

Appendix B7

County Drug Court Profiles:

Snohomish County Drug Court Program Profile

SNOHOMISH COUNTY ADULT DRUG COURT

PROGRAM PROFILE

April 2001

BACKGROUND

Concerned about a rapid increase in the number of drug related crimes with felony drug cases constituting the fastest growing category of criminal cases in Snohomish County, and the multiple impacts of this phenomenon on the community, a group of concerned individuals began meeting in 1997 to consider the feasibility of a drug court program in the County. The group included representatives from the legal community including the offices of the County Prosecutor and Public Defender, the Superior Court, Everett Police Department, the County Council, the County Departments of Corrections and Human Services, chemical dependency treatment providers, and other community and business leaders. The work of this group culminated in the submission of a Drug Court Planning Grant application to the Department of Justice/Drug Court Program Office (DOJ/DCPO) in Spring 1998. This successful application, funded for fiscal year 1998-99, supported the work of the Planning Committee in developing the Drug Court program that was implemented as a pilot project in Snohomish County Superior Court in October 1999.

The planning grant provided opportunities for members of the Committee to visit other Drug Court programs in Washington and other parts of the county, and provided a rich source of information from other Drug Courts about structure and operation and lessons learned from their successes and failures. The grant also supported the participation of Planning Committee members in training conferences offered by the National Association of Drug Court Professionals and the Office of Drug Court Program. These conferences were designed to facilitate the development of a shared understanding of Drug Court, team identity among group members, and a team approach to the design and implementation of the program. Committee members found the training sessions very helpful and important in developing the Drug Court program.

The planning grant culminated in a detailed proposal and implementation plan for the Snohomish County Drug Court, and an application to DOJ/DCPO for an implementation grant that would provide significant funding for the program. Although the implementation grant application was ultimately successful, Federal funding was not available for the projected start date of Fall, 1999. Reflecting the commitment of the Planning Committee and the community to the program, the decision was made to start a small pilot project in October 1999 without Federal funding. The Committee was reluctant to lose the momentum and commitment that had been generated during the planning effort, and felt that a small pilot project would provide an opportunity to test the proposed program before full implementation.

Funding for the pilot was, in the words of a member of the Planning Committee, "cobbled together from every possible penny" with a lot of work "coming out of people's hides." Snohomish County provided the legal staff including the part-time Judge, Prosecutor and Defense Attorney, and court staff. In addition, the County Council made a one-time grant to cover the costs of the urine-testing program. Existing State and County treatment dollars were used for treatment for most offenders in the program. A County Department of Human Services staff member who had been part of the Planning Committee provided program coordination services in addition to her other duties until a DC coordinator was hired. Limited to 50 participants, the pilot project operated from October, 1999 through May, 2000 when a Byrne Grant was funded. A three-year implementation grant was funded beginning in January 2001 making additional resources available to support the program.

The Snohomish County program is a court-supervised, deferred prosecution, pre-adjudication program that requires regular participation in an intensive treatment program, frequent urine monitoring, and frequent appearances before the Drug Court Judge. Defendants who enter the program waive their rights to a speedy trial, agree to stipulated facts in the police report, and enter a detailed contract with the Court. If the individual successfully completes the program the pending charge(s) are dismissed. If the individual fails to meet the requirements, s/he is sentenced by the Drug Court Judge on the standing charges.

As a relatively new program, no formal evaluation of the Snohomish Drug Court has been done. The

program has now been included in an ongoing longitudinal evaluation, conducted by the Alcohol and Drug Abuse Institute at the University of Washington, of the development, characteristics, and impact of participation on Drug Court clients of six other Drug Courts in the State. This program description is the initial component of the evaluation. The information presented in this report comes from interviews with Drug Court Team members and review of relevant program documents.

DRUG COURT PROGRAM CHARACTERISTICS

Funding Source(s)

The major funding sources for the Snohomish County program include the planning and implementation grants from the DOJ/ODCP and support from Snohomish County. The three-year implementation grant provides funding for the Drug Court Coordinator, urine testing, and treatment and administrative costs. In addition to the pilot program support, Snohomish County continues to contribute to the program in two ways: first, the county provides the match funds required by the implementation grant; and, second, the part time services of the Drug Court Judge, Prosecutor, and court staff are provided at no cost to the program. The program also receives some funding from the BRYNE grant (a Federal program administered by the State Division of Alcohol and Substance Abuse) that must be used for treatment. The Northwest HIDTA (High Intensity Drug Trafficking Area) provides a small amount of funding to support evaluation, and the installation of a DC case management data system. In addition, the \$600.00 fee paid by offenders in the program provides a small source of funding. While the program is adequately funded at this time, Drug Court team members are concerned about the State funding that will be necessary to continue the program at the completion of the implementation grant in 2004.

Planning Process

Who were the players?

Planning for the Snohomish County Drug Court began in 1997 when a group concerned about the rapidly growing number of drug crimes and the associated impact of the courts and county jail began meeting to consider the feasibility of a drug court program as one approach to the problem. The group, spearheaded by Everett Police Department and Ms. Cami Hart from the County Department of Human Services, included representatives from the Snohomish County Council, the offices of the County Prosecutor and Public Defender, the County Departments of Corrections and Human Services, Superior Court Judge Thorpe, chemical dependency treatment providers, and other community and business leaders. While the group attempted to include representatives from Snohomish County law enforcement agencies, the efforts were not successful on a sustained basis. Thus, there was no consistent input from law enforcement in the planning process. The work of this group culminated in the submission of a Drug Court Planning Grant application to the Department of Justice/Drug Court Program Office (DOJ/DCPO) in Spring 1998. Many members of the original Planning Committee continued their membership in the current Drug Court Planning/Advisory Committee that meets monthly.

Program goals and objectives

The overall mission of the Snohomish County Drug Court program, also known as CHART (Choosing Healthy Alternatives—Recovery and Treatment), is to reduce drug-related crime within the community through collaborative relationships between the criminal justice system and the chemical dependency treatment community. The primary goal is to provide a comprehensive program of drug treatment and ancillary services for individuals arrested for eligible felony drug related crimes in order to reduce crime and improve the quality of life in the community. The specific goals and objectives of the program are to:

- Promote public safety by reducing substance abuse and recidivism among non-violent substance-abusing offenders.
- Reduce addiction related crime by treating the underlying addiction;
- Increase the effectiveness of treatment and improve the quality of life for court-involved clients. (Snohomish County Drug Court Implementation Grant)

Target Population

The target population is adults charged with a drug-related felony who meet the following conditions:

- charged in Snohomish County
- no indication of a commercial operation in the charged offense;
- no history of sex or violent offenses,
- no other pending felony charges, and,
- no more than five prior felony convictions excluding prior drug convictions.
(Snohomish County Drug Court Participant Handbook)

The initial target population criteria limited the number of prior felony convictions to two. However, experience with the pilot program suggested that this requirement made the program inaccessible to offenders who were otherwise appropriate participants, and made it more difficult than anticipated to recruit individuals into the program. Based on this experience the Planning Committee and Drug Court team decided to increase the number of prior convictions with the stipulation that the DC Prosecutor would carefully screen offenders with previous felonies before they were offered admission to the program. In addition to these legal criteria, the program targets individuals who are addicted rather than those with less serious problems with substance use.

Implementation Process

What facilitated implementation?

A number of factors facilitated implementation of the DC program. The broad based membership of the Planning Committee helped develop community awareness of the potential value of a DC program and encouraged early community involvement and support for the program. The DOJ/DCPO planning grant provided technical support through training conferences and other resources that made it possible for the Planning Committee to develop a strong, carefully designed Drug Court program and implementation plan based on best practices from existing programs around the country. The continuity between planning and actual implementation provided by Judge Thorpe's participation in the Planning Committee and subsequent assumption of the Drug Court judgeship has also been an important facilitating factor.

Although Judge Thorpe is the only member of the current DC team who was a member of the original Planning Committee, the members of the team worked together during the pilot program and have developed a shared sense of the purpose and goals of the program and a commitment to the teamwork necessary to realize these goals. Their commitment and ability to work as a team is another important facilitating factor in the successful implementation.

The community support (nurtured in part by the nature and efforts of the Planning Committee) demonstrated in the County funding the DC pilot project when Federal funding was unexpectedly delayed was very important in facilitating implementation, as was the pilot project itself. The pilot provided an opportunity to test the program design with a small number of participants and to make improvements to strengthen the program before it began full scale operation in June 2000 with funding from the Bryne Grant and later the DOJ/DCPO implementation grant. The modifications will be discussed in more detail later in the report.

Degree of Implementation

The Snohomish County program has fully implemented its organizational and operational plan and is in the process of achieving the projected full caseload of 150 active participants. By the end of January 2001, 106 offenders had been admitted to the program. (Information is not available on the number of people who were referred to the program but were not admitted.) Sixty-one were active participants and two had successfully completed the program. Two others had been transferred to DC programs in other counties. Seventeen had been terminated for various reasons including new arrests, non-compliance with program requirements, and offender's decisions to discontinue participation. Another twenty-four individuals had opted-out of the program, i.e. decided not to enter during a two week trial period. Thus, of the 106 individuals admitted to the program between beginning the pilot project in October 1999 and January 2001 approximately 60% were either still active or had graduated for a retention rate of approximately 60%. Approximately 16% had been terminated due to failure to meet the re-

quirements of the program while approximately 23% had decided not to participate during the two-week trial period.

(Snohomish County Drug Court Facts, 1/31/01)

At the present time the program does not have reliable information on the number of individuals referred to the program who were found ineligible either because they did not meet legal eligibility criteria, were not addicted, or had other problems such as severe mental illness that would make it difficult to participate in the program. The DC Prosecutor estimates that less than 10% of the cases he screens fail to meet legal eligibility criteria.

Nor does the program have reliable information of the number of offenders who potentially met the legal criteria for DC referral but had no contact with the program, or the number who received some initial information about the program but were not interested in referral. The DC Defense Attorney estimates that between 20 and 50% of drug related felony charges never come to the attention of the DC program. Thus, it appears that there are a significant number of offenders who are potential DC participants about whom little is known. This group may be an important source of participants.

Program Modifications

Modifications in the original program design have been in two areas: timing and process of screening and program entry, and eligibility criteria. Data from the pilot project provided the impetus for the modifications.

Changes in Screening and Program Entry Process: The first major area of change has been in the timing and process of screening and program entry. Based on the DC principle of early identification and prompt entry into the program (National Association of Drug Court Professionals, January 1997), the original proposal called for a process of in-custody screening and selection. Each morning the DC Prosecutor would receive a list of cases in-custody for drug related charges. He would then file charges on individuals who passed a first level screening and refer them to the DC Defense Attorney who explained the DC program and obtained consent for referral. Offenders were seen as soon as possible by the Drug Court coordinator for addiction screening. Those eligible were given a Court date for the next day if possible but within the week. Most were then released on personal recognizance. It quickly became clear that very few individuals were screened out, and there was a very high acceptance rate of the DC option. However, there was a correspondingly high no-show rate for the Court appearance, as well as a high opt-out rate among those who did keep the appointment. The in-custody approach was labor-intensive and had an unexpectedly low rate of program entry.

Based on these findings, the DC team decided that the high acceptance rate reflected decisions based on the opportunity the DC option provided to be released from custody vs. a desire to participate in the program. In addition, offenders were often still impaired when the decision was made and did not understand the DC option. Overall, the team decided that in-custody recruitment was inefficient and ineffective in reaching the goals of the program, and developed the current process.

The referral process is now initiated by a defense attorney (most often the DC Defense Attorney) who identifies cases s/he is handling as potential DC cases and asks the DC Prosecutor to screen for legal eligibility. Legally eligible individuals who are interested in the program must then contact the DC Coordinator for an addiction status screening. Individuals found eligible by the Coordinator are given an immediate DC appearance date and begin the opt-in process. In contrast to the initial entry process, in the current system very few offenders are seen in-custody, there are fewer no-shows for the initial Court appearance, and individuals enter the programs later in the legal process with a much greater range in time between the offense and DC entry. While some continue to enter relatively soon after the drug related offense, many wait until charges are filed to consider the DC option.

It is common for individuals arrested for drug related crimes to be released from custody before charges are filed. County Prosecutors then have up to three years to file although most charges are filed within six to twelve months. Since the charges are an important factor in the possible legal consequences, individuals knowledgeable about the criminal justice system are likely to wait for charges to be filed. Although the Drug Court team has not formally examined the effects of these changes on program entry, there is a shared sense among the team that the current process is more resource efficient and has not reduced the number of eligible individuals who enter the program. There is also some sense among members of the team that individuals who enter later in the

legal process do better in the program.

Changes in Eligibility Criteria: The legal criteria for Drug Court entry in the original program design were quite conservative reflecting the concern among the Snohomish County legal community that the program might be too lenient on drug crimes and increase risks to public safety. Individuals with more than two prior felonies or with drug related crimes other than possession of limited quantities of controlled substances were not eligible for the program. By January 2000, it was clear to the Drug Court team and the Planning Committee that these criteria severely limited eligibility and ruled out many offenders for whom the program was appropriate. At that time, the Planning Committee, with the support of the Office of the County Prosecutor, decided to increase the number of prior felonies to five.

While this change increased the number of eligible individuals, it was still difficult to fill the program, and the team felt that many individuals who were appropriate for the program were still denied access. By Summer 2000, the Planning Committee began to consider the possibility of including drug related property crimes in the legal criteria. In November, again with the support of the Office of the County Prosecutor, drug related property crimes, with the exception of burglary, were added to the legal criteria. Although the legal criteria became more inclusive as the program developed, the exclusion of crimes involving violence and the use of weapons has not changed. Overall these changes in eligibility criteria have had the effect of increasing the number of offenders who are able to access the Drug Court program and have increased the ability of the program fill the available Drug Court slots.

Organization

Frequency of Court

The Snohomish Drug Court meets weekly for two to three hours. The Drug Court team meets before the court session to review the cases that will be heard and to consider other issues pertinent to the program. Team members describe the team meeting as a time of information sharing, case discussion, and shared decision-making. Although a weekly meeting is adequate at this time, as the caseload increases the program is facing the need to increase the Drug Court to twice weekly which may be difficult both for Court space and the time team members have.

Team Members/Key Players

Members of the Drug Court team include the Judge, a prosecuting attorney from the Office of the County Prosecutor, a defense attorney from the Office of the Public Defender who are permanently assigned to DC on a part-time basis, a full time Drug Court Coordinator who is a County Department of Human Services employee, and a representative from each of the two treatment agencies that are contracted to provide services to DC participants. These roles are similar to those in the other Drug Court programs in the State and will be discussed only briefly.

Judge Thorpe, the DC Judge since the inception of the program, is seen as the overall manager and final supervisor of all aspects of the program. Although the program operates with a strong sense of teamwork and shared decision making, the Judge has the final authority and responsibility for decisions about admissions, sanctions, terminations, and graduation. He carries a full judicial assignment in addition to the Drug Court responsibilities.

The Drug Court Prosecutor is the gatekeeper to the program although the initial screening is done by the Defense Attorney who refers cases to the Prosecutor for closer legal screening. He describes his key role as protecting public safety and to meet this responsibility he not only screens potential participants for the specific DC admission criteria. He also looks for patterns of behavior such as a history of disregard for Court orders and other repeated behaviors that, while technically within DC criteria, suggest an unacceptable public safety risk. As a member of the DC team he attends court sessions and the pre-court team meeting and provides input on sanctions and termination decisions. In addition to the DC work that requires between 12 and 15 hours weekly, he carries a trial load with some adjustment for the responsibilities of DC. While this works well most of the time, problems can develop when trial responsibilities conflict with DC sessions. In those situations, another attorney from the Prosecutor's Office is assigned to DC, which makes continuity difficult.¹⁸

The DC Defense Attorney is responsible for informing potential participants of the Drug Court option, providing initial information about the program, and referring cases to the DC Prosecutor for legal screening. She also ensures that defendants understand the rights they are waiving as they opt-in to the program. Although the DC Defense Attorney represents around 90% of offenders in the program, some have private attorneys. In these cases, the DC Defense Attorney acts as liaison between private attorneys and the DC program. Like other team members, the Defense Attorney attends all Drug Court sessions and team meetings. The Defense Attorney estimates that DC requires between 50-60% of her time although she carries a regular caseload in the Office of Assigned Council.

The Drug Court Coordinator, a full-time position in the County Department of Human Services, is responsible for the overall administration and coordination, and day-to-day management of the program including the DC MIS system. She is responsible for linkages between the Court and the treatment agencies, and manages the multiple communications among components of the program. In addition to the management responsibilities, she has an active role with DC participants. She is responsible for initial screening for addiction status and amenability to treatment. The screening interview is also used to gather demographic data, and identify other service needs such as assistance with housing and/or transportation, access to appropriate entitlement programs, etc. In addition, she develops and supports collaborative relationships among agencies, and works on time consuming issues with individuals when requested by a treatment agency. In summary, the coordinator provides the “glue” that holds the program together.

A staff member from each of the two treatment agencies, Catholic Community Services and Evergreen Manor, acts as the DC Treatment Coordinator and is a member of the DC team. Both are involved in the treatment program offered by the agency and are responsible for coordinating treatment activities, case management and the random urine testing, monitoring participant progress and providing timely reports to the DC coordinator about progress and any problems that may be developing. Both attend all Drug Court sessions and team meetings and are fully participating members of the Drug Court Team.

Who are the treatment providers?

Two treatment agencies, Catholic Family Services and Evergreen Manor, have contracts with Snohomish County to provide specified treatment services to Drug Court participants. Both are well established, private, non-profit, fully licensed chemical dependency treatment programs that provide a wide range of services. The agencies and the treatment program will be discussed later in the report.

Participant Movement Through Drug Court Program

Criteria for Drug Court Admission

Admission criteria include both legal and clinical components. The legal criteria include:

- Age 18 or older;
- charged in Snohomish County with a drug related felony (excluding burglary);
- not in-custody;
- no indication of a commercial operation in the charged offense;
- no history of sex or violent offenses,
- no other pending felony charges in Snohomish or any other County;
- no more than five prior felony convictions.

The clinical criteria include:

- Addiction to one or more illegal substances;
- A strong desire to address and overcome the addiction;
- A treatment evaluation finding that the individual is an appropriate candidate for treatment. CD

(Snohomish County Drug Court Participant Handbook)

The last clinical criterion is somewhat general and broad and was designed to screen out individuals who,

for reasons such as severe mental illness, would be unable to meet the stringent requirements of the DC program.

How/When is the decision made to offer Drug Court option?

The decision to offer and/or enter Drug Court is a multi-stepped process made over a 2-3 week period by both DC team members and the offender. The first decision, made by the Defense Attorney and the defendant, is to ask the DC Prosecutor to review the case to determine legal eligibility. If legally eligible, the defendant must see the DC Coordinator to determine addiction status, assess suitability for the program, and to indicate his/her agreement to participate. At that time a DC appearance date is set and the defendant is referred to a treatment agency for an evaluation and to begin the random urine-monitoring program. In the initial DC session the individual signs the DC contract and enters the two-week opt-in period. If at the end of the two weeks either the defendant or the DC team decides against admission, the contract is destroyed and the defendant returns to regular judicial processing.

In the DC contract the individuals agrees to the following requirements and conditions:

- Attend all court sessions and other appointments;
- Follow the treatment plan developed by the treatment agency;
- Participate in all treatment and other programs to maintain sobriety and a crime free life system.
- Allow inspection of residence by DC coordinator;
- Obey all laws and expect new charges for any criminal act while in DC;
- Pay all fees, fines, or restitution as directed by the DC Judge;
- Pay restitution on a prescribed schedule and expect termination from the DC program if schedule is not followed;
- Inform the DC program and treatment agency of changes in address, phone number;
- Remain in the State unless permission to travel is given by the DC Team;
- Become employed, or actively seek employment, attend school, or pursue a GED;
- Submit urine samples as requirement by the DC program and/or treatment agency;
- Expect termination if monitoring requirements are not met or if tests show consistent drug use;
- Remain in the program for the required time of 12 to 18 months;
- Sanctions imposed by the DC Judge for failure to follow the terms of the agreement which may include jail time or termination from the program;
- Sign any and all releases necessary to monitor progress in the DC program;
- Waive confidentiality of medical, treatment, or social service records.

(Snohomish County Superior Court, CHART Program Contract: Notice of Responsibilities)

If the defendant elects to enter the program at the end of the opt-in period, s/he signs a Defendant's Agreement to Enter the CHART Program: Acknowledgment of Advice of Rights and Waiver of Right agreeing to stipulate to the facts presented in the existing evidence and waiving the rights to challenge the legality of the evidence, to a speedy or jury trial, and to call witnesses or testify. Furthermore, s/he agrees that if terminated from the program the DC Judge will determine guilt on the pending charge based on existing evidence. Those who decide not to enter the program return to regular justice processing without prejudice. The opt-in decision is made at the third DC appearance.

(Snohomish County Superior Court, Defendant's Agreement to Enter CHART Program, Acknowledgement of Advice of Rights and Waiver of Rights)

What information about Drug Court is the Defendant provided?

Information about DC is offered in several stages, by a number of individuals, and in a number of forms. The Defense Attorney, the first source of information, provides a brief description of the program. The DC Coordinator provides the most detailed information both with verbal descriptions, and a detailed Participant Handbook that describes the program philosophy, requirements, treatment program, and criteria for graduation in clear and very specific detail. The requirements and expectations are again reviewed at the treatment agency evaluation.

¹⁸ In late April 2001 a prosecuting attorney was assigned to the Juvenile and Adult Drug Court Programs on a full-time basis spending two days with the Juvenile and three with the Adult Drug Center.

During the first DC appearance the Judge again describes the program and the terms of the contract. Those who enter the opt-in period receive a copy of the very explicit DC contract.

Evaluation for treatment

Treatment evaluations are done by the two treatment agencies that provide DC treatment services. Both agencies use an ASAM (American Society of Addiction Medicine) based evaluation instrument that assesses the impact of chemical dependency in six major life dimensions as required by the State. Both agencies also use the DASA TARGET evaluation instrument to document severity and frequency of substance use. Evaluation information is used to develop an initial treatment plan. Based on the clinical evaluation, the treatment agencies may recommend against admission to the DC program. Although such recommendations are rare, findings of serious mental illness and/or a lack of commitment with a significant history of multiple treatment failures can lead to a negative recommendation. Recommendations are reviewed by the DC Team before a final decision is made.

Defendants are expected to enter the recommended treatment activities at the time of the initial evaluation. Participation in the random urine-monitoring program also begins at evaluation. Participation in treatment and the testing program are among the data the DC team considers in decisions about offering admission to the program. The treatment programs will be described in more detail later in the report.

When does the defendant actually become a Drug Court Participant?

Individuals formally enter Drug Court at the Drug Court hearing at the end of the two-week opt-in period when the decision to enter the program is made by both the defendant and the Drug Court team. After this, the individual cannot withdraw from the program without penalty. If the individual does not appear for the opt-in hearing s/he is automatically opted-into the program.

Consequences of non-completion

Termination from the program is the most severe response to client non-compliance, and usually occurs only after other interventions have been exhausted. The decision to terminate is made by the DC Team although the participant may ask to leave the program or may drop out. If participants fail to appear or abscond, they are placed on bench warrant status. In any case, the consequence of non-completion is being sentenced by the Drug Court Judge to serve the sentence appropriate to the original charge(s). Although all members of the Drug Court team provide input about the individual's compliance with the program and can recommend program termination, the final decision about program retention and completion remains with the Drug Court Judge.

Court/Participant Interaction

With whom? How often?

After entering the program the participants' primary interaction with the Court are with the Judge and the Drug Court Coordinator. Interactions with the Judge occur during court sessions. The frequency of interaction is determined by the defendant program phase, compliance with program requirements, and general progress in the program.

During Phase One, two to eight weeks in length, the defendant is seen in Court on a weekly basis and the Judge takes a very active role in reinforcing expectations, praising accomplishments, and imposing sanctions as necessary to encourage compliance. In Phase Two, typically three to eight months in duration, court appearances are first scheduled on a biweekly basis. However as the defendant progresses in Phase Two, the schedule may be changed to tri-weekly or monthly. Phase Three, typically two to six month in duration, is characterized by monthly court appearances. These are the minimum number of court appearances in each phase and contacts may be increased if the participant is not doing well in the program. Appearances are scheduled based on information supplied by Drug Court team members at the weekly team reviews of client progress. During all phases of the program the Judge continues to play an important role with participants in making expectations clear, and encouraging compliance with sanctions and incentives.

The importance of the interactions between the Judge and defendant and the sense of relationship that

characterizes the interactions is apparent in observing the Drug Court. Participants share details of their lives such as relationships with significant others, problems with children, and problems they are having meeting treatment requirements, and controlling their substance use. Judge Thorpe seems to know the defendants and provides firm limits as well as praise and encouragement.

Many DC participants also interact frequently with the DC Coordinator. She assists with housing and transportation, and helps individuals make connections with other services in the community such as education and employment programs. In addition, she assists with access to appropriate entitlement programs. While the treatment providers have primary responsibility for case management services, the DC Coordinator may become involved in complicated, time intensive cases when requested by either the client or the treatment provider.

Monitoring Compliance

The Court has a primary role in monitoring compliance with all aspects of the treatment program and in responding consistently and quickly to incidents of non-compliance. Aspects of treatment that are monitored include abstinence from substance use, participation in Twelve Step programs, and court-ordered treatment activities. The Court relies heavily on the treatment agencies for the information necessary to monitor compliance.

Substance Use

Court ordered urine testing is used to monitor substance use. Both treatment agencies provide a random testing program in which observed specimens are collected and sent to Comprehensive Toxicology Services for analysis. Frequency of testing in related to program phase and may be increased regardless of the phases if results are positive. Participants in Phase 1 are tested four to six times weekly. In Phase II, testing is done two to four times weekly, while in Phase III testing ranges from weekly to monthly. Although these are the standard test frequencies, individual UA requirements vary based on treatment progress, drug of choice, and overall compliance. Breath analysis may also be used as needed by to determine the use of alcohol.

Positive finding and failure to comply with testing are reported immediately to Drug Court Coordinator and the information is shared with the Drug Court team in the next team meeting. Although team members are involved in recommendations about actions Court response to positive tests or non-compliance, the final decision rests with the Drug Court Judge. Sanctions are a predictable response to positive test findings. Sanctions are discussed later in the report.

Treatment Participation

Participants are expected to attend a minimum of three community based support group meetings (NA/AA) a week and to provide verification of attendance throughout their time in DC. Missed meetings must be made up. They are also required to choose a sponsor from the support group and work the steps of the group with the sponsor. The treatment providers track attendance and report non-compliance to the DC Coordinator and the DC team. Continued failure to participate leads to an appearance before the Judge and may lead to sanctions, a common response to non-compliance with support group meetings.

Participation in outpatient treatment activities, including group and individual treatment, at specified frequencies depending on program phase is monitored at the agency level, and reported to the Drug Court Coordinator who keeps the Drug Court team informed. Treatment services are also reported in TARGET. Individuals who fail to meet treatment expectations may be scheduled for more frequent court appearances and may receive a range of sanctions. The specific treatment requirements will be discussed more fully later in the report.

In summary, the responsibility for monitoring participant behavior in relation to Drug Court program requirements is shared among treatment providers, the Drug Court Coordinator, both attorneys, and the Judge. While members of the Drug Court team have input into the response to non-compliant behavior, the Judge has the final responsibility for the judicial response to participants who do not meet the requirements.

Sanctions

Sanctions are used to emphasize and enforce participant accountability to meet the strict expectations and

requirements of the program, and to provide more structure and support when it is needed. Sanctions are leveled for missed treatment, missed support group meetings, positive or missed UAs, missed court appearances, and other violations. Although final sanction decisions are made by the Judge, the DC team plays a very active role in the process of identifying sanctions that are personalized to support the treatment plan of each participant. Sanctions include but are not limited to:

- Verbal admonishment;
- Increased supervision and treatment requirements;
- Increased UAs
- Community service
- Work crew assignments;
- Jail time.

(Snohomish County Drug Court Implementation Grant)

Incentives

Incentives are used to recognize and reward participation and progress. The most frequently used incentives are public recognition of progress during court sessions and acknowledging to the participant and the entire court the participant's hard work and accomplishments. Other incentives include certificates at the completion of each phase of treatment, graduation to the next phase, decreases in supervision, treatment frequency, and UAs, and tokens from the Judge for exceptional progress.

(Snohomish County Drug Court Implementation Grant)

While these incentive serve the purpose, a number of team members expressed a desire to find some additional ways to recognize and reward participants who are doing well.

Graduation

To graduate from the Snohomish County DC program participants must meet the following requirements:

- Successful completion of at least 12 months of chemical dependency treatment;
- Six continuous months of sobriety demonstrated by drug testing results;
- Maintain connection with a sober support group and sponsor;
- Have a high school diploma or GED;
- Be employed;
- Payment of all DC related fees;
- Have a plan for ongoing recovery.

(Snohomish County Drug Court Participant Handbook)

Successful achievement of these requirements is acknowledged by a graduation ceremony in which the progress and accomplishments are reviewed and celebrated. Participants are encouraged to bring friends and family members to graduation. Charges for the offense that led to admission to Drug Court are dismissed at the time of graduation.

The DC Judge schedules an exit interview with each graduate in which the individual is asked to provide feedback about the program including the aspects of the program that were and were not helpful. The team plans to use this information to continue to evaluate and refine the program.

TREATMENT PROGRAM CHARACTERISTICS

Number of Provider Agencies

The Snohomish County program contracts with two chemical dependency treatment agencies, Catholic Community Services and Evergreen Manor, to provide treatment services and random urine monitoring program. Both are well established, private, non-profit, multi-service agencies licensed to provide chemical dependency services. Two agencies were selected to effectively manage the projected number of participants when the

program is fully operational, and to take advantage of the strengths each program offers. Referral decisions are made by the DC Coordinator and reflect her assessment of the fit between agency and participant as well as maintaining a DC caseload balance between the agencies.

While at least 90% of individuals in the program receive treatment from the two agencies, a few participants have insurance and are able to pay for their treatment. These individuals may seek private treatment but the treatment must meet the requirements of the DC program, and the treatment provider must be willing to provide the DC the information necessary to monitor compliance and progress.

Catholic Community Services: Catholic Community Services offers a range of chemical dependency programs including but not limited to intensive and regular out-patient treatment, a MICA program, women's' treatment groups including groups on parenting and domestic violence, anger management groups, a relapse prevention program, acupuncture, and a urine testing program. Although one person (Drug Court Treatment Coordinator) is administratively responsible for the DC program and is a member of the DC team, there is not a DC treatment program as a separate entity within the agency. All DC participants are seen at entry by the treatment coordinator who, after the evaluation, develops a treatment plan based on the DC requirements. Participants are placed in regular treatment activities consistent with the treatment plan. The treatment coordinator monitors progress and compliance with treatment and urine testing, provides progress reports to the DC coordinator, and keeps the DC team informed. The evaluation, and all other services to DC clients are provided by regular agency staff in ongoing agency treatment groups. The DC treatment coordinator may lead some of the groups in which individuals in the DC program participate. Individual treatment of DC participants is provided by the treatment coordinator who estimates that she provides approximately 60% of the treatment DC participants receive at Catholic Community Services.

Evergreen Manor: Evergreen Manor offers a range of chemical dependency programs including intensive and regular out-patient treatment, a MICA program, anger management groups, domestic violence programs for both perpetrators and victims, a relapse prevention program, an alcohol and drug information school, and a monitoring program for urinalysis. In addition, the agency provides detoxification services for the County, and has a residential treatment facility.

Like Catholic Community Services, one staff member (DC Treatment Coordinator) is administratively responsible for the DC program and is a member of the DC team. There is not a DC treatment program as a separate entity within the agency. The treatment coordinator tries to see DC participants when they are referred and, after an evaluation, develops, with input from the treatment staff, a treatment plan based on the DC requirements. Participants are placed in regular treatment activities consistent with the treatment plan. The treatment coordinator monitors progress and compliance with treatment and urine testing, provides progress reports to the DC coordinator, and keeps the DC team informed. The evaluation, and all other services to DC clients are provided by regular agency staff in ongoing agency treatment groups. The DC team member may lead some of the groups in which individuals in the DC program participate and may see some participants on an individual basis. Her goal is to see DC participants at least briefly on a weekly basis. However, this is difficult given her other responsibilities in the agency. Her primary role in relation to DC participants is coordination, information tracking, and participating with the DC team.

Funding

Treatment services are funded in a number of ways. The major source of treatment funding is the DOJ/DCPO Implementation Grant. BRYNE Grant funds were used for some of the intensive treatment options. DC team members estimate that between 85 and 90% of DC participants rely on public funding for treatment. Every effort is made to fund low-income/indigent participants through state contracts such as ADATSA or Title 19 programs such as TANF and Work First. Snohomish County funds are used for some of the matching funds required to access State and Federal treatment dollars. Individuals who have insurance or the resources for private payment are expected to pay for treatment. Finally, the \$600.00 fee paid by DC participants is used primarily for treatment costs including some of the match funds needed to access State and Federal treatment monies.

Overall Treatment Services

Although the core treatment modality is intensive outpatient services, a comprehensive continuum of

services is available. The continuum includes detoxification, residential treatment, and a range of outpatient services including group and individual counseling, acupuncture, drug and alcohol education, and relapse prevention. Treatment decisions are shaped by the placement level findings from the ASAM evaluation as well as by Drug Court treatment program requirements.

Both agencies provide some case management services for Drug Court participants including referral to a vocational education and training program, and other community services that might be appropriate. Many case management services are also provided by the Drug Court Coordinator.

Treatment Program

The treatment program reflects the structure specified by the Snohomish County Drug Treatment Court. This structure and related program requirements are based on recommendations and standards from the Center for Substance Abuse Treatment, US Department of Health and Human Services (1996), and the National Association of Drug Court Professionals (1997), and are common to Drug Court Programs across the country. Individual enters the treatment and monitoring program on the initial contact with the agency. Thus, individuals are considered to be in treatment during the two-week opt-in period before they have made a final decision about the DC option.

Treatment is expected to last between 12 and 18 months and is divided into three clearly defined phases. Although there is an anticipated time for each phase, the time an individual spends in a phase is determined by his/her ability to meet clearly specified completion criteria and move to the next phase. Decisions about phase movement are made by the DC team. An area of potential confusion for DC participants is the fact that while the DC phases are directly related to treatment requirements, they many not completely overlap with phases of treatment as they are defined by the treatment agency. Thus, while decisions about DC phases are made by the DC team, the treatment agency may make independent decisions treatment phases consistent with agency programming.

Both agencies offer an eight-week Community Trades and Careers (CTC) course that participants are required to attend during the time they are in treatment. The course brings community resources into the treatment centers to prepare participants for work. Skill building to change the individual's ability to obtain and maintain employment is emphasized and vocational aptitude testing, training, assistance with job placement are offered. Topics of the course include resume development, and communication skills. The course is financially supported by Snohomish County.

(Snohomish County Drug Court Implementation Grant)

The requirements, anticipated length, and completion criteria of the treatment phases are as follows. The treatment groups and the mix of individual and group treatment in each phase are determined by the individualized treatment plan based on the unique treatment needs of the individual. Treatment plans are reviewed on a monthly basis by the treatment coordinator in each agency. Progress and problems are reported to the DC treatment team for their input and recommendations.

Phase I: (Typically 2-8 weeks duration)

Requirements

10 treatment hours weekly including 1 individual treatment session
4-6 random urine tests weekly
3 sober support groups weekly

Completion Criteria

Active participation in treatment and sober support group
2 week of clean drug tests
All fees current
Initial contact with sober support group sponsor

Phase II: (Typically 3-8 months duration)

Requirements

3-5 treatment hours weekly including 1 individual treatment session
2-4 random urine tests weekly
3 sober support groups weekly

Completion Criteria

Active participation in treatment and sober support group
Consistently clean drug tests
All fees current
Selection of home group
Ongoing work with support group sponsor

Phase III (Typically 2-6 months duration)

Requirements

2-4 treatment hours weekly including 1 individual treatment session
Weekly to monthly random urine tests
3 sober support groups weekly

Completion Criteria

Active participation in treatment
Consistently clean drug tests
All fees current
Ongoing work with support group sponsor,
Weekly home group attendance
Gainful employment or in school
Long-term goals identified and a plan to maintain recovery

In addition to these requirements, individuals must attend regularly scheduled DC status hearings and honor any other conditions imposed by the DC judge.

(Snohomish County Drug Court Participant Handbook; Snohomish County Implementation Grant)

Length of Treatment Program

The program is designed as a 12-18 month program. The program has not been operational long enough to provide a reliable look at the average time participants will take to graduate. The phase completion requirements as well as graduation requirements are quite stringent. Among older programs in the State the time required to complete the program varies and is influenced by a number of factors including the tolerance of a specific Judge and Drug Court team to relapse, and the requirements for graduation or termination. As more participants graduate, it will be possible to determine the time required to successfully complete the program and the variables that contribute to program length.

Treatment Reporting

At the present time treatment reporting within the program is not automated. The Treatment Coordinators in the two agencies provide written records to the DC Coordinator who enters relevant information into a DC database that she has developed. Although the program anticipates using the CADI case management system when it is available which should support the development of a information system that links the various component of the program, this potential is not yet available. The treatment agencies do not use the same data systems. Evergreen Manor does not have an automated internal data system. Treatment records are in individual charts. Both treatment agencies do use the DASA TARGET data system to report treatment activities.

REFERENCES

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