

*Glacier Consulting, Inc.*

**LYCOMING COUNTY ADULT TREATMENT COURT  
SUSTAINING SUCCESS:  
Restoring Lives and Community Cost Savings**



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October 2010

This report is an intensive evaluation of the Lycoming County Adult Treatment Court (LCATC). Special recognition is made to Peter Purcaro, Director of Court Services, for his efforts and responsiveness to the needs of the evaluation process, and Christopher L. Della Piazza, James E. Shiner, Scott Erb and Shea Madden., who provided the data required to perform analyses of program activities and outcomes. The views of the authors do not represent the opinions, policies or official positions of DOJ, Lycoming County or other offices and organizations included in the report.

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# INTRODUCTION

Specialty Courts are judicial problem-solving processes designed to address the root causes that contribute to criminal involvement. Specialty Courts consist of teams with a judge, coordinator, prosecutor, defense, treatment personnel, probation and other agency staff as needed. They provide early intervention by the court while protecting the rights and due process of the defendant. The swift application of rewards or sanctions holds the client accountable throughout the process.

Drug Courts have been proven highly effective with defendants whose drug use or abuse has brought them into contact with the criminal justice system. Several categories of Drug Courts are currently operating throughout the state. These include adult, juvenile and family. All play a unique role in helping and preparing people to live substance abuse free lives.

- The Adult Criminal Drug Court is the most common. Participants are part of the criminal justice system and enrolled in the program as a part of their sentence and rehabilitation.
- Family, Dependency, and Child Support Drug Courts all deal with domestic situations, such as a failure to pay ordered child support, that are worsened by use of illegal drugs.
- Juvenile Drug Courts are for youth that find themselves in the criminal justice system with drug use as part of the problem.

In addition to the assistance provided individual defendants, counties and taxpayers receive the benefit of cost savings due to a reduced number of people incarcerated, and an increased number of productive members in society. The work of these courts cannot be underestimated. National and local studies show the success of these courts both in lower recidivism and cost saving to local health and service agencies, correction agencies and the courts. In addition to producing clean, sober and productive citizens, other benefits are received by the state. A recent study found that every dollar spent on substance abuse treatment generates \$7 in monetary benefits for society.

Following the implementation of its program in 1998, the Lycoming County Adult Treatment Court (LCATC) program succeeded in holding its first graduation in August 2000. Through October 2010 the LCATC team has implemented a series of enhancements to meet the needs of the target population and to provide additional access to treatment and other supporting activities involving outreach and coordination of services. LCATC established a program that was ready for more intensive evaluation designs as the drug court continued its implementation, which led to this process evaluation effort to assess the program's effectiveness in fine-tuning its processes of implementation.

# OVERVIEW OF THE EVALUATION

The Lycoming County Adult Treatment (LCATC) contracted for program evaluation services of their adult drug court program implementation, after receiving financial support from the State Justice Institute. The independent evaluation team<sup>1</sup> conducted its initial evaluation covering its initiation in 1998 through October 2010. The principal investigator, Dr. Robert A. Kirchner, Director of Research, Glacier Consulting, Inc. (GCI) has been involved in the evaluation of drug court programs since 2000. He made a number of site visits to observe the LCATC program in operation and carry out various evaluation tasks. The County also conducts a DUI Treatment Court, and GCI agreed to perform an evaluation of that program during the same time frame. A companion report was produced in addition to this report.<sup>2</sup>

The program is located in Lycoming County, Pennsylvania, including the principal city of Williamsport. The independent evaluation team performed this evaluation of LCATC from September 2009 through October 2010, with intensive periods of fieldwork and participation with LCATC team members. From the beginning in 1998, LCATC implemented a series of enhancements to meet the needs of the target population and to provide additional access to treatment and other supporting activities involving outreach and coordination of services.

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<sup>1</sup> The team represented Glacier Consulting, Inc. The team was comprised of Dr. Robert A. Kirchner, Glacier Consulting, Inc., as principal investigator, Thomas R. Kirchner, who performed the analysis of the data and helped develop final findings and recommendations. This project was supported by a grant from the U.S. Department of Justice (DOJ), Office of Justice Programs, and Bureau of Justice Assistance.

<sup>2</sup> Kirchner, Robert A., Thomas R. Kirchner and Jill K. Glashow (2010) *Lycoming County DUI Treatment Court: Innovation in Dealing with DUI Offenders*. Annapolis, MD: Glacier Consulting, Inc.

At the time of the evaluation, the program had 41 active clients. Components of the LCATC program include the following:

- ❑ Court oversight and active judicial case management
- ❑ Access to a dedicated assessment and treatment resources
- ❑ Community service and restitution
- ❑ Supervision by Probation
- ❑ Drug testing and a range of intermediate sanctions and incentives
- ❑ Successful transition and return to community, including a best practice alumni association

### **Scope and Methodology of the Evaluation<sup>3</sup>**

This evaluation design was for a process evaluation of the LCATC program, and looks to the future for clues on sustaining the program in Lycoming County. It begins the measurement of the effectiveness of the implementation of LCATC, and establishes a basis for the evaluation and report. The evaluation also determines the extent to which the drug control efforts of multiple agencies have been integrated and coordinated. This evaluation was accomplished using interviews, focus groups, and structured instruments designed to capture both process results in quantitative and qualitative forms. Individual interviews were conducted to promote ownership and investment in the evaluation and to add other measures to the instruments that respondents deem important.

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<sup>3</sup> See: Kirchner, Robert A., and Kenneth D. Robinson "Evaluating Drug Courts at the Local Level," Presented at the National Association of Drug Court Professionals' 8<sup>th</sup> Annual Conference, held in Washington, DC, June 13-15, 2002.

This was accomplished by implementing a three (3) step evaluation design that consisted of site visits, focus groups, and data collection:

- Intensive interviews with each member of the LCATC team, other stakeholders and participants, including documentation of the requirements and expectations of each;
- Observation of all primary court activities, including staffing, pre-hearings and status hearings, as well as approaches to treatment delivery; and
- Compilation of updated LCATC documentation, court materials and data.

The framework used by this approach to documenting the program provides a basis for specifying its uniqueness. The evaluation formulated a program logic model<sup>4</sup>, including descriptions of all program components and the relationships between program components. The model establishes a baseline for the process evaluation to determine (1) if the components are being implemented as designed and expected and (2) to determine if improvements can be made to current operations.

The project contracted to by Glacier Consulting, Inc. (GCI) will accomplish 4 goals for the LCATC Program over the through mid-2009:

1. Examine process evaluation measures of the LCATC since implementation to detect any environmental changes that would affect outcomes.
2. To establish a baseline for use in future outcome research studies of the LCATC Program.
3. To assess the drug court program's compliance with goals set forth in the Bureau of Justice Assistance, Drug Court Program's funding grant.

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<sup>4</sup> This approach and definitions presented here are fully explained and demonstrated in: Kirchner, Robert A., Roger K. Przybylski and Ruth A. Cardella Assessing the Effectiveness of Criminal Justice Programs. Assessment and Evaluation Handbook Series Number 1, January 1994. U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Assistance. This publication is available on the INTERNET at: [www.bja.evaluationwebsite.org](http://www.bja.evaluationwebsite.org).

4. Assess the outcome measures of the LCATC Program participants, participant demographics, number of LCATC terminations, number of completions, LCATC compliance, number of arrests after completion/ termination from LCATC, number of urine drug screens and results, employment and education services achieved by clients, drug of choice of the LCATC participants.

State and local agencies are committed to conducting more analytical work on innovative drug court approaches, and the long- term impact of drug courts on local jurisdictions. Future process and impact evaluations will also include other issues, since many drug courts community-wide problems. Improved quantitative and qualitative measures of performance and impact have opened the door for more longitudinal research and analysis. A comprehensive reference section is attached to this report which highlights research and evaluation efforts to date.

Lycoming County Adult Treatment Court Team and other stakeholders involved with the Program are visualized in the diagram below:



## ***Lycoming County Adult Treatment Court (LCATC)***

**Honorable Nancy L. Butts**  
Christine Saar

**ASSESSMENT & TREATMENT  
COORDINATION**  
West Branch Drug and Alcohol  
Shea Madden

**PROBATION**  
James E. Schriener  
John W. Stahl

**DISTRICT ATTORNEY**

**PUBLIC DEFENDER**  
Nicole Spring

**LYCOMING COUNTY PRISON**  
Harry Rogers

**TREATMENT PROVIDERS: Outpatient & Residential**

Outpatient Treatment

- Crossroads
- Genesis House
- White Deer Run

Residential Treatment Programs

AA/NA

Community-Based Support Activities: Alumni Association and  
Miscellaneous Services

# **PROGRAM SUCCESS, ACCOMPLISHMENTS AND ENHANCEMENT**

Beginning in 1998, the Lycoming County Adult Treatment Court (LCATC) Program initiated its innovative project as a response to the cyclical behavior of drug offenders, and the fact that the County was not successful in its attempts to break to cycle. Further, the increasing costs of incarceration of drug offenders, only to see them return after release, demanded a new strategy to improve the County's criminal justice and treatment delivery systems. Lessons were learned from drug court programs implemented across the Nation, but the challenges and opportunities for implementing drug courts in Lycoming County quickly became apparent.

National guidance on implementing drug courts presents a general framework to establish a program, but not all jurisdictions fit the general model – especially with the diverse differences and unique nature of individual regulations and practices. The reality faced by LCATC was to establish resources needed to maintain a drug court on their own, and to do so in a cost-effective manner.

The development of a program design that focused on the strengths of combining efforts based on multi-agency participation, including the designation of a dedicated drug court judge, led to a solution eventually overcoming the initial obstacles. LCATC was planned and implemented as a unified and consistent judicial drug treatment program within a drug court model.

## Keys Indicators for Program Performance

The National Drug Court Institute<sup>5</sup> has recommended a focus on specific performance indicators to judge the effectiveness of a drug court, including:

- Retention in Treatment
- Sobriety
- Units of Service Delivery
- Recidivism

For all of these measures, the LCATC exceeds its expectations for the objectives they have set for each of the critical indicators. The rates of in-program recidivism are relatively low, with most of the participants violating the conditions of their programs being terminated according to the decision of the drug court team.

Based on observation of program activities, interviews, and review of LCATC materials, substantial progress has been made in finalizing both the organization and operationalization of the Court. During its twelve (12) years of implementation, the Drug Court Team has continued to define roles and responsibilities, as well as decisions on the policy and procedures of the Court. The results are impressive, and there is every

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<sup>5</sup> See: Heck, Cary (2006) *Local Drug Court Research: Navigating Performance Measures and Process Evaluations*. Washington, DC: Bureau of Justice Assistance, U.S. Department of Justice.

expectation that the program will only get better over time in producing desired program outcomes.

First, it is important to understand what the LCATC has already produced as of October 2010, and how it has improved over time, remembering that it is much more cost-effective during the last year than its first year of operation:

- Graduating clients – 226 graduates as of 10/30/2010.
- Retaining clients in treatment – The program has had an overall retention rate of 62%, which far exceeds the average of 28%, reported in research for substance abuse treatment programs.
- Reducing post-program recidivism – Over the twelve years of implementation, LCATC has maintained a low recidivism rate of 28%. The success rate among graduates has been 72%, which is significant for programs that contain treatment components.

In terms of cost-benefits, from 1998 through October 2010, the LCATC has:

- Completed 28,085 hours of community service, valued at \$217,097.<sup>6</sup>
- Integrated and consolidated approaches to treatment and recovery which substantially reduced the cost of individual service delivery to clients.

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<sup>6</sup> Calculated on the recommended value for community service hours by the National Drug Court Institute. As a drug court component, community service fulfills three objectives: (1) the value of the service delivery; (2) therapeutic rehabilitation of the client; and (3) client restitution to the community.

- Delivered 320,000 client days – including substance abuse treatment, supervision, ancillary services and judicial review at an average cost of \$12 a day per client; and
- Incurred substantial cost savings to the State and county through reductions in confinement time. Detention costs of \$18,240,000 have been saved by supervising clients in Drug Court.<sup>7</sup> Based on existing sentencing data, we developed a conservative estimate of actual jail days saved, which resulted in 126,960 days saved for a saving of \$7,236,720. Considering the 226 graduates to date, we determined that, with an average of 688 days in the program, led to an average of \$32,020 in cost savings per graduate.

Program components and accomplishments that have created an effective program include:

- Consistent judicial review with cooperative input from all treatment court team members;
- The role of the judge is in itself an effective intervention which impacts a client's performance and retention in the program;
- Strength-based approaches to programming client participation;
- Dedicated supervision component strongly supported and directed by Probation aided by a highly effective set of drug testing procedures;
- Intensive efforts to gain community partnerships and collaborations.

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<sup>7</sup> This amount is calculated after subtracting the number of detention days clients spent in jail because of sanctions.

# **LCATC EFFECTIVENESS:**

## **DATA, FINDINGS, CONCLUSIONS**

The LCATC program will proceed in its design to fit into State and county approaches to handling drug offenders by ensuring a balance between client's needs based on assessment and the constraints of law and agency operations. This is producing a program that will become more effective for the jurisdiction, expand its active client base and lead to greater outcomes for the community.

A single graduate of a drug court program is a significant accomplishment in achieving its mission. Not only is a life potentially saved and a useful citizen returned to the community, but there are payoffs in creating safer communities and decreasing criminal behavior. The level of effort required to produce a graduate cannot be underestimated. The efforts produce permanent results for clients, unlike other interventions that see clients return to the offender population. The LCATC succeeded in graduating 14 drug court participants at the time of this evaluation, covering just over 2 years of implementation. As the number of clients increases, the Court should be able to handle the workload without impacting the process or services.

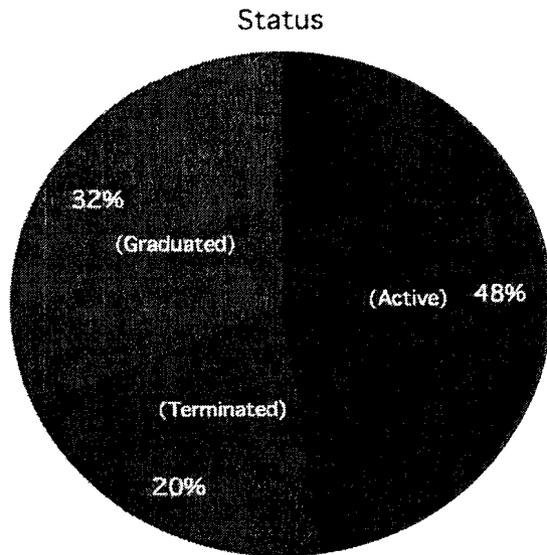
Data for this program evaluation come from sources that internal and external to the LCATC. Sources that are internal to the LCATC include the documents generated by the program since its inception, including funding grant proposals, policies and procedures, and written materials for participants. The LCATC has maintained an electronic management information system (MIS) since it began. Although this MIS has gone through some iteration, the most recent version incorporated all of the design

features and data from previous editions. This MIS was the source for most of the quantitative data that were analyzed for this report.

Members of the Glacier Consulting, Inc. (GCI) evaluation team have conducted several site visits to the LCATC. Drug Court Team staffings, and drug court hearings were observed, key informant interviews with LCATC program and treatment were conducted, and evaluation meetings with program leaders were held. These site visit data provided the necessary information to describe the program and were part of the assessment of how the LCATC implementation compared with the key components of successful drug courts.

## **Who is served by the LCATC, and How do they perform?**

We present the data analysis performed on LCATC program and performance indicators, along with relational analyses that help us understand the trends and patterns of implementation over time. Many elements of drug court implementation can determine the effectiveness of a program. The willingness to accept felony drug offenders, with most of the candidates' drug of choice being alcohol, followed by cocaine and marijuana, means that the program represents a substantial proportion of the County's drug offenders facing serious criminal and drug abuse problems. Table 1 presents the numbers of participants from 1998 through October 2010, as well as the current active clients and the outcomes to date for those graduated and terminated.



**Figure 1. Drug Court Participants Status: 1998 – October 2010**

From 1998 to October 2010, 434 drug offenders entered the LCATC. Even with the decision to target the toughest participants coming through the courts in Lycoming County, the program produced 226 graduates. Every successful Graduate increases to the public safety of the community, while returning individuals to healthy life styles able to make substantial contributions to the community.

**Figure 2. Participants Days in program by Status**

Keeping track of units of service is critical in the assessment of drug court programs. Client, or participate days is the basis for understanding the dose and intensive it takes to progress through the program for different participants.

**Figure 3. Years in program by Status**

**We thought this statistic was interesting considering the level of effort to produce graduates. Also, although some participants are terminated, research shows that the program has an effect on future behaviors and drug use which is highlighted later.**

#### **Figure 4. Age Breakdowns of Participants**

**The LCATC recognizes the diversity of their target population, and the fact that drug offenders come from all groups and socio-economic status groups in the community. Over time, LCATC has served participants across all age groups. The average age of participants is 38 years of age.**

#### **Figure 5. Age Group by Status**

**Figure 5 the program is most successful over time with clients 40 years of age and over. It is interesting that terminators leave the program at about the same rate for each group.**

#### **Figure 6. Gender Breakdown of Participants**

**The proportion of males (70%) to females (30%) explains why the program design incorporates services for both men and women.**

#### **Figure 7. Ethnicity of Participants**

**Figure 7 Presents the breakdown in ethnicity for the population entering the program over time. Ethnicity helps explain if the program is serving a diversity of clients from the community, and the program is responsive to the needs across the County's population of drug offenders.**

#### **Figure 8. Ethnicity of Participants by Status**

**Figure 8 presents a very interesting finding that the success and failure of clients in the program in terms of terminators and graduates show no significant difference between the two groups.**

### **Figure 9. Current Employment of Participants**

**In all drug court studies, a key to success, both in-program and post-program, is the ability to have clients meaningfully employed. These results suggest that the program is accomplishing this objective across the client population.**

## **Figure 10. Employment by Terminated and Graduated**

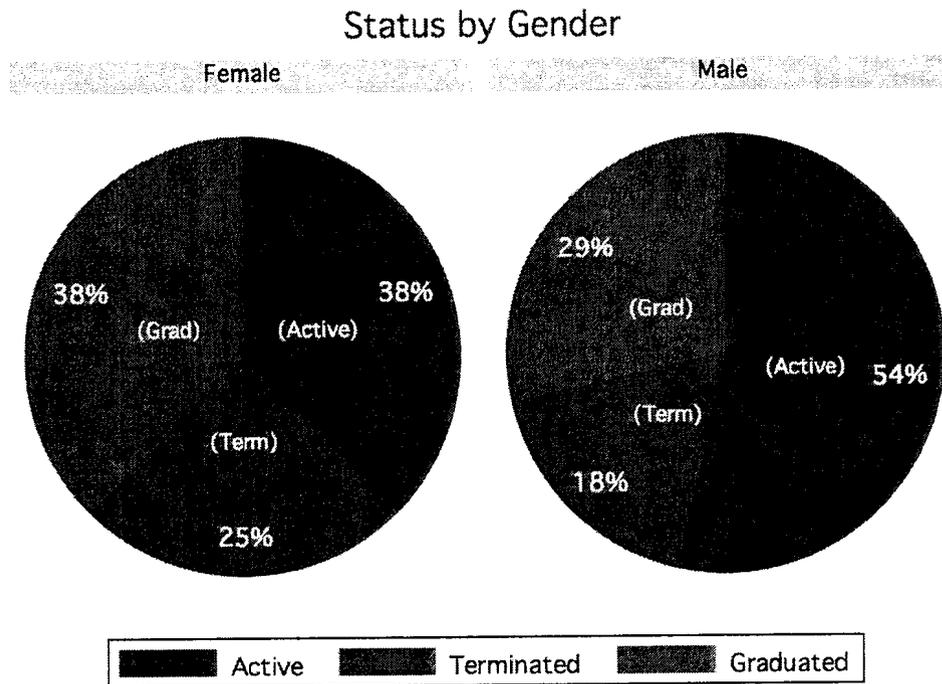
**Figure 10 reinforces the fact that employment is important, with terminators only employed at 58% and 80% of the graduates are employed. Terminators have twice as many people unemployed than the graduates.**

### **Figure 11. Average Community Service Hours Performed by Clients**

**Figure 11 presents the average number of community service hours while in the program. As clients begin to fail, their focus on completing requirements or orders for community service falls off, and is an indicator of progress lost.**

### **Figure 12. Education Attainment of Participants**

**The data for Figure 12 was incomplete, but we wanted to show the finding from the data captured. For half the population, the population has attained education levels that can be considered strength when programming plans for the clients.**



**Figure13. Status of Participants by Gender**

**In this relational analysis, remembering that the participants represent 30% female and 70% Male, females exceed males in successful completion of the program (38% are graduates), but also are more likely not to complete the program (25% are Terminators).**

## **Drug of Choice and Treatment Participation**

**The data available for this analysis included the time period from January 1, 2005 through October 2010.**

### **Figure14. Drug of Choice: 2005-2010**

**Figure 15 presents participants drug of choice as they enter the program. With alcohol the most frequent, but the program has to face dealing with different types of drug users in its programming. Notably, in interviews a number of clients that reported alcohol as their first drug of choice also were using other drugs.**

<b>Treatment Type</b>	<b>Number of Clients</b>	<b>Total Number of Sessions</b>	<b>Average Number per Client</b>
<b>Individual Counseling Sessions</b>	199	6,799	34
<b>Groups Counseling Sessions</b>	199	11,362	57

**Table 1. Treatment Delivery: 2005-2010**

Units of service begin with treatment delivery, and the critical component to track is the numbers of contacts by clients with treatment providers during their attendance in the program. It is also important to record when clients do not attend required session (individual and group), but that data was not available to date. These findings show the level of treatment intervention required to meet the needs of participants.

**Figure15. Status of Average Treatment Participation by Clients**

Treatment delivery can have many facets to meet the needs of participants when a diversity of problems and issues with addiction. Figure 16 explains the complex mix of treatment delivery services that the program has available for its clients.

**Figure16. Average Treatment Participation and Drug of Choice**

Often treatment plans are developed differently for different users drugs of choice. Figure 17 breaks down types of drug use with the responses delivered under individual treatment plans.

# CRITICAL ELEMENTS AND STATUS OF IMPLEMENTATION

## **Assessment of Program Progress in Addressing the Key Components: 1998 through October 2010**

Most drug courts evolve to represent the practices and culture of their local jurisdiction. Institutionalizing a drug court program should be an important goal of this new initiative to improve criminal justice system responses to dealing drug offenders. Lycoming County Adult Treatment Court program has taken on this goal and is producing an effective program, as well as supporting their desire to integrate and sustain their efforts in the County.

After almost two decades of implementing drug court programs, knowledge has been accumulated about lessons learned and critical components or elements that are essential for success and institutionalization. The following section, Critical Elements and Status of Implementation, presents the current ten (10) national Key Components of Drug Courts and the LCATC's condition on each to identify successful accomplishment of both programmatic and organizational objectives. Performance by LCATC across the components has been impressive and constantly improving over time. Of course, the next evaluation phase will go further to determine the effectiveness over its first three (3) years of implementation and the impact of program over time.

The following section, Critical Elements and Status of Implementation, presents the current ten (10) national Key Components of Drug Courts and the LCATC's condition on each to identify successful accomplishment of both programmatic and organizational objectives. Each presentation is then supplemented with findings on the status of implementation of the LCATC.

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

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

The focus of this 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.

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

National Research

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

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.

#### LCATC County Status

- The drug court team is composed of the judge, district attorney (there is one main District attorney and one back-up district attorney), public defender (two public defenders share the drug court caseload), treatment counselor, probation officer, and drug court assistant.
- The treatment counselor, probation officer, drug court coordinator, and drug court assistant attend treatment staffing meetings where all participants are reviewed. The judge, District attorney, public defender, treatment counselor, probation officer(s), drug court coordinator, drug court assistant, TASC evaluator, law enforcement representative, and behavior healthcare representative attend pre-hearing meetings.
- Three (3) treatment providers work with the SCADC. Crossroads provides the majority of outpatient treatment services. West Branch Drug and Alcohol coordinates or provides oversight of treatment for SCADC participants at the other agencies, and the drug court team as a whole fulfills this role.
- The treatment providers submit written progress report summaries to the Treatment Coordinator, West Branch Drug and Alcohol, and are usefully in court for status hearings.
- All respondents reported good communication amongst the various team members.

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

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

This component is concerned with the balance of three important areas. The first 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 focus area is that drug court programs remain responsible for promoting public safety. The third focus area is the protection of the participants' due process rights.

#### National Research

Research found that participation by the prosecution and defense attorneys in team meetings and at drug court hearings had a positive effect on graduation rate and on recidivism<sup>8</sup> costs.

In addition, allowing participants into the drug court program only post-plea was associated with lower graduation rates and higher investment<sup>9</sup> costs. Further, courts that allowed non-drug-related charges also showed lower recidivism costs. Finally, courts that imposed the original sentence instead of determining the sentence when participants were terminated had lower recidivism costs.

#### LCATC County Status

- Prosecution and defense counsel are included as part of the drug court team and attend pre-hearing meetings and drug court sessions regularly. Defense counsel positions have been stable for a long time, prosecutor rotate as necessary.
- The public defender attends all drug court meetings and sessions.
- The district attorney, public defender, probation officer, and court/judge identify and refer potential participants to the program.

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

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

The focus of this component is on the development and effectiveness of the eligibility criteria and referral process. Different drug courts allow different types of criminal histories. Some drug courts also include other criteria such as requiring that participants admit to a drug problem or other “suitability” requirements that the team uses to determine whether they believe specific individuals will benefit from and do well in the program. Drug courts should have clearly defined eligibility criteria. It is advisable to have these criteria written and provided to the individuals who do the referring so that appropriate individuals that fit the courts target population are referred. Drug courts also differ in how they determine if a client meets these 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

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<sup>8</sup> Recidivism costs are the expenses related to the measures of participant outcomes, such as re-arrests, jail time, probation, etc. Successful programs result in lower recidivism costs, due to reductions in new arrests and incarcerations, because they create less work for courts, law enforcement, and other agencies than individuals who have more new offenses.

<sup>9</sup> Investment costs are the resources that each agency and the program overall spend to run the drug court, including program and affiliated agency staff time, costs to pay for drug testing, etc.

legal eligibility may take more time but may also result 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 amount 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

Research found that courts that accepted pre-plea offenders and included misdemeanors as well as felonies had both lower investment and outcome costs. Courts that accepted non-drug-related charges also had lower outcome costs, though their investment costs were higher.

Those courts that expected 20 days or less from arrest to drug court entry had higher savings than those courts that had a longer time period between arrest and entry.

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.

### LCATC County Status

- The district attorney reviews all cases for potential eligibility, but potential participants may be identified by the probation officer, district attorney, public defender, and the court/judge.
- West Branch Drug and Alcohol provides assessments for all candidates to determine whether an offender is eligible for the drug court program. Assessment results and other eligibility information need to be entered into the Court system if candidates become participants in the program.
- The treatment coordinator and probation officer, with information from the district attorney, make an initial decision about an offender, but the final decision about whether or not an offender is accepted into the program is made at the pre-hearing meeting with all team members present.
- The SCADC program eligibility requirements are written. All referring team agencies have copies of the eligibility criteria.
- Offenders with current and prior violent charges are not allowed into the program, nor are offenders with prior felonies or sex offense convictions.
- The SCADC program accepts offenders with felony drug possession charges, though other charges such as property offenses, prostitution, and forgery are also eligible for participation in the program (as long as they are drug-related).
- The program does have participant handbook, but it needs substantial revision and clarification.

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

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

The focus of this key component is on the drug court's ability to provide participants with a range of treatment services appropriate to participant 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 services to provide and which services are important for their target population.

##### National Research

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

Clients who participate in group treatment sessions 2 or 3 times per week have better outcomes. Programs that require more than three treatment sessions per week may create a hardship for clients (such as with transportation, childcare, or employment), and may lead to clients having difficulty complying with program requirements and completing the program. Conversely, it appears that one or fewer sessions per week is too little service to demonstrate positive outcomes. Individual treatment sessions, used as needed, can augment group sessions and may contribute to better outcomes. In addition, drug courts that include a phase that focuses on relapse prevention were shown to have higher graduation rates and lower recidivism than drug courts that did not.

##### LCATC County Status

- The entire team is responsible for evaluating and referring participants to any of 3 agencies that provide treatment to drug court participants. The treatment coordinator attends treatment staffing meetings, and the treatment coordinator attends pre-hearing meetings and drug court sessions.
- The West Branch Drug and Alcohol assessments help the drug court determine the level of treatment. Assessments are performed and the results are presented to the entire team to review the participants' progression in the program. The team also uses e-mail to stay informed about participants. The treatment coordinator gives progress reports on participants at the pre-hearing meeting.
- The SCADC program consists of multiple phases that incorporate individual counseling sessions with group sessions. Group session attendance is required,

and participants are also required to attend self-help groups throughout the program, along with joining the Alumni Association during the final phase and after graduation.

- *Services required for all participants include:* outpatient individual and group treatment sessions, health education, and self-help meeting attendance. *Services required for some participants include:* job training, employment assistance, detoxification, residential treatment, and psychiatric services. *Services offered to participants but not required include:* anger management/violence prevention and transportation services.
- The team members are not all located in the same building. Treatment offices are spread out throughout the service area to better reach all participants, who may have trouble with transportation. Even though they are spread out geographically, team member communication was listed as one of the program's strengths.
- Participants learn relapse prevention. An aftercare program is available after graduation and there is an alumni group that meets regularly and provides support for current participants.

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

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

The focus of this key component is on the use of alcohol and other drug testing as a part of the drug 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 found that drug testing that occurs randomly, at least 3 times per week, is the most effective model. If testing occurs more frequently (that is, more than 3 times per week), the random component becomes less important as it is difficult to find time to use in between frequent tests.

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

In addition to frequency of testing, it is important to ensure that drug testing is random 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 to submit a sample that is not their own.

## LCATC County Status

- Drug testing is performed both on a random basis and on a regular schedule. Testing can be done for cause if a client is suspected to be under the influence.
- Drug testing is performed through instant urinalysis (UAs) and breath tests. Urine samples are sent to the lab in instances when the participant tests positive but does not admit usage.
- The major element for accountability is SCRAM, continuous alcohol monitoring, since the majority of participants' drug of choice is alcohol.

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

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

The focus of this component is on how the drug court team responds to client 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, or this may be a formal system applied evenly to all clients, or a combination of both. The key staff involved in decisions about the appropriate response 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

Nationally, the drug court judge generally makes the final decision regarding sanctions or rewards, based on input from the drug court team. Allowing team members to dispense sanctions makes it more likely that sanctions occur in a timely manner, more immediately after the noncompliant behavior. Immediacy of sanctions is related to improved graduation rates and lower recidivism. However, having the judge as the sole dispenser of rewards is related to greater cost savings.

In addition, research has also 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.

### LCATC County Status

- Initial decisions about sanctions and rewards are made during weekly treatment staffing and again at a staff meeting prior to drug court. The judge, however, makes the final decision about whether to impose the rewards and sanctions suggested by the team, and those decisions may be different from the team's suggestions.
- Participants receive rewards, which are given in a standardized way for specific behaviors and sometimes on a case-by-case basis. Participants receive tangible and intangible rewards, such as praise from the judge, applause, and phase completion certificates. Rewards are typically provided during court sessions by the judge.
- The drug court team members are given a written list of sanctions and rewards or other responses to participant behavior that are to be used in the program.
- Participants are given a written list of behaviors that lead to sanctions as well as a list of possible sanctions.
- Sanctions are standardized, but are sometimes decided on a case-by-case basis.
- Sanctions are graduated so that the severity increases with more frequent or more serious infractions.
- Participants must be drug-free a minimum of 120 days before they can graduate, but there is not a minimum number of clean drug tests required for graduation. Participants are required to have a job or be in school, have a sober housing environment, prepare a transition plan, and pay all fees before graduation.

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

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

The focus of this component is on the judge's role in drug court. The judge has an extremely important function for drug court in monitoring client 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

Research demonstrated that, on average, participants have the most positive outcomes if they attend approximately one court appearance every 2 weeks in the first phase of their

involvement in the program. Marlowe et al. (2006) also demonstrated that more frequent court sessions (i.e., weekly) were effective only for higher risk offenders while less frequent sessions (e.g., monthly) were more effective for lower risk offenders.

In addition, programs where judges remained with the program 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.

#### LCATC County Status

- One judge serves this drug court and has been with the drug court since its beginning and has played a major role in program development.
- The judge has attended professional drug court-related conferences and received formal drug court training.
- The judge interacts one-to-one with each participant at every court appearance. Observations made during court appearances revealed that the judge was clear and direct with participants who were struggling about expectations and checked with participants about their progress. As research has shown<sup>10</sup> that the judge can be a key to a successful drug court program, and that is certainly the case in Lycoming County
- Drug court participants typically attend drug court sessions once every 2 weeks in phases 1 and 2 and once per month in phases 3 and 4.

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

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

This component encourages drug 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

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<sup>10</sup> See: Marlowe, Douglas B, David S. Festinger, and Patricia A. Lee (2004) "The Judge is a Key Component of Drug Court." *Drug Court Review*, Volume IV, Issue 2. Alexandria, VA: National Drug Court Institute.

important to determine how receptive programs are to modifying their procedures in response to feedback.

#### National Research

Research 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.

#### LCATC County Status

- The LCATC County Adult Drug Court collects data electronically (Web-based) for participant tracking through its probation office and the treatment coordinator.
- The Court has recently developed and established a new court wide management information system that includes much of the data collected by the drug court.
- The monitoring of clients through case management is being conducted through two separate approaches – one for treatment activities and another for client identification and supervision. These should be integrated together through the Court's new Management Information System. However, the LCATC Team should first determine what data elements are necessary and useful to input in the system. The evaluation team was handicapped in its work because of either (1) incomplete data or (2) total lack of critical indicators that should be included in monitoring clients. The final LCATC MIS System should be completed to meet the needs of the court for future assessments and evaluation.

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

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

This component encourages ongoing professional development and training of drug court staff. Team members need to be updated on new procedures and maintain a high level of professionalism. 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

Research found that drug court programs requiring all new hires to complete formal training or orientation and requiring *all* drug court team members be provided with regular training were associated with higher graduation rates and greater cost savings due to lower recidivism.

### LCATC County Status

- Drug court team members have received training or education specifically on the drug court model.
- Drug court team members have received training specifically about the target population of the court including age, gender, race/ethnicity and drugs of choice. Team members bring new information on drug court practices including drug addiction and treatment to staff meetings.
- The lack of funding has restricted more recent training. The team members have attended yearly national drug court conferences.

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

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

This component encourages drug courts to develop partnerships with other criminal justice and service agencies. 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. Drug courts must still determine what partners are available and decide with whom to partner and how formal to make these partnerships. Other important factors to weigh include who will be considered as part of the main drug court team; who will provide input primarily through policymaking; and what types of services will be available to clients through these partnerships.

### National Research

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 community service sponsors, AA and NA, medical providers, local education systems, employment services, faith communities, and Chambers of Commerce.

In addition, Studies have indicated that drug courts that had true formal partnerships with community agencies that provide services to drug court participants had better outcomes than drug courts that did not have these partnerships.

### LCATC County Status

- The drug court has developed and maintained relationships with agencies that can provide services for participants in the community and refers participants to those services when appropriate.

- Linkages with correctional agencies and facilities are well established.
- Based on this evaluation and the support of the team members, the program hopes to create and maintain a successful sustainment plan for the future.

# POTENTIAL ENHANCEMENTS FOR FUTURE IMPLEMENTATION

The LCATC began operation in 1998, and through the time of this evaluation, has attempted to improve and enhance its program operations. The LCATC continues to build an ever more comprehensive approach, given the opportunities and constraints faced by the court, the members of the LCATC Team, and the community at large. Overall the program is maturing and has increased the number of active clients over time. LCATC should consider the following suggestions as the evaluation team completes the continuing process and outcome evaluations of the program.

- **Reviewing the Program Design** The drug court needs to complete the task of producing a definitive and useful Policy and Procedures Manual that documents the program and its specific elements and practices. Following this accomplishment, a new Participant's Handbook should be developed that clearly informs the participant about the program, and also is a guide on how to succeed in meeting its criteria and requirements. The evaluation team believes that after 12 years the LCATC program has established a number of practices and methods to produce successful graduates of the program, but it would be difficult for other jurisdictions to consider implementing similar program activities to improve their operations unless better documentation is available.

- **Completing the Case Management System** The monitoring of clients through case management is being conducted through two separate approaches – one for treatment activities and another for client identification and supervision. These should be integrated together through the Court’s new Management Information System. However, the LCATC Team should first determine what data elements are necessary and useful to input in the system. The evaluation team was handicapped in its work because of either (1) incomplete data or (2) total lack of critical indicators that should be included in monitoring clients. The final LCATC MIS System should be completed to meet the needs of the court for future assessments and evaluation. If for no other reason, the ability of the program to report on its progress and results is important to sustaining the program into the future.
- **Alumni Association as a Model** The evaluation team was particularly impressed with the establishment of an alumni association which is an excellent resource for continuing aftercare, but also involves active participants in a positive way before they graduate. The website that supports the association and promotes communication among participants is also a model for others to follow. The Court should develop a document and/or presentation on ton this critical element of the program for dissemination to other courts.

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