-occurring psychiatric disorders, as well as suicidal ideation. Those found to have co-occurring disorders are required to have mental health treatment included in their drug court related treatment.
- The BCFDC describes its target population as offenders currently on probation for a non-violent offense who have been assessed as high risk and high needs. Participants are screened through probation to determine risk and need level.
- While the estimated time between drug court referral and program entry is less than one week, the time between arrest to referral or violation of probation and referral can take much longer, typically many months. This is primarily due to the post-plea/post-adjudication model that the court follows. Participants need to be sentenced to Drug Court as a condition of probation by the presiding judge and even if identified early on in the adjudication process, the timeframe can still be lengthy. The program makes an effort to see potential clients on a regular basis and even refer to treatment providers, when possible.
- The drug court's capacity is reported to be 225 participants. As of August 2013, the program had 252 active participants (46 of which were on aftercare).
- There are currently five probation officers acting as primary case managers for the program. Each has a caseload of 45 clients. Team members reported that this caseload has increased in recent years. There are, in addition to probation, five case managers who work directly for the court and assist in participant needs.

Commendations

• The program includes individuals with mental health issues and has services in place to appropriately assess and serve them. This inclusion and effort is likely to increase the cost savings of the system as a whole, by helping these offenders maintain their stability.

"This program exposes people to recovery that normally wouldn't be exposed to it."

- Focus Group Participant

Suggestions/Recommendations

- **Update eligibility requirements.** As part of the policy and procedure discussion described under Key Component #1, the team should also update eligibility requirements for the program. To ensure everyone is clear on program eligibility, we recommend that the program revise written eligibility guidelines, and provide these written guidelines to team members and other individuals or agencies who may refer offenders to the program.
 - 2013 Update: The program has worked on this recommendation as part of the policies and procedures discussion. The materials will be finalized shortly.
- Work to decrease the length of time from arrest to program entry for more participants. The length of time between arrest and drug court entry is longer than indicated by current best practices (less than 50 days). The BCFDC should conduct a review and analysis of the case flow from referral to drug court entry to identify bottlenecks or structural barriers, and points in the process where more efficient procedures may be implemented. Further, one team member could be assigned to review the systems of programs that are



post-conviction that have shorter periods between eligibility determination and drug court entry and bring this information back to the team. The program should set a goal for how many days it should take to get participants into the program, and work toward achieving that goal. Distributing eligibility requirements to all referring agencies should also assist in streamlining the program referral and entry process.

- 2013 Update: Due to the post-adjudication model, the program has been unable to dramatically reduce the time to entry. However, the program has worked to educate and create buy-in from other referring agencies, including the prosecutor's office and other presiding judges in the courts. Greater awareness of the program and its successes has resulted in more referrals, according to team members. The impact of the delay between arrest and entry is demonstrated in the cost analysis section of this report. This cost information can be used by the program in illustrating to their partners why they should consider implementing a swifter time to drug court entry. In addition, if participants are referred due to a probation violation, then the violation is actually the "trigger" that leads people to be referred to drug court and the time between the violation and program entry should be examined in future studies.
- 2013 Recommendation: Monitor case manager caseload. Make certain that there are adequate resources for thorough case management at all levels of the program ensuring that participant needs are being met. The American Parole and Probation Association recommends caseload standards of 20 intensely supervised individuals for each agent (Burrell, 2006). Intensive supervision includes weekly meetings with a caseworker. For moderate-risk, less intensively supervised clients, the number increases to 50. The drug court program should try to stay as close to these guidelines as possible in order to achieve and maintain the structured nature of this program. Staff can have larger caseloads if supervision and case management responsibilities are shared, if some participants are in later program phases, or if some participants are lower risk and require less contact and support.

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

The focus of this key component is on the drug 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 courts still have decisions 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 took at least 12 months to complete had higher reductions in recidivism. In addition, programs that had three or more phases showed greater reductions in recidivism (Carey et al., 2012).

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, 2012). 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 participants 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 participants (such as with transportation, childcare, or employment), and may lead to participants 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 courts that include a focus on relapse prevention were shown to have higher graduation rates and lower recidivism than drug courts that did not (Carey et al., 2011). Programs that offered mental health services, parenting services and family counseling showed greater reductions in recidivism (Carey et al., 2012) than programs that did not offer these services to participants.

The American University National Drug Court Survey (Cooper, 2000) showed that most drug courts have a single treatment provider agency. NPC, in a study of 18 drug 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., 2012).

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 (Lurigio, 2000).

Bexar County Process

- The program does an initial screening of all participants and then refers to any of the 11 agencies that provide treatment to drug court participants. Each treatment provider is responsible for performing an assessment. Treatment representatives from all treatment agencies attend staffing meetings and drug court sessions, though not always for the entire meeting or hearing.
- The residential treatment agencies providing the residential beds for the SAMHSA Enhancement grant have worked to identify beds at the beginning of each month and the BCFDC has first pick, if needed. Participants are usually able to get in within a week after identifying the need.
- The BCFDC program consists of five phases, and incorporates weekly individual counseling/case management sessions in the first phase which decreases over each phase resulting in monthly individual sessions in the last phase. Group treatment session attendance is required three times weekly in the first phase and once every other week in the last phase. While these general guidelines are applicable to all participants, each individual is assigned a treatment plan to best suit their needs. Treatment plans are reviewed and revised as necessary. Participants are also required to attend self-help groups throughout the program and relapse prevention is incorporated into required treatment.
- Services required for all participants are based on assessed level of care and include: outpatient individual and group treatment sessions, and self-help meeting attendance. Services required for some participants include: detoxification, residential treatment, mental health counseling, psychiatric services, employment assistance, health education,



GED/education assistance, housing assistance and anger management classes. *Services offered to participants but not required include*: prescription drugs for substance abuse, gender-specific treatment sessions, language-specific or cultural-specific programs, parenting classes, prenatal/perinatal programs, family/domestic relations counseling, dental care and health care.

• The BCFDC program incorporates an aftercare program for participants available after graduation. Additionally, there is an alumni group that provides support for current participants. The Alumni currently provide orientation to new participants as well as a biweekly support group for participants. All graduating participants much participate with the Alumni association for the duration of their aftercare.

Commendations

• A wide variety of services are made available to participants. The program offers gender specific services, mental health treatment, parenting classes, anger management classes, and family/domestic relations counseling – all of which have been linked to greater reductions in recidivism (Carey et al., 2012).

Suggestions/Recommendations

There are no recommendations for the program under this key component at this time.

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

The focus of this key component is on the use of alcohol and other drug testing as a part of the drug 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 courts develop their own guidelines on the number of tests required. Related to this component, the drug court must assign responsibility for these tests and the method for collection.

National Research

Research on drug courts in California (Carey et al., 2005, 2012) found that drug testing that occurs randomly, at least 2 times per week, is the most effective model. If testing occurs more frequently (that is, more than 2 times per week), the random component becomes less important as it is difficult to find time to use in between frequent tests. Drug test results that were returned in 2 days or less have been associated with greater cost savings and greater reductions in recidivism (Carey et al., 2012).

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.

Bexar County Process

• Drug testing is performed randomly and occurs approximately two times per week during Phase I and decreases to about once per week by the end of the program. Drug testing is randomized based on a Monday through Saturday color call in system. The current pro-

- vider is unable to provide Saturday tests; however, participants are still required to call in on Saturdays. It is the program's intention to resume Saturday testing as soon as possible.
- Probation officers perform random home visits where drug tests may occur. These visits occur on nights and weekends.
- Many of the treatment providers collect UAs during group treatment, which occurs throughout the week, including evenings and weekends.
- Drug testing is mainly performed through urinalysis (UAs), though breath tests, bracelets/tethers and sweat patches are also used.
- UA results are obtained within 24 hours.
- All UAs are fully observed. UAs are conducted by treatment, probation, the court, case managers and transitional housing workers.

Commendations

• Rapid drug testing results. Research has shown that obtaining drug testing results within 48 hours of submission is associated with higher graduation rates and lower recidivism (Carey et al., 2008, 2012). The program is commended for adhering to this best practice.

Suggestions/Recommendations

- Add Sunday to drug testing schedule: In order for testing to be truly random and effective at deterring drug use for participants, it is key for there to be no day of the week that they are certain is test free. If at all possible, the program should add Sunday to the call-in days for participants. Even if no actual tests will occur on Sundays, the participants will be unlikely to notice this.
 - 2013 Update: The program reports that clients are regularly tested on Monday to make up for the lack of Sunday testing and that participants are also tested by probation officers during home visits, which can and do occur on evenings and both weekend days. The team reported that they will emphasize in court that participants may be tested at any time, including on Saturdays and Sundays during home visits.
- 2013 New Recommendation: Increase the frequency of drug testing in later phases. Research shows that drug courts that test randomly at least two times per week during the first phase have better outcomes (Carey et al., 2008, 2012). In addition, drug testing needs to be maintained during the transition to less supervision and monitoring in other areas (such as treatment sessions and court appearances), to ensure that the participant is doing well with more independence (Marlowe, 2008). The program should consider increasing the number of tests administered, on average, to participants in later phases.

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

The focus of this component is on how the drug court team responds to participant behavior during program participation, including how the team works together to determine an effective, coordinated response. Drug 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 participants, or a combination of both. The key staff involved in decisions about ap-



propriate responses to participant behavior varies across courts. Drug court team members may meet and decide on responses, or the judge may decide on the response in court. Drug 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 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 court team. All drug 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). Other research has shown greater reductions in recidivism were related to the imposition of sanctions by the judge *only* (Carey et al., 2012).

Drug courts that responded to infractions immediately, particularly by requiring participants to attend the next scheduled court session, had twice the cost savings (Carey et al., 2012). In addition, research has found that drug 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, 2011). Finally, programs that required participants to pay fees and have a job or be in school at the time of graduation had significant cost savings compared to programs that did not (Carey et al., 2012).

Bexar County Process

- Decisions about noncompliant participants are made by the team. Probation makes initial
 recommendation and treatment and the case managers will add additional information, if
 necessary. The team then comes to a consensus about appropriate treatment adjustments
 and/or sanctions. The judge will then typically administer the agreed upon sanction during the drug court session.
- Staffing meetings to discuss participants' behavior and progress are attended by the public defender, treatment representatives, case managers, the judge, probation, the drug court coordinator, the tracking specialist, the program analyst and community partners. Participants who are doing well are briefly discussed and participants not doing well are discussed in length, primarily regarding noncompliant behavior and recommended responses.
- 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 receive some tangible rewards, such as the Star Performer Certificate. All compliant participants are placed in a drawing each session. At the end, one or two names are drawn and those participants receive a small reward, usually a \$10 gift certificate.

"I remember the first time I came in, I was observing and you sit in the front row the first time, and there was applause when people did well and I was just struck by that, there was so much positivity."

- Focus Group Participant

• The drug court team members are given a written list of sanctions and rewards that are to be used in the program.

- Sanctions are sometimes standardized, but are usually on a case-by-case basis.
- Sanctions are imposed at the first court session after the non-compliant behavior, which can be as little as one day and as long as one week.
- Sanctions are graduated so that the severity increases with more frequent or more serious infractions. Court responses to participant non-compliance include writing essays, sit sanctions, community service, more frequent court appearances, returning to an earlier phase, residential treatment, more frequent UAs, increased treatment sessions, increased monitoring such as electronic alcohol and GPS monitors, and jail time.
- Upon graduation from the program, participants can have charges dismissed if they are on a deferred case or classified as nondisclosure. Graduation can also result in early termination of probation, court fines waived and community service waived.
- Graduation ceremonies are held every 6 months are combined for the felony and misdemeanor programs.

Commendations

- Immediate responses to participant behavior. Court response to participant behavior occurs as soon as possible following the behavior that prompts the response. The program has implemented a policy of having participants come to court the very next session (even before their next regularly scheduled session) if they are found to be out of compliance with any program requirement, including missing a treatment session, having a missed or positive drug test result, or missing a meeting with a team member (e.g., probation or case manager). This practice is related to significant cost savings for programs that use it (Carey et al., 2012).
- Written guidelines. The program has written guidelines for team response to participant behavior and they are provided to all team members. This practice has been shown to produce higher graduation rates and higher cost savings due to lower recidivism (Carey & Perkins, 2008; Carey et al., 2008, 2011, 2012).
- Graduation ceremonies are celebrations of successful participants. Graduations provide an opportunity for both involved and potential community partners to witness drug court program successes. Inviting community partners to observe and participate in graduations is a low cost way to highlight the effectiveness of the program and garner interest for continued and future involvement with the program. This is also a significant accomplishment for the graduate and it is important that graduations are distinct from the regular drug court hearings even if it occurs during a regular hearing.
- Completion of court requirements before graduation. This program requires that all of a participant's fees, fines, and court requirements (e.g., community service, restitution) are paid and completed prior to graduation. This practice has been demonstrated to reduce recidivism rates (Carey et al., 2012).

Suggestions/Recommendations

There are no recommendations for the program under this key component at this time.



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

The focus of this component is on the judge's role in drug court. The judge has an extremely important function for drug court in monitoring participant progress and using the court's authority to promote positive outcomes. While this component encourages ongoing interaction, drug 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 as well as how involved the judge is 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 policy making. One of the key roles of the drug 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, 2011) 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, Festinger, Lee, Dugosh, & Benasutti (2006) also demonstrated that biweekly court sessions were more effective for high-risk offenders, whereas less frequent sessions (e.g., monthly) were as effective for lower risk offenders. These findings were confirmed in more recent studies (Carey et al., 2012).

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 et al., 2007; Carey et al., 2012). When the average number of minutes for each court appearance was 3 or more, programs experienced a reduction in recidivism two and a half times greater than programs with shorter court appearances (Carey et al., 2012).

Bexar County Process

- Drug court participants typically attend drug court sessions once per week for the first 30 days, then once every other week for the remainder of Phase I, with court attendance reducing over the phases so that participants appear monthly by Phase V. Drug court sessions occur weekly and dual diagnosis occurs every Friday.
- The drug court judge is assigned to the drug court indefinitely.
- The drug court judge received formal drug court training and attends drug court related conferences. In addition, he observed other drug courts and received training from previous drug court judges.
- The judge speaks directly to participants during their court appearances. If additional information is required, he will direct questions to the other team members, primarily pro-

bation. The judge provides consistent follow through and generally follows the recommendations put forth by the team.

Participants universally like and respect the judge. Said one, "He's consistent, you know what to expect. He makes it clear that he expects the most."

Another participant simply noted, "Judge is awesome!"

• The judge spends time speaking to each participant, though sometimes participants are brought up in groups to save time overall.

Commendations

- **Frequent court reviews.** Participants have contact with the judge at least every 2 weeks in the first phase of the program. Research shows that programs that implemented this practice had greater reductions in recidivism (Carey et al., 2008, 2012).
- Experience on the bench. The current judge has been presiding over the court for over 6 years and is assigned indefinitely. Experience and longevity are correlated with more positive participant outcomes and cost savings according to research where judges have served for 2 years or more (Carey et al., 2008; Finigan et al., 2007).
- The judge participates in training and conference opportunities. Research has shown that drug courts that have formal training for all team members have higher graduation rates and lower recidivism (Carey et al., 2008, 2011). The judge sets an important precedent for the entire team by putting ongoing education as a top priority.

Suggestions/Recommendations

There are no recommendations for the program under this key component at this time.

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

This component encourages drug 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 courts may record important information electronically, in paper files or both. Ideally, drug 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 et al. (2008) and Carey et al. (2011) 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 court operations, 3) the use of program evaluation results to make modification to drug court operations, and 4) the participation of the drug court in more than one



evaluation by an independent evaluator. Courts that have modified their programs based on evaluation findings have experienced twice the cost savings and a significant reduction in recidivism compared to courts that do no modifications (Carey et al., 2012). The same is true of programs that make modifications based on self-review of program statistics (Carey et al., 2012).

Bexar County Process

- The Bexar County Felony Drug Court collects data electronically for participant tracking. These data include some information provided by the treatment providers. The tracking specialist and data analyst are responsible for entering this data into Buffalo, a proprietary database developed by the Buffalo City Court. Probation enters its own data into a separate system, including drug testing information.
- The BCFDC previously started an evaluation; however, it was unable to see completion. Through the SAMHSA Enhancement grant, the program was originally working with Our Lady of the Lake University to obtain a full process, outcome, and cost evaluation. However, during year 2 of the grant, NPC Research took over this evaluation. The report contains an updated process evaluation to the 10 Key Component Process Report completed in 2010 as well as an outcome and cost evaluation.

Commendations

The program shares evaluation and assessment results. The BCFDC team members
were receptive to the 2010 process evaluation and immediately disseminated and discussed commendations and recommendation. Many recommendations have been addressed.

Suggestions/Recommendations

- Review methods of data collection. The drug court team should continue to accumulate and analyze data about the drug court participants and use it for program reviews and planning, such as to inform the team about the types of participants who are most and least successful in the program. While the team currently uses two separate systems, it might be beneficial to move to one system that collects data on participants from all participating agencies.
- Obtain technical assistance to assist with the evaluation design and process. Because the current evaluator has no experience in drug courts or cost-benefit studies, it would be beneficial for her to obtain some assistance in developing a drug court evaluation design and methods for cost-benefit analysis from an experienced drug court and cost evaluator.
 - o **2013 Update:** The original evaluator was replaced by NPC Research in year 2.

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

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) and Carey et al. (2012) found that drug court programs requiring all new hires to complete formal training or orientation, and requiring *all* drug court team members to attend regular trainings were associated with higher graduation rates and greater cost savings due to lower recidivism.

Bexar County Process

- New drug court staff members are trained on the drug court model before or soon after starting work. In addition to on-the-job training, the entire drug court team has received training or education specifically on the drug court model. Team members have attended national and regional conferences.
- Drug court staff has received training specifically about the target population. They have also received training on strength-based philosophy and practices. The team brings new information on drug court practices including drug addiction and treatment to staff meetings.
- Drug court team members have had training specifically in the use of rewards and sanctions to modify the behavior of drug court participants.
- Drug court team members have received trainings specific related to their roles on the drug court team.
- Through the SAMHSA Enhancement grant, the drug court invested in more team training and technical assistance. They have attended conferences and trainings all over the country including many of the annual conferences held by the National Association of Drug Court Professionals (NADCP).

Commendations

• The BCFDC invests in regular training. The BCFDC has engaged in a large amount of training for staff and is commended on their dedication to educating team members on a regular basis. Training has been linked to greater reductions in recidivism (Carey et al., 2008, 2012). In addition to training team members as a regular part of their drug court process, the program is continually investing in updated training and technical assistance, specifically funded by the SAMHSA grant.

Suggestions/Recommendations

- Continue training all team members. The program should continue to ensure that *all* drug court staff members, including treatment providers, receive training about the drug court model, their role in the drug 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.
 - 2013 Update Successfully Implemented: The team continues to send new members as well as established members of the team to trainings and conferences as funding is available. The effort and importance placed on training is clear in the BCFDC program.



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

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 participants 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. (2011) 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.

Bexar County Process

- The drug court 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 employment assistance/job training, housing assistance and educational services.
- The drug court reported that representatives from community agencies work regularly with drug court participants.

Suggestions/Recommendations

- Implement a drug court steering committee. As stated under Key Component #1, the BCFDC is working on implementing a steering committee to meet regularly (we suggest quarterly) for the purpose of discussing and making decisions about drug court policy issues, promote understanding of each team member's role, and allow the team to become united on drug court goals. Committee members would include representatives from administration and off-site treatment and all drug court team members. In addition, including representatives from other community agencies, representatives of the business community and other interested groups in this committee could result in expanded understanding of and community support for the program, and may result in additional services and facilities for the program.
 - 2013 Update: Though the program worked to develop a regular steering committee, the committee has not been maintained.

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 provides a sample of drug court incentive and sanction guidelines. Appendix C provides a summary of data elements being collected by the FJDDC, and a list of data elements that programs should collect for case management, self-monitoring and evaluation. Other important and useful resources for drug courts are available at the National Drug Court Resource Center's Web site: http://www.ndcrc.org.

OUTCOME EVALUATION

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 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, and spending more time on probation and in jail?

In this evaluation both short and long-term outcomes were assessed. Outcome measures examined include graduation rates and what participant characteristics are associated with successful completion of the program, whether drug court participants reduced their drug use, and whether drug court participants were re-arrested less often than similar individuals who did not participate in drug court. Lastly, drug court participants entering the program before and after the SAMHSA Enhancement grant were assessed in order to determine whether the changes made to the program have affected the short and long term outcomes of the participants.

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. This study also included a cost-benefit evaluation and in the final section of the report, we present the methods and results of this cost evaluation.

Outcome Evaluation Methods

RESEARCH STRATEGY

The criminal justice system outcome that is most commonly used to measure the effectiveness of drug courts is the recidivism of drug court participants after they begin drug court programs. Recidivism is defined in this study as any new arrest excluding minor traffic citations or infractions. NPC Research identified a sample of participants who entered the BCFDC between January 2009 and December 2011, after the enhancement grant was implemented. This time frame allowed for the availability of at least 12 months (and up to 3 years) of recidivism data post-program entry for all program participants.

A comparison group was identified from a list of arrests for individuals arrested on a drug court eligible charge who have appropriate criminal histories (as defined by the legal eligibility criteria of the program) as well as other factors that would have made them eligible for drug court. These individuals did not come to the attention of the drug court team for various reasons and therefore were never offered drug court. The full comparison group selection process is described under the section on Sample Selection.

The drug court participants and comparison individuals were matched on age, gender, ethnicity, risk and need scores, and criminal history, including prior arrests and prior drug arrests. Both groups were examined through existing administrative databases for a period up to 3 years from



the date of drug court entry. For comparison group members, an equivalent "start date" was calculated by adding the mean number of days from the drug court eligible arrest to drug court entry for drug court participants, to the eligible arrest date of comparison group members⁴. The evaluation team utilized the data sources described below, to determine whether there was a difference in rearrests, incarceration and other outcomes of interest between the drug 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 court program is the rate of program participant graduation (completion of treatment). Therefore, the graduation rates for yearly cohorts were calculated for BCFDC and compared to the national average for drug court programs.

Any differences in demographics, criminal history, and program activities between drug 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 court program to increase successful outcomes.

Lastly, in order to review the possible effectiveness of the enhancements grant, a selected subset of the above short and long term outcomes were compared between two cohorts of participants, one entering prior to the grant, the other entering the program afterward. The first cohort selected was all participants entering the program between January 2007 and December 2008. The second cohort included those participants entering between January 2009 and December 2011. These cohorts were analyzed to see if differences occurred in recidivism, graduation, and program population characteristics.

OUTCOME/IMPACT STUDY QUESTIONS

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

- Does participation in drug court reduce recidivism for those individuals compared to traditional court processing?
- Does participation in drug 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 (e.g., graduation, lower recidivism)?
- Has the implementation of new practices due to the SAMHSA Enhancement grant improved participant short and long term outcomes?

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 BCFDC data. Once all data were gathered on the

⁴ Due to the large number of days between arrest and drug court entry as well as the large range in the number of days, multiple proxies were used, based on entry arrest date. For each 6-month interval of arrest dates, the mean number of days from arrest to entry was calculated for program participants and added to the comparison group individuals who were arrested in corresponding timeframes.

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. Bexar County Felony Drug Court Evaluation Data Sources

Database	Source	Examples of Variables
Buffalo Drug Court Access Database	Bexar County Felony Drug Court	For drug court participants only: Demographics, dates of entry and exit, discharge status
Department of Criminal Justice (DCJ)	Texas Department of Criminal Justice (TDCJ)	Prison entry and exit dates
Criminal Justice Information System (CJIS)	Bexar County Information Technology Department	Incident dates (arrests) and charges; jail entry and exit dates
Corrections Software Solutions (CSS)	Bexar County Community Supervision & Corrections: Adult Probation Department (CSCD)	Probation entry and exit dates; drug testing dates and results; demographics, risk and need scores

Buffalo Drug Court Access Database

In 2007, the BCFDC purchased the Buffalo Drug Court program, an Access-based database originally designed for the Buffalo City Court in Buffalo, New York. It was designed for drug court programs and has many case management functionalities available. The BCFDC primarily uses it to capture participant information at entry (i.e., demographics, drug of choice, past history of abuse, etc.), program information (i.e., entry and exit dates, status), and important court hearings or events (i.e., phase advancements).

Department of Criminal Justice (TDCJ)

The TDCJ database contains prison incarceration including entry and exit dates. These data were used to examine participant and comparison group time in prison and related costs.

Criminal Justice Information System (CJIS)

CJIS is a county data management system that stores Bexar County arrest, court, and jail data. It is valuable for demographics, key arrest dates, and jail bookings as well as criminal justice recidivism information that include charges for all types of arrest. These data were used for criminal justice recidivism analyses and related costs.

Corrections Software Solutions (CSS)

CSS is a statewide data management system that stores Bexar County probation data. It is valuable for demographics, risk and need assessments, time on probation, and drug testing. These data were used for determining a matched comparison group as well as drug testing analyses and related costs.



SAMPLE SELECTION

As described above, a selection was made of two cohorts of individuals who had participated in drug court and a sample of individuals who had not (for the comparison group). The following is a detailed description of the selection of these three groups.

Bexar County Drug Court Participant Sample

NPC selected the total number of participants who entered BCFDC between January 2009 and December 2011. This time interval was chosen to capture the time period after the implementation of new practices due to the SAMHSA enhancement grant and to allow at least 12 months and up to 36 months of follow-up for every participant post drug court entry. For this time period, there were 283 drug court participants who began the program. This number includes 139 graduates and 97 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.

Although the program has been in operation for much longer, participants entering between 2009 and 2011 were selected to review the outcomes specific to the cohort of participants potentially benefitting from the SAMHSA Enhancement grant received by the program in 2009. This grant also included funds for this evaluation. Only those entering during this time period were matched to the comparison group.

Comparison Group

A potential comparison group was identified from a list of arrests for individuals who were arrested on a drug court-eligible charge between January 2001 and December 2011. This pool of eligible comparison individuals were then matched using propensity scores on age, gender, ethnicity, risk and need scores, and criminal history, including prior arrests as well as prior drug, person and property arrests. The groups were also matched by eligible arrest date, so that historical time periods are the same for both groups and 12 to 36 months of outcome time is available for both groups in similar proportions. The final match resulted in a comparison group of 558 individuals with no significant differences in the matching criteria (see Table 2). The variables used for matching, with the exception of eligible arrest date, were also controlled for in the subsequent analyses as appropriate.

Bexar County Drug Court Historical Participant Cohort

In order to review any changes that might have occurred after the enhancement grant, an additional group of BCFDC participants were identified. These participants entered between January 2007 and December 2008. This group included 202 drug court participants (115 graduates and 83 nongraduates). While this cohort is used in a pre/post model to describe the program population and its outcomes in relation to the SAMHSA Enhancement grant, it is not used in the analyses including the matched comparison group.

DATA ANALYSES

Once all data were gathered on the study participants, the data were compiled and cleaned and moved into SPSS 19.0 for statistical analysis. The analyses used to answer specific questions are described below.

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

Independent sample t-tests and univariate analysis of covariance (ANCOVA) were performed to compare the mean number of re-arrests for all drug court participants with the comparison group for each year up to 3 years after drug court start date (or an equivalent date for the comparison group). Means generated by univariate analysis were adjusted in the analysis based on gender, age at program entry (or equivalent in the comparison group), race/ethnicity, risk and need scores, and number of prior arrests. 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 court, may have terminated from the program and are therefore not equivalent to drug court graduates.

In addition, crosstabs were run to examine differences in recidivism rate (the number/percentage of individuals re-arrested at least once during the specified time period) between drug court and the comparison group for each year up to 3 years following program entry (or an equivalent date for the comparison group). Chi-square analyses were used to identify any significant differences in re-arrest rates between drug court and comparison group participants.

A logistic regression was used to determine if differences between drug court participants and the comparison group were significant over and above any differences due to gender, age, race/ethnicity, risk and need scores, and criminal history (number of arrests in the 2 years prior to drug court start).

2. Does participation in drug court reduce levels of substance abuse?

Drug testing results were made available in the administrative database for all drug court participants and the comparison group. Independent sample t-tests and univariate analysis of covariance (ANCOVA) were performed to compare the average rate of positive drug tests for all drug court participants with the comparison group for each 3-month interval after drug court start date (or an equivalent date for the comparison group) for up to 1 year. As many members of the comparison group received no tests while on probation, only those who received at least 1 test during each interval were used to calculate the rate of positives. Means generated by univariate analysis were adjusted in the analysis based on gender, age at program entry (or equivalent in the comparison group), ethnicity, risk and need scores, and number of prior arrests. 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 court, may have terminated from the program and are therefore not equivalent to drug court graduates.

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 court and comparison group for new drug charges may approximate the difference in the two groups for actual drug use.

Independent sample t-tests and univariate analysis of covariance (ANCOVA) were performed to compare the mean number of drug re-arrests of all drug court participants with the comparison group for each year up to 3 years after drug court participation. Means generated by univariate analysis were adjusted based on (controlling for) gender, age at program entry (or equivalent in

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⁵ Time at risk is NOT controlled for in the reported results 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.



the comparison group), ethnicity, risk and need scores, and number of prior arrests. As explained above, the mean for graduates is included for reference but should not be compared directly with the comparison group.

3. 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 spent 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 Bexar County graduation rate is included for all participants, by entry year, from January 2007 to December 2011. The average graduation rate (for participants entering between 2007 and 2010, to allow for enough time to complete the program) is compared to the national average for drug court graduation rates 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 BCFDC program between January 2007 and December 2011, by drug court entry year, and have been successfully discharged from the 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.

4. 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 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 court completion, chi-square and independent samples t-tests were performed to identify which factors were significantly associated with program completion (graduation). 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 re-arrested following drug court entry. Chi-square and independent samples t-test were performed to identify which factors were significantly associated with recidivism. A logistic regression was used including all variables in the model to determine if any factors were significantly related to recidivism above and beyond the other factors.

5. Has the implementation of new practices due to the SAMHSA Enhancement grant improved participant short and long term outcomes?

In 2009, the Bexar County Felony Drug Court (BCFDC) received a program enhancement grant from the Substance Abuse and Mental Health Services Administration (SAMHSA). The program is using this enhancement grant in working towards three goals: 1) obtaining "on-demand" residential beds intended to treat 50 participants each year, 2) receiving training and technical assistance to improve the program, and 3) conducting a program evaluation including process, outcome and cost components.

In order to evaluate the possible effects of the SAMHSA Enhancement Grant, participants entering the program in 2007 and 2008, prior to the grant, were compared to participants entering the program after the grant was received, those entering between 2009 and 2011. Participants in the two cohorts were compared to determine if there were any significant changes in the population characteristics (e.g., demographics and risk levels) before and after the SAMHSA Enhancement grant. Graduation rates for both cohorts were reviewed and independent sample t-tests and chi-square analyses were used to determine differences between the groups.

In addition, re-arrest rates for both cohorts were reviewed to determine if long-term outcomes differed significantly before and after the SAMHSA Enhancement grant was received. Independent sample t-tests and univariate analysis of covariance (ANCOVA) were performed to compare the mean number of re-arrests for all drug court participants entering between 2007-2008 with all participants entering between 2009-2011 for each year up to 3 years after drug court start date. Means generated by univariate analysis were adjusted in the analysis based on gender, age at program entry, ethnicity, risk and need scores, and number of prior arrests.



Outcome Evaluation Results

Table 2 provides the demographics for the study sample of drug court participants (all participants who entered from 2009 to 2011) and the comparison group. Propensity score matching included the characteristics on the top of the table, and showed no imbalances. Additional independent samples t-tests and chi-square analyses confirmed no significant differences between groups on the characteristics listed in the first half of the table. Additional characteristics, not used in matching due to lack of availability of consistent data in the comparison group, are listed in the second half of the table.

Table 2. Drug Court Participant and Comparison Group Characteristics

	BCFDC	Comparison
	Participants	Group
	n = 283*	n = 558*
Matched Characteristics		
Gender		
Male	51%	53%
Female	49%	47%
Race/Ethnicity		
Hispanic/ Latino	55%	56%
White	25%	25%
Black/African American	16%	16%
Other	4%	3%
Age at Entry Date		
Mean age in years	35	35
Range	17 - 82	18 - 72
Risk Assessment		
Mean score	17.5	16.6
Need Assessment		
Mean score	22.0	21.0
Prior Arrests ⁶		
Average number of arrests in the 2 years prior to program entry	1.69	1.60
Average number of person arrests in the 2 years prior to program entry	0.05	0.04

⁶ Prior arrests include any arrest occurring 2 years before drug court entry date (or an equivalent date for the comparison group). Eligible entry arrest is included if it falls within 2 years prior to entry.

Average number of property arrests in the 2 years prior to program entry	0.43	0.36
Average number of drug arrests in the 2 years prior to program entry	0.84	0.86
Average number of prostitution arrests in the 2 years prior to program entry	0.19	0.15
Additional Characteristics		
Education ⁷		
Less than high school	38%	
High school/GED or more	62%	
Marital Status ⁸		
Single ⁹	81%	
Married/Partnered	19%	
Drug of Choice ¹⁰		
Alcohol	56%	
Marijuana	51%	
Cocaine	45%	
Heroin	29%	
Methamphetamine	14%	
Prescription Drugs (Pills)	10%	
·	·	

^{*}Note: The N for each category may be smaller than the total group N due to missing data.

⁷ Education for program participants collected from Buffalo. All data from Buffalo is at program entry.

⁸ Marital status for program participants collected from Buffalo.

⁹ Includes never married, divorced, separated, and widowed

¹⁰ Numbers based on self-reported Buffalo data at drug court entry. Numbers do not add up to 100% as participants reported up to 3 drugs of choice.



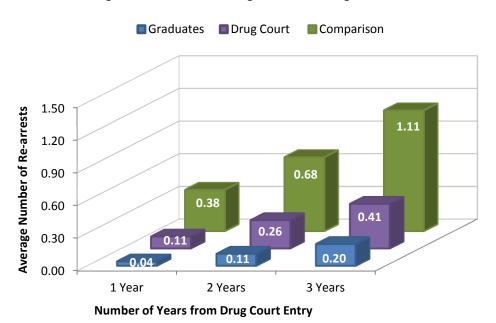
Research Question #1: Recidivism

Does participation in drug court reduce recidivism for those individuals compared to traditional court processing?

YES. Drug court participants were re-arrested significantly less often than the comparison group every year for 3 years from drug court entry (p < .001 at every time point).

Figure 1 illustrates the average number of cumulative re-arrests for each year up to 3 years after entering the drug court program for BCFDC graduates, all BCFDC participants, and the comparison group. The reported average number of re-arrests for all participants and the comparison group were adjusted for age, race/ethnicity, gender, risk and need scores, and prior arrests. Drug court participants had nearly 3 times fewer re-arrests each year than similar offenders who did not participate in the drug court.

Figure 1. Average Number of Cumulative Re-Arrests for Graduates, Drug Court Participants, and the Comparison Group Over 3 Years¹³



 $^{^{11}}$ Non-adjusted means are as follows: Drug Court -1 year: 0.12, 2 years: 0.29, and 3 years: 0.51; Comparison Group -1 year: 0.37, 2 years: 0.67, and 3 years: 1.08.

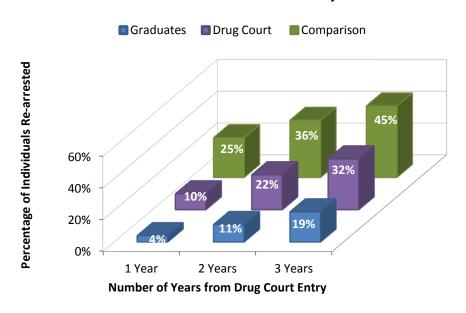
¹² While time at risk is not included in the reported ANCOVA model, the average number of re-arrests for each year was reviewed with incarceration time included as a covariate. The findings were similar. At every year, the drug court participants were significantly less likely to be re-arrested. Adjusted means: Drug Court -1 year: 0.12, 2 years: 0.29, and 3 years: 0.45; Comparison Group -1 year: 0.37, 2 years: 0.67, and 3 years: 1.10.

¹³ N sizes by group and time period are as follows: 1 year: Graduates n = 139, All Drug Court Participants n = 279,

 $^{^{13}}$ N sizes by group and time period are as follows: 1 year: Graduates n = 139, All Drug Court Participants n = 279, Comparison Group n = 558; 2 Years: Graduates n = 116, All Drug Court Participants n = 206, Comparison Group n = 534; 3 Years: Graduates n = 64, All Drug Court Participants n = 103, Comparison Group n = 358.

Recidivism rates, the percent of individuals that were re-arrested at least once during the time period, were also significantly (p < .001 for 1 and 2 years; p < .05 for 3 years) lower for drug court participants every year for 3 years from drug court entry (see Figure 2). In addition, when reviewing recidivism rate in a logistic regression, participation in drug court was shown to affect recidivism above and beyond other characteristics including race/ethnicity, age, gender, risk and need scores, and prior criminality (p < .001).

Figure 2. Percent of Graduates, Drug Court Participants, and the Comparison Group Who Were Re-Arrested Over 3 years¹⁴



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. Figure 3 displays the adjusted means for each of these arrests at 3 years after entry. Drug court participants were re-arrested significantly less often for all types of arrests (p < .001 for drug arrests; p < .05 for all other charge types). Re-arrests for drug court participants for each type of arrest was less than half the number of arrests for the comparison group. Drug court participants had five times fewer drug arrests, and four times fewer person arrests than the comparison group. These findings demonstrate that involvement in the Bexar County Felony Drug Court program, regardless of exit status, is associated with a reduction in criminality as well as greater public safety.

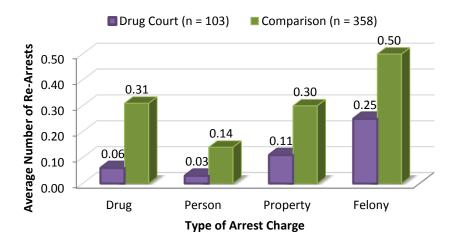
When an individual received more than one charge per arrest, a single arrest could be coded as both a person and drug crime. Therefore, the numbers in Figure 3 do not reflect the total average arrests in Figure 1.

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¹⁴ N sizes by group and time period are as follows: 1 year: Graduates n = 139, All Drug Court Participants n = 279, Comparison Group n = 558; 2 Years: Graduates n = 116, All Drug Court Participants n = 206, Comparison Group n = 534; 3 Years: Graduates n = 64, All Drug Court Participants n = 103, Comparison Group n = 358.



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



There has been some question about whether drug court programs, which redirect offenders from incarceration into treatment in the community, endanger public safety. These findings 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 BCFDC is successfully accomplishing two of their key goals, a decrease in recidivism and an increase in public safety.

Research Question #2: Reducing Substance Abuse

Does participation in drug court reduce levels of substance abuse?

YES. Drug court participants reduced the number of positive drug tests over the first year of participation in the program and demonstrated smaller numbers of drug related re-arrests up to 3 years after drug court entry.

For objective measures of substance use, both drug test results and new arrests with drug charges were analyzed between drug court participants and the comparison group. As not all probationers in the comparison group received drug testing, only those who had at least one drug test were included in the analysis. Only 95 (17%) of the 558 comparison group individuals had at least one UA administered within 1 year of the identified comparable entry date. Most drug court participants, 220 (78%) of 283 were still in the program and included in this analysis at one year from drug court entry. Figure 4 below shows the rate of positive tests for drug court participants, graduates, and the comparison group in 3-month intervals from program entry (or an equivalent date for the comparison group).

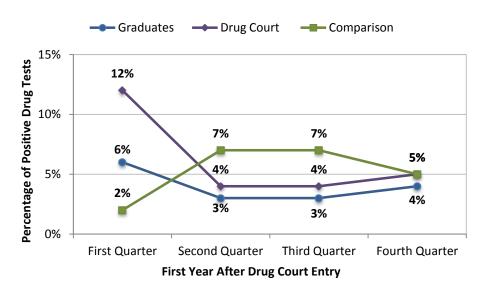


Figure 4. Average Percentage of Positive Drug Tests Over First Year – Drug Court Versus Comparison¹⁶

In addition to drug test results, by comparing the number of re-arrests for drug charges, we can observe differences between drug court participants and comparison group over time and reasonably suppose that the proportional difference in number of re-arrests is similar to the proportional difference in drug use. Figure 5 reports average number of re-arrests for all participants and the comparison group which were adjusted ¹⁷ for age, ethnicity (White/Non-white, Latino/Non-Latino), gender, and prior arrests. ¹⁸ 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).

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 $^{^{16}}$ N sizes by group and time period are as follows: First Quarter: Graduates n = 125, All Drug Court Participants n = 216, Comparison Group n = 95; Second Quarter: Graduates n = 125, All Drug Court Participants n = 217, Comparison Group n = 95; Third Quarter: Graduates n = 127, All Drug Court Participants n = 219, Comparison Group n = 95; Fourth Quarter: Graduates n = 127, All Drug Court Participants n = 218, Comparison Group n = 95.

¹⁷ Non-adjusted means are as follows: Drug Court – 1 year: 0.04, 2 years: 0.06, and 3 years: 0.09; Comparison Group – 1 year: 0.11, 2 years: 0.20, and 3 years: 0.30.

¹⁸ While time at risk is not included in the reported ANCOVA model, the average number of drug re-arrests for each year was reviewed with incarceration time included as a covariate. At every year, the drug court participants were significantly less likely to be re-arrested for drug charges. Adjusted means: Drug Court – 1 year: 0.03, 2 years: 0.06, and 3 years: 0.06; Comparison Group – 1 year: 0.12, 2 years: 0.20, and 3 years: 0.31.



Figure 5. Drug Court Participants Had Significantly Fewer Re-arrests With Drug Charges Every Year for 3 Years¹⁹

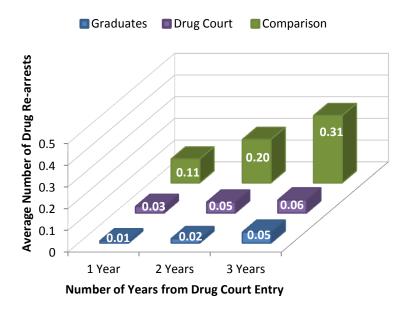


Figure 5 shows that the number of re-arrests with drug charges for drug court participants is roughly one quarter that of comparison group members at every time point (drug court participants had five time fewer re-arrests with drug charges at 3 years post entry), which is significantly less often than the comparison group (p < .001 at every time point). It is interesting to note that all participants, regardless of whether they graduated, had similar numbers of drug re-arrests 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 BCFDC 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?

YES. The average graduation rate for BCFDC is 60%, which is 10% higher than the national average.

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 by being unsuccessfully discharged. Graduation rate was calculated for each entry year from 2007 to 2011. The program's graduation rate for all participants entering between January 2007 and December 2010²⁰ is 60% (217 of out

 $^{^{19}}$ N sizes by group and time period are as follows: 1 year: Graduates n = 139, All Drug Court Participants n = 279, Comparison Group n = 558; 2 Years: Graduates n = 116, All Drug Court Participants n = 206, Comparison Group n = 534; 3 Years: Graduates n = 64, All Drug Court Participants n = 103, Comparison Group n = 358.

²⁰ 33% of participants entering the program in 2011 were still active at the time of program data receipt; therefore 2011 was not included in the calculation of average graduation rate.

of a total of 363 participants²¹). Table 3 below shows graduation rate by entry year. On average, the graduation rate is substantially higher than the national average graduation rate of 50% (Cooper, 2000).

				-	
Program Entry Year	2007	2008	2009	2010	2011
	n = 109	n = 93	n = 74	n = 100	n = 111
Graduates	52%	62%	64%	55%	34%
Non-Graduates	46%	36%	36%	36%	31%
Other Exit	2%	2%	0%	3%	2%
Actives	0%	0%	0%	6%	33%

Table 3. BCFDC Completion Status by Entry Year

Although the BCFDC is doing very well in graduating 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 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. To successfully increase graduation rates, drug court teams must consider the challenges participants face in meeting program requirements, 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 BCFDC program and have graduated from the program. The minimal requirements of the BCFDC would theoretically allow for graduation at approximately 18 months from the time of entry to graduation. The average length of stay in drug court for all participants, both graduates and non-graduates) was 494 days (approximately 16 months). Graduates spent an average of 548 days in the program or about 18 months, ranging from 9 months to 3 years in the program. Approximately 25% graduated within about 15 months, and 50% graduated within 18 months of program entry. Participants who did not graduate spent, on average, 14 months in the program.

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²¹ There were 376 participants who entered between 2007 and 2010, 6 were still active at the time of program data receipt and 7 had exited the program for reason others than graduation or unsuccessful termination (i.e., transferred to another location, died while in the program, etc.) and are therefore not included in the analysis of graduation rate.



Research Question #4: Predictors of Program Success

Are there participant characteristics that predict program success?

YES. Graduates were significantly more likely to be older, lower risk and need, employed at program entry, and have at least a high school or GED education at program entry. Graduates were also significantly more like to identify methamphetamines as a drug of choice, and have fewer arrests in the two years before drug 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 2009 through July 2011. Of the 283 people who entered the program during that time period, 97 (34%) were unsuccessfully discharged from the program and 139 (49%) had graduated.

Analyses were performed to determine if there were any demographic or criminal history characteristics of participants that were related to successful drug court completion, including gender, age, ethnicity, drug of choice, length of time in the program, drug tests, jail sanctions and number of arrests in the 2 years before drug court entry. Table 4 shows the results for graduates and non-graduates. Characteristics that differ significantly²² between graduates and non-graduates are bolded.

Table 4. Characteristics of BCFDC Graduates Compared to Non-Graduates: Demographics

	Graduates	Non-Graduates
	n = 139*	n = 97*
Gender		
Male	53%	51%
Female	47%	49%
Race/Ethnicity		
Hispanic/ Latino	51%	60%
White	29%	20%
Black/African American	16%	16%
Other	4%	4%
Age at Entry Date		
Mean age in years	37	31
Risk Assessment		
Mean score	15.4	19.7
Need Assessment		
Mean score	19.3	24.1

⁽p < .05)

	Graduates n = 139*	Non-Graduates n = 97*
Education		
Less than high school	16%	52%
High school/GED or more	84%	48%
Employment		
Employed at program entry	45%	27%
Marital Status		
Single ²³	81%	84%
Married/Partnered	19%	16%

^{*}Note: The N for each category may be smaller than the total group N due to missing data.

Table 4 illustrates that graduates were significantly more likely to be older, have lower risk and need scores, have completed high school or a GED, and be employed at program entry.

Older participants commonly do better in drug court programs. The BCFDC 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.

Table 5. Characteristics of BCFDC Graduates Compared to Non-Graduates: **Prior Criminality and Substance Abuse**

	Graduates $n = 139*$	Non-Graduates $n = 97*$
Prior Arrests ²⁴		
Average number of arrests in the 2 years prior to program entry	1.36	2.19
Average number of person arrests in the 2 years prior to program entry	0.02	0.06
Average number of property arrests in the 2 years prior to program entry	0.31	0.66
Average number of drug arrests in the 2 years prior to program entry	0.80	0.78
Average number of prostitution arrests in the 2 years prior to program entry	0.09	0.39

 ²³ Includes never married, divorced, separated, and widowed
 ²⁴ Prior arrests include any arrest occurring 2 years before drug court entry date (or an equivalent date for the comparison group). Eligible entry arrest is included if it falls within 2 years prior to entry.



	Graduates n = 139*	Non-Graduates n = 97*
Substance Use History		
Drug of Choice ²⁵		
Alcohol	60%	51%
Marijuana	48%	56%
Cocaine	45%	45%
Heroin	20%	41%
Methamphetamine	18%	8%
Prescription Drugs (Pills)	7%	16%
First used drug at 16 years or younger	45%	56%
Reported addiction severity at program entry		
No Problem	7%	7%
Mild	26%	22%
Moderate	29%	40%
Severe	38%	31%
Substance abuse in family	13%	13%
Treatment		
In treatment at program entry	19%	16%
Previous treatment received	63%	64%
Trauma		
History of abuse	31%	34%

^{*}Note: The N for each category may be smaller than the total group N due to missing data.

Graduates have fewer crimes in the 2 years before drug court entry (particularly property and prostitution related offenses).Graduates were also more likely to report methamphetamines as their primary drug of choice, while non-graduates were more likely to report heroin and prescription drugs.

As described above, participants reporting heroin or prescription drugs as a drug of choice were significantly less likely to graduate suggesting that the program may need to consider some additional services the specific needs of opiate users. The use of medication assisted treatment (MAT) with opiate users in particular is an evidence based practice. Naltraxone (the pill form) and Vivitrol (a once per month injection) have been shown to significantly improve outcomes for opiate users and have been approved by the FDA.

 $^{^{25}}$ Numbers based on self-reported Buffalo data at drug court entry. Numbers do not add up to 100% as participants reported up to three drugs of choice.

Table 6. Characteristics of BCFDC Graduates Compared to Non-Graduates:

Program Activities

	Graduates n = 139*	Non-Graduates n = 97*
Program Length of Stay		
Average number of days in program	548	427
Drug Testing		
Average number of UAs administered during first 3 months in program	8	5
Average number of UAs administered during first year in program ²⁶	40	25
Jail Days		
Average number of days spent in jail for sanctions while in program	9	18
Average number of days spent in jail for sanctions during first year in program ²⁷	6	15
Average number of days spent in jail while awaiting residential or other treatment placement while in program	5	43
Average number of days spent in jail while awaiting residential or other treatment placement during first 3 months in program	3	10

^{*}Note: The N for each category may be smaller than the total group N due to missing data.

Graduates spend longer in the program, have more drug tests, and fewer days in jail. Even when controlling for number of days in the program, graduates had significantly more drug tests and spent less time in jail for sanctions and while awaiting placement in treatment. 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. Research consistently shows that jail should be used sparingly (e.g., Carey et al., 2012).

After reviewing the characteristics listed in Tables 4, 5, and 6, all significant factors were entered into a logistic regression, ²⁸ the characteristics that were most strongly tied to graduation were lower risk scores, older age at entry, fewer days spent in jail awaiting treatment during the first 3 months of the program, high school or GED completion, and not identifying pills as a drug of choice.

²⁶ For those who were in the program at least 1 year. Graduates, n=127; terminated, n=51.

For those who were in the program at least 1 year. Graduates, n= 127; terminated, n= 51.

²⁸ Logistic Regression: p < .001



Characteristics Related to Recidivism

Another indicator of program success is whether or not participants are being rearrested. All program participants were reviewed to determine whether any factors or characteristics were related to being re-arrested within 2 years after program entry. Those who avoided re-arrest were more likely²⁹ to be older, have completed some higher education, received fewer days in jail for sanctions and awaiting treatment placement, had fewer misdemeanor arrests 2 years prior to program entry, and to have graduated the program. The two factors most strongly related ³⁰ to avoiding rearrest were fewer days in jail for sanctions during the first year in the program and graduating the program. This suggests, once again, that jail is not effective at improving participant outcomes. Interestingly, risk and need scores were not significantly related to re-arrests, indicating that the program is successful in reducing recidivism in higher risk individuals.

Research Question #5: SAMHSA Enhancement Grant Success

Has the implementation of new practices due to the SAMHSA Enhancement grant improved participant short and long-term outcomes?

YES. Participants entering the program after the SAMHSA enhancements were implemented (2009 an afterward) were re-arrested significantly less frequently than participants entering in 2007 and 2008.

Analyses were performed to determine if there were any demographic or criminal history characteristics of participants that were associated the each cohort (before and after the implementation of the enhancement grant) including gender, age, ethnicity, drug of choice, length of time in the program, jail sanctions and number of arrests in the 2 years before drug court entry. Table 5 highlights the significant differences between the two groups. Characteristics that differ significantly between 2007-2008 and 2009-2011 are bolded.

Table 7. BCFDC Program Characteristics by Entry Year

	2007-2008 n = 202*	2009-2011 n = 283*
Age at Entry Date		
Mean age in years	31	35
Program Length of Stay		
Average number of days in program	595	494
Graduation Rate		
Percent successfully completed	58%	62%³²

²⁹ Chi square and t-tests performed (p < .05)

 $^{^{30}}$ Logistic Regression: p = .001

⁽p < .05)

³² Participants entering in 2011 not included in graduation rate as many are still active.

	2007-2008 n = 202*	2009-2011 n = 283*
Jail Days		
Average number of days spent in jail while awaiting residential or other treatment placement while in program	23	20
Average number of days spent in jail while awaiting residential or other treatment placement during first 3 months in program	7	4
Risk Assessment		
Mean score	12.6	17.5
Need Assessment		
Mean score	17.2	22.0
Substance Use History		
Drug of Choice ³³		
Alcohol	39%	57%
Marijuana	39%	51%
Cocaine	56%	47%
Heroin	22%	28%
Methamphetamine	15%	15%
Prescription Drugs (Pills)	1%	10%
Reported addiction severity at program entry		
No Problem	13%	7%
Mild	29%	25%
Moderate	36%	33%
Severe	22%	35%
Trauma		
History of abuse	24%	33%

^{*}Note: The N for each category may be smaller than the total group N due to missing data.

In addition to an older population with higher risk and need scores, the later cohort was more likely to report a serious addiction problem and history of abuse. The drugs of choice now include more individuals who identify alcohol, marijuana, and prescription drugs as one of their drugs of choice. One item to note is graduation rate, which has not significantly changed since the enhancements have been implemented.

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 $^{^{33}}$ Numbers based on self-reported Buffalo data at drug court entry. Numbers do not add up to 100% as participants reported up to three drugs of choice.



A key finding to note is that, while the SAMSHA Enhancement grant was specifically focused on placing participants into residential treatment sooner, there was not a significant decline in the number of days participants spent in jail awaiting placement. Though it is important to note that during the first 3 months, participants are, on average, waiting less than a week to be placed into treatment, suggesting a quick turnaround.

Figure 6 illustrates the average number of cumulative re-arrests for each year up to 3 years after entering the drug court program for BCFDC participants entering from 2007 to 2008 and those entering from 2009 to 2011. The reported average numbers of re-arrests for participants in both cohorts were adjusted³⁴ for age, race/ethnicity (White/Non-white, Latino/Non-Latino), gender, and prior arrests.

Figure 6. Percent of Graduates, Drug court Participants, and the Comparison Group
Who Were Re-Arrested Over 3 Years³⁵

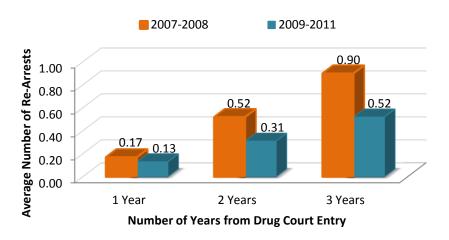


Figure 6 demonstrates that while participants who entered the program after the SAMHSA enhancements had similar re-arrests 1 year after entry, they had significantly lower number of rearrests compared to the participants who entered in the years before the enhancement at 2 and 3 years post entry (p < .05). This implies two things: 1) That the enhancements implemented by the drug court program were successful in treating the needs of their participants and 2) That the drug court model implemented by this program is appropriate for successfully treating high-risk, high-need individuals. This last point is particularly significant at this time, as there is a strong movement at the national level for drug courts to focus on a high-risk, high-need population (see NADCP National Standards, 2013) and this finding supports the principle that the drug court model is most appropriate for this population.

 $^{^{34}}$ Non-adjusted means are as follows: 2007-2008-1 year: 0.19, 2 years: 0.54, and 3 years: 0.90; 2009-2011-1 year: 0.12, 2 years: 0.29, and 3 years: 0.51.

year: 0.12, 2 years: 0.29, and 3 years: 0.51. 35 N sizes by group and time period are as follows: 1 year: 2007-2008 n = 202, 2009-2011 n = 279; 2 Years: 2007-2008 n = 202, 2009-2011 n = 206; 3 Years: 2007-2008 n = 202, 2009-2011 n = 103.

COST EVALUATION

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 courts would determine the cost of the drug 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. This evaluation was a *cost-benefit* analysis.

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

- 1. How much does the BCFDC program cost?
- 2. What is the cost impact on the criminal justice system of sending offenders through drug court compared to traditional court processing?
- 3. What is the impact on the criminal justice system of the time between the eligible arrest and drug court entry (in terms of arrests and jail)?

This section of the report describes the research design and methodology used for the cost analysis of the BCFDC 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 courts, when a drug 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 court, which involves complex interactions among multiple taxpayer-funded organizations.

³⁶ See drug court cost-benefit studies at http://www.npcresearch.com/projects drug courts.php



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).

The central core of the cost-to-taxpayer approach in calculating benefits (avoided costs) for drug 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 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 court program participation, it is necessary to determine what the participants' outcome costs would have been had they not participated in drug court. One of the best ways to do this is to compare the costs of outcomes for drug court participants to the outcome costs for similar individuals that were eligible for drug 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 8 lists each of these steps and the tasks involved. Step 1 (determining drug court process) was performed during site visits, through analysis of court and drug 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 court. Step 5 (determining the cost of the resources) was performed through interviews with drug court and non-drug 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 court participant/comparison group individual. This was generally

reported as an average cost per person for the drug 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 court processing for each agency as well as outcome costs per agency.

The costs to the criminal justice system outside of the drug court program consist of those due to re-arrests, subsequent court cases, probation time, jail time, prison time, and victimizations. Program costs consist of all drug court sessions, case management, outpatient and residential drug treatment, UA drug tests, and jail sanctions.

Table 8. 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 www.npcresearch.com)
Step 2:	Identify the transactions that oc- cur 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 BCFDC 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 court sessions, case management, outpatient and residential drug treatment, UA drug 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 2013 dollars or were updated to fiscal year 2013 using the Consumer Price Index.

Program Transactions

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

- Bexar County Criminal District Court (Judge, Coordinator, Case Managers, Data Analyst, Tracking Specialist, and Drug Court Clerk);
- Bexar County Sheriff's Office (Court Security);
- Defense Attorneys (appointed private defense attorneys);
- Bexar County Community Supervision & Correction- Adult Probation (Probation Manager and Probation Officers);
- Elite Counseling (Counselor);
- Center for Health Care Services (Counselors and Mental Health Case Manager);
- Rosetta's Key Therapeutic Treatment Services (Counselors);
- Alpha Home, Inc. (Counselor);
- Lifetime Recovery (Counselor);
- House of Discipleship (Transitional Housing Director).

The cost of a *Drug 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 court session. This includes the direct costs of each drug 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 court appearance is \$83.62 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).³⁷

³⁷ 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.

Cost Evaluation

The agencies involved in case management are the Criminal District Court, Adult Probation, and treatment agencies. The daily cost of case management is \$5.83 per participant.

Drug Treatment for BCFDC participants is referred out to one of 11 treatment providers. Because detailed treatment usage data for each individual in our sample were not available from every treatment provider, a proxy (or estimate) for outpatient and residential drug treatment was used in this analysis based on the billing records of a subset of participants. The proxy is based on Substance Abuse and Mental Health Services Administration (SAMHSA) monthly drug treatment billing information for the subset of BCFDC participants over 3 years (2010-2011, 2011-2012, and 2012-2013). Average per participant billing for outpatient and residential treatment is \$746.74 per month. The information used to create the proxy for drug treatment costs were provided to NPC by the drug court coordinator. The drug treatment costs used in this analysis only include the costs to taxpayers. Treatment paid for by the individual or by private insurance was not included in the cost calculations.

Drug Testing is performed by Adult Probation and by the treatment agencies. The cost per UA test is \$7.00. Because BCFDC participants pay for their drug tests, drug testing costs were not included in the cost to the program. Drug testing costs were obtained from the drug 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 and includes staff, facilities, and support and overhead costs. The cost of jail is \$46.85 per day.

BCFDC participants pay a *Drug Court Fee* to probation which helps to offset the probation officers' salaries. The fee is \$1,000.00. The actual fee paid varies according to the participant's ability to pay, however, due to a lack of data on the exact amount of fees paid by each participant, for this analysis it was assumed that the full fee was paid.

Program Costs

Table 9 displays the unit cost per program related event, the number of events and the average cost *per individual* for each of the drug court events for program graduates and for all participants. The sum of these transactions is the total per participant cost of the drug court program. The table includes the average for drug court graduates (N=139) and for all drug court participants (N=241), 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.

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³⁸ Treatment billing information showing the monthly cost for outpatient treatment was available on 221 participants over a period of 3 years (61 participants in 2010-2011, 72 participants in 2011-2012, and 88 participants in 2012-2013).



Table 9. 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 Sessions	\$83.62	25.04	\$2,094	23.26	\$1,945
Case Management Days	\$5.83	548.43	\$3,197	494.37	\$2,882
Outpatient and Residential Treatment Months ³⁹	\$746.74	12.00	\$8,961	12.00	\$8,961
UA Drug Tests	\$ 7.00	69.58	\$487	53.28	\$373
Jail Sanction Days	\$46.85	8.55	\$401	12.48	\$585
Jail Days While Awaiting Residen- tial Treatment ⁴⁰	\$46.85	5.32	\$249	20.42	\$957
UA Drug Test Fees ⁴¹	N/A	N/A	(\$487)	N/A	(\$373)
Drug Court Fees ⁴²	N/A	N/A	(\$1,000)	N/A	(\$1,000)
TOTAL			\$13,902		\$14,330

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 \$14,330. The cost per graduate is \$13,902. The largest contributor to the cost of the program is outpatient and residential treatment (\$8,961). This amount is approximately midway within the range commonly seen by NPC for treatment costs nationally (e.g., see Carey et al., 2011; Carey & Waller, 2011). The second largest contributor to program costs is case management (\$2,882) followed by drug court sessions (\$1,945). That the largest contributor to program costs is drug treatment should come as no surprise, as the main purpose of drug courts is to engage participants into treatment and ensure that they stay engaged in treatment. Note that the cost for graduates is slightly less than participants in general, even though graduates spend a longer time in the program. This is due to additional jail costs for those who were terminated from the program. Another note of interest is that because participants pay

³⁹ The average monthly outpatient and residential drug treatment billing rate was multiplied by 12 months for both graduates and all participants as the average stay in the program was over a year for both groups. Program policy is that participants attend treatment for at least the first 3 phases of program, which typically takes at least 12 months. This means that the proxy used for outpatient and residential treatment is likely an underestimate of treatment costs. ⁴⁰ When a residential treatment bed is not available, BCFDC participants are sent to jail until a bed opens up.

⁴¹ BCFDC participants pay for their drug tests, so these costs were subtracted from the total cost per participant.

⁴² The drug court fees paid to probation are subtracted from the total cost per participant.

for their own drug testing and also pay a fee to the program, the program saves an average of \$1,373 in program costs per participant.

Program Costs per Agency

Another useful way to examine program costs is by agency. Table 10 displays the cost per drug court participant by agency for program graduates and for all participants.

Table 10. Program Costs per Participant by Agency

Agency	Avg. Cost per DC Graduate Per Person	Avg. Cost per DC Participant Per Person
Criminal District Court	\$2,236	\$2,043
Defense Attorney	\$59	\$55
Adult Probation ⁴³	\$825	\$655
Sheriff's Office	\$981	\$1,850
Treatment	\$9,801	\$9,727
TOTAL	\$13,902	\$14,330

Table 10 shows that the costs accruing to the treatment agencies (outpatient and residential treatment, case management, and drug court sessions) account for 68% of the total program cost per participant. The next largest cost (just 14%) is for the Criminal District Court due to case management and drug court sessions, followed by the Sheriff's Office (13%) for drug court sessions, jail sanctions, and jail days while awaiting residential treatment.

Program Costs Summary

In sum, the largest portion of BCFDC costs is due to outpatient and residential treatment (an average of \$8,961, or 63% of total costs). Case management (\$2,882 or 20% of total costs) and drug court sessions (\$1,945 or 14%) are also significant program costs. When program costs are evaluated by agency, the largest portion of costs accrues to treatment agencies (\$9,727 or 68% of total costs), followed by the Criminal District Court (\$2,043 or 14%) and the Sheriff's Office (\$1,850 or 13%). Since one of the key goals of drug courts is to get participants into treatment, these treatment costs demonstrate that this program is successfully reaching this goal.

⁴³ Note that the cost for Adult Probation includes a credit of \$1,000 from the participant drug court fee paid to probation to offset the probation officers' salaries.



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 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 criminal district court cases, probation time, jail 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 2013 dollars or were updated to fiscal year 2013 dollars using the Consumer Price Index.

The outcome cost analyses were based on a cohort of drug court participants and a matched comparison group of offenders who were eligible for the drug court program through their criminal history but who did not attend the program. These individuals were tracked through administrative data for 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 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 court participants included in the analysis had exited the program (graduated or were unsuccessful at completing the program).

The outcome costs experienced by drug 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 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 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 Bexar County Community Supervision and Corrections- Adult Probation Department, the Texas Department of Criminal Justice (including the Parole Division, the Bexar County Sheriff's Office, the Bexar County Criminal District Court, the Bexar County Criminal District Attorney, the Appointed Defense Attorneys, and the San Antonio Police Department. 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 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 tangible 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 court which found that for every dollar spent on the drug 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 San Antonio Police Department and the Bexar County Sheriff's Office (the two main arresting agencies in Bexar 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 **\$129.47**.

Criminal District Court Cases include those cases that are dismissed as well as those cases that result in arraignment and are adjudicated. Because they are the main agencies involved, court case costs in this analysis are shared among the Criminal District Court, the District Attorney, and the Appointed Defense Attorney. Using budget and caseload information obtained from the 2012 Bexar County Budget and from agency representatives, the cost of a Criminal District Court Case was found to be \$1,448.02.

Probation is provided by Adult Probation (a division of Bexar County Community Supervision and Corrections). The cost of probation was acquired from a representative of Community Supervision and Corrections, using budget and caseload information. The cost per person per day of probation is \$3.15.

Jail is provided by the Bexar County Sheriff's Office. The cost of jail was acquired from a representative of the Sheriff's Office and includes staff, facilities, and support and overhead costs. The cost of jail is \$46.85 per day.

Prison is provided by the Texas Department of Criminal Justice. The statewide cost per person per day of prison (found on the Department of Criminal Justice's website) was \$47.50 in 2010. Using the Consumer Price Index, this was updated to fiscal year 2013 dollars, or \$49.93.

Victimizations were calculated from the National Institute of Justice's *Victim Costs and Consequences: A New Look (1996)*. ⁴⁴ The costs were updated to fiscal year 2013 dollars using the

⁴⁴ 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 burglary, and motor vehicle theft for an estimated property crime cost. All costs were updated to fiscal year 2013 dollars using the consumer price index (CPI).



Consumer Price Index. *Property crimes* are \$13,281 per event and *person crimes* are \$43,024 per event.

Outcome Cost Results

Table 11 shows the average number of recidivism-related events per offender for drug court graduates, all drug court participants (regardless of graduation status) and the comparison group over 3 years.

Table 11. 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=64)	Drug Court Participants Per Person (n=103)	Comparison Group Per Person (n=358)
Re-Arrests	0.20	0.51	1.08
Criminal District Court Cases	0.20	0.51	1.08
Probation Days	196.09	177.36	334.23
Jail Days	9.33	39.47	55.04
Prison Days	3.55	80.87	106.58
Property Victimizations	0.08	0.13	0.29
Person Victimizations	0.00	0.05	0.14

Overall, as demonstrated in Table 11, drug court participants use fewer criminal justice system resources than the comparison group with fewer re-arrests, new court cases, days on probation, days in jail, and days in prison. Drug court participants also have fewer property and person victimizations than the comparison group.

Table 12 presents the outcome costs for each transaction for graduates, all drug court participants (graduates and terminated participants) and the comparison group.

Table 12. Recidivism (Outcome) Costs per Participant Over 3 Years

		Drug Court Graduates Per Person	Drug Court Participants Per Person	Comparison Group Per Person
Transaction	Unit Costs	(n=64)	(n=103)	(n=358)
Re-Arrests	\$129.47	\$26	\$66	\$140
Criminal District Court Cases	\$1,448.02	\$290	\$738	\$1,564
Probation Days	\$3.15	\$618	\$559	\$1,053
Jail Days	\$46.85	\$437	\$1,849	\$2,579
Prison Days	\$49.93	\$177	\$4,038	\$5,322
SUBTOTAL		\$1,548	\$7,250	\$10,658
Property Victimizations	\$13,281	\$1,062	\$1,727	\$3,851
Person Victimizations	\$43,024	\$0	\$2,151	\$6,023
TOTAL		\$2,610	\$11,128	\$20,532

Because victimizations were not calculated using the TICA methodology, the cost results are presented first without, then with, victimization costs. Table 12 shows that the difference in total outcome cost between the drug court participants and the comparison group is \$3,408 per participant. When costs due to victimizations are included, the difference increases to \$9,404 per participant. This difference is the benefit, or savings, due to drug court participation. Overall, these findings show that participation in drug court results in substantial savings.

Not including victimizations, Table 12 shows that the majority of drug court participant outcome costs are due to prison (an average of \$4,038, or 56% of total costs) and jail (an average of \$1,849, or 26% of total costs). The majority of outcome costs for the comparison group were due to prison (an average of \$5,322, or 50% of total costs) and jail (an average of \$2,579 or 24% of total costs). The largest outcome cost savings for the drug court group (when compared to the comparison group) was for prison, with an average savings per participant of \$1,284 (or 38% of total outcome cost savings).

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, the Texas Department of Criminal Justice 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 Criminal District Court, District Attorney, and the Appointed Defense Attorney are all involved in court cases), costs are split proportionately amongst the agencies involved based on their level of participation. Table 13 provides the cost for each agency and



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

Table 13. 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
Criminal District Court	\$161	\$340	\$179
District Attorney	\$194	\$412	\$218
Appointed Defense Attorney	\$383	\$812	\$429
Department of Criminal Justice	\$4,038	\$5,322	\$1,284
Law Enforcement	\$1,915	\$2,719	\$804
Adult Probation	\$559	\$1,053	\$494
SUBTOTAL	\$7,250	\$10,658	\$3,408
Victimizations	\$3,878	\$9,874	\$5,996
TOTAL	\$11,128	\$20,532	\$9,404

Table 13 shows that every agency has a benefit, or savings, as a result of drug court. As demonstrated in Tables 12 and 13, the total cost of recidivism over 3 years for the BCFDC per drug court participant (regardless of graduation status) was \$7,250, while the cost per comparison group member was \$10,658. The difference between the drug court and comparison group represents a benefit of \$3,408 per participant. When victimization costs are added, the difference in costs jumps substantially with drug court participants costing a total of \$9,404 less per participant than non-drug court offenders due to fewer victim crimes for participants.

Cost-Benefit Analysis

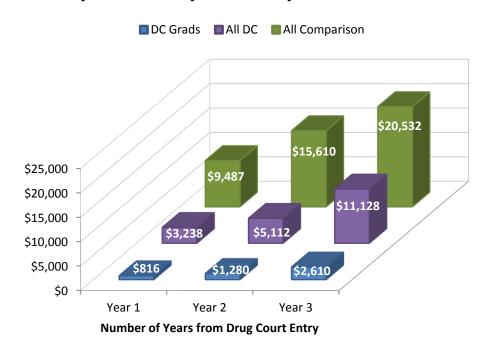
Over time, the BCFDC results in significant cost savings and a return on taxpayer investment in the program. The program investment cost is \$14,330 per drug court participant. The benefit due to significantly reduced recidivism for drug court participants over the three years included in this analysis came to \$9,404. This amount does not result on a positive return on the investment over the 3-year time period. However, if we make the assumption that the cost savings will continue to accrue over time as has been shown in long term drug court studies (e.g., Finigan et al., 2007) this cost-benefit ratio will improve over time as the investment is repaid. If these cost savings are projected just 2 more years (to 5 years) the savings come to \$15,673 per participant resulting in a cost-benefit ratio of 1:1.09. That is, for taxpayer every dollar invested in the program, there is \$1.09 return. This ratio can increase over time as the investment is repaid and the savings continue to accumulate. At 10 years the cost-benefit ratio comes to 1:2.19. 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 7 provides a graph of the outcome costs for graduates, all participants and the comparison group over 3 years.

Figure 7. Criminal Justice Recidivism Cost Consequences per Person: Drug Court Participants and Comparison Group Members Over 3 Years



The cost savings illustrated in Figure 7 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 BCFDC program continues to serve a cohort of **275** new participants annually, the conservative savings of \$3,408 per participant (not including victimizations) over 3 years results in an annual savings of \$312,400 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 \$4.6 million. When victimizations are included, the savings of \$9,404 per participant over 3 years results in an annual savings of \$862,033 per cohort. After 5 years, the accumulated savings, including victimization savings, come to over \$12.9 million.

If drug court participants continue to have positive outcomes in subsequent years (as has been shown in other drug courts NPC has evaluated, e.g., Carey et al., 2005; Finigan et al., 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 court is both beneficial to participants and beneficial to Bexar County and Texas taxpayers.



RESEARCH QUESTION #3: COST OF TIME BETWEEN ARREST AND DRUG COURT ENTRY

What is the impact on the criminal justice system of the time between the eligible arrest and drug court entry (in terms of arrests and jail)?

Although research has frequently shown that drug court participants have better outcomes when they enter the program and treatment swiftly (e.g., Carey et al., 2012), a common issue for drug courts is a long delay between arrest and program entry. An examination of costs between arrest and drug court entry demonstrates the fiscal impact of this delay.

Costs between Arrest and Drug Court Entry

Key Component #3 of the Key Components of Drug Court is about identifying eligible individuals quickly and promptly placing them in the drug court program. A shorter time between arrest and drug court entry helps ensure prompt treatment while also placing the offender in a highly supervised environment where they are less likely to be re-arrested and therefore less likely to be using other criminal justice resources such as jail. The longer the time between arrest and drug court entry, the greater the opportunity for offenders to re-offend before getting into treatment. This leads to the question, what is the impact in terms of re-arrests and jail in the time between arrest and entry into the drug court for BCFDC participants?

This section describes the criminal justice costs for arrests and jail experienced by drug court participants between the time of the drug court eligible arrest and drug court entry. Both transactions were described in the outcome costs section above. Costs were calculated from the time of the drug court eligible arrest to program entry.

Table 14 represents the costs of re-arrests and jail time per person for drug court graduates and all drug court participants (graduates and non-graduates combined) from the drug court eligible arrest to program entry.

Table 14. Re-arrest and Jail Costs per Drug Court Participant (Including Drug Court Graduates) From Arrest to Program Entry

Transaction	Transaction unit cost	Avg. # of trans- actions per Drug Court graduate	Avg. cost per Drug Court graduate (n = 139)	Avg. # of trans- actions per Drug Court participant	Avg. cost per Drug Court participant (n = 279)
Arrests	\$129.47	0.53	\$69	0.62	\$80
Jail Days	\$46.85	49.52	\$2,320	57.68	\$2,702
Total			\$2,389		\$2,782

As is demonstrated in Table 14, there are substantial costs accruing to the criminal justice system per offender from the time of the drug court eligible arrest through entry into drug court (\$2,782 for all drug court participants and \$2,389 for drug court graduates). It should be noted that these costs only include arrests and jail time during the average of 613 days from the drug court eligible arrest to entry into the BCFDC. Other criminal justice costs, such as court cases and probation days are also likely accruing. These costs emphasize that the sooner offenders can be placed into drug court, the more criminal justice system costs can be minimized. With these positive cost results, there is good reason to sustain and expand this program.

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SUMMARY AND CONCLUSIONS

rug courts are complex programs designed to deal with some of the most challenging problems that communities face. Drug 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 court must understand the various social, economic and cultural factors that affect them.

The BCFDC has been responsive to 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 primarily performed on BCFDC participants who entered the drug court program from January 2009 through December 2011, and a matched comparison group of offenders eligible for drug court but who received the traditional court process rather than BCFDC. In addition this cohort of BCFDC participants were also compared to participants entering from January 2007 through December 2008 to determine if any changes occurred after the SAMHSA Enhancement grant was received.

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

- Were significantly less likely to be re-arrested for any charge within 3 years after drug court entry,
- Had 4 times fewer drug and person charges,
- Had half as many felony charges,
- Had roughly a third as many property charges, and
- Had significantly fewer re-arrests for drug charges every year for 3 years after program entry (indicating reductions in drug use).

The average graduation rate for the BCFDC program is 60%, which is higher than the national average of 50%. The BCFDC team should continue to continue to work 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.

The results of the pre and post SAMHSA Enhancement grant analysis were also positive. While it is unclear whether participants in need of residential treatment were being placed more frequently and more quickly, it is clear that the technical assistance and training that the program has received has led to a change in the program population to focus on high-risk, high-need individuals and to a significant reduction in recidivism. Although the participants increased their average risk and need scores, recidivism was cut in half for each year up to 3 years post program entry.



Overall, the drug 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 Bexar County Felony Drug 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 \$14,330 per drug court participant. The benefit due to significantly reduced recidivism for drug court participants over the 3 years included in this analysis came to \$9,404. If these cost savings are projected just 2 more years (to 5 years) the savings come to \$15,673 per participant resulting in a cost-benefit ratio of 1:1.09. That is, for taxpayer every dollar invested in the program, there is a \$1.09 return. This ratio increases over time as the investment is repaid and the savings continue to accumulate due to continued positive outcomes for drug court participants. At 10 years the cost-benefit ration comes to \$2.19 saved for every \$1 invested in the program.

Overall, the BCFDC program had:

- A criminal justice system cost savings of \$9,404 per participant over 3 years,
- A 109% return on its investment after 5 years (a 1:1.09 cost benefit ratio), and
- A 219% return on its investment after 10 years (a 1:2.19 cost benefit ratio).

These savings will also continue to grow with the number of new participants that enter the program each year. If the BCFDC program continues to serve a cohort of **275** new participants annually, the accumulated savings after 5 years come to over **\$12.9 million**.

As the existence of the BCFDC continues, the savings generated by drug 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 BCFDC is both beneficial to participants and beneficial to Texas taxpayers.

Taken as a whole, these results demonstrate that the BCFDC program is effective in reducing recidivism and reducing drug use while using fewer criminal justice system resources. These positive evaluation results provide strong evidence that Bexar County and the State of Texas would benefit from sustaining and expanding this program.

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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:

<u>Recommendation:</u> Copy the recommendations from the electronic version of report and provide to the group.

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

<u>Response to recommendation:</u> 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.

<u>Next steps:</u> 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 10th) 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 infor-
mation.
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 ap-
propriate 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 ex-
ample), to discuss progress and challenges, and to establish new next steps, task lists, and
review dates

APPENDIX B: 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 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 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 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:

Achievement	Points Awarded
• 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 b 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