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Ramsey County DWI Court
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Process, Outcome, and Cost
Evaluation Report

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Informing policy, improving program
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# Table of Contents

**Executive Summary** .................................................................................................................. I

**Background** .................................................................................................................................. 1

- Process, Outcome, & Cost Evaluation Description and Purpose .................................................. 1

**Section I: Process Evaluation** ...................................................................................................... 3

- Process Evaluation Activities and Methods .................................................................................. 3
  - Electronic Program Assessment ................................................................................................. 4

- Process Results ................................................................................................................................ 4
  - Key Stakeholder Interviews ...................................................................................................... 4
  - Focus Groups ............................................................................................................................ 4
  - Document Review ....................................................................................................................... 4

- Key Component #1: Drug courts integrate alcohol and other drug treatment services with justice system case processing ................................................................. 4

- Key Component #2: Using a non-adversarial approach, prosecution and defense counsel promote public safety while protecting participants’ due process rights. ................. 9

- Key Component #3: Eligible participants are identified early and promptly placed in the drug court program .................................................................................................................. 10

- Key Component #4: Drug courts provide access to a continuum of alcohol, drug and other treatment and rehabilitation services ................................................................. 14

- Key Component #5: Abstinence is monitored by frequent alcohol and other drug testing .......... 19

- Key Component #6: A coordinated strategy governs drug court responses to participants’ compliance ......................................................................................................................... 24

- Key Component #7: Ongoing judicial interaction with each participant is essential. ................. 29

- Key Component #8: Monitoring and evaluation measure the achievement of program goals and gauge effectiveness ............................................................................................................. 35

- Key Component #9: Continuing interdisciplinary education promotes effective drug court planning, implementation, and operations ................................................................. 36

- Key Component #10: Forging partnerships among drug courts, public agencies, and community-based organizations generates local support and enhances drug court program effectiveness ................................................................. 38

- Additional Resources ..................................................................................................................... 40

- Summary of Process Findings and Recommendations ................................................................. 41

**Section II: Outcome Evaluation** ................................................................................................. 51

- Outcome Evaluation Methods ........................................................................................................ 51

- Sample/Cohort Selection ................................................................................................................. 52
Data Collection and Sources .................................................................................................................. 53
Data Analyses ........................................................................................................................................ 55
Outcome Evaluation Results .................................................................................................................. 59
Research Question #1: What is the impact of DWI court on recidivism? .................................................. 62
Research Question #2: What is the impact of DWI court on other outcomes of interest? ......................... 70
Research Question #3: How successful is the program in bringing program participants to completion and graduation within the expected time frame? ......................................................... 72
Research Question #4: What participant and program characteristics predict successful DWI court outcomes? ............................................................................................................................................. 73
Summary of Outcome Results .............................................................................................................. 78

SECTION III: COST EVALUATION ............................................................................................................ 81
Cost Evaluation Design and Methods ......................................................................................................... 81
Cost Evaluation Design ............................................................................................................................. 81
Cost Evaluation Methods ........................................................................................................................... 82
TICA Methodology .................................................................................................................................. 83
Cost Data Collection ................................................................................................................................. 84
Cost Evaluation Results ............................................................................................................................. 86
Cost Evaluation Research Question #1: Program Costs .............................................................................. 86
Cost Evaluation Research Question #2: Outcome/Recidivism Costs ......................................................... 90
Cost evaluation Research Question #3: Cost of Time between Arrest and DWI Court Entry .................. 97
Summary of Cost Evaluation ...................................................................................................................... 99

REFERENCES ......................................................................................................................................... 101
APPENDIX A: THE GUIDING PRINCIPLES OF DWI COURTS ................................................................. 103
APPENDIX B: MINNESOTA OFFENDER DRUG COURT STANDARDS .................................................. 107
LIST OF TABLES

Table 1. MN DWI Court Evaluation Data and Sources ......................................................... 53
Table 2. DWI Court Participant and Comparison Group Characteristics: Demographics ...... 59
Table 3. DWI Court Participant and Comparison Group Characteristics: Criminal History .. 60
Table 4. DWI Court Participant Characteristics: Other ......................................................... 61
Table 5. RDWI Completion Status by Entry Year ................................................................... 72
Table 6. DWI Court Graduate and Non-Graduate Characteristics: Demographics ............ 74
Table 7. DWI Court Graduate and Non-Graduate Characteristics: Criminal History .......... 75
Table 8. DWI Court Graduate and Non-Graduate Characteristics: Other ............................ 76
Table 9. DWI Court Graduate and Non-Graduate Characteristics: Risk and Needs Assessments and Treatment ........................................... 77
Table 10. The Six Steps of TICA ......................................................................................... 83
Table 11. Program Costs per Participant ............................................................................... 88
Table 12. Program Costs per Participant by Agency ............................................................... 89
Table 13. Average Number of Recidivism Events after DWI Court Entry per Person over 2 Years from DWI Court Entry ..................................................... 93
Table 14. Recidivism (Outcome) Costs per Participant over 2 Years ................................... 94
Table 15. Recidivism (Outcome) Costs per Participant by Agency over 2 Years ................. 96
Table 16. Criminal Justice Costs per DWI Court Participant from Arrest to Program Entry .. 98
LIST OF FIGURES

Figure 1. Average Number of Rearrests over 3 Years.......................................................... 62
Figure 2. Average Number of DWI Rearrests over 3 Years.................................................. 63
Figure 3. Percent of Individuals Rearrested over 3 Years ..................................................... 64
Figure 4. Percent of Individuals Rearrested with a DWI Charge over 3 years...................... 65
Figure 5. Percent of Individuals Rearrested by Arrest Charge at 3 Years............................. 66
Figure 6. Percent of Individuals Rearrested by Arrest Level at 3 Years ............................... 67
Figure 7. Probability of Remaining Un-Arrested over Time (Survival Function) .............. 68
Figure 8. Percent of Individuals in Crashes over 3 Years .................................................... 69
Figure 9. Percent of Licenses Reinstated over 3 Years ......................................................... 70
Figure 10. Percent of Individuals Ever on Ignition Interlock in the Year Following Program Entry.............................................................................................................. 71
Figure 11. Criminal Justice Recidivism Cost Consequences per Person: DWI Court Participants and Comparison Group Members over 2 Years ................................. 99
**EXECUTIVE SUMMARY**

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

In late 2011, NPC Research was contracted by the State of Minnesota’s Department of Public Safety, Office of Traffic Safety (OTS) to conduct an assessment of Minnesota’s DWI courts and to determine the work necessary and the feasibility of performing process, outcome, and cost evaluations in these programs. The overall goal of the DWI court project is to have a credible and rigorous evaluation of Minnesota’s DWI courts. In June 2012, it was decided to move forward with a full evaluation including a detailed process evaluation and outcome evaluation in all nine of Minnesota’s DWI court programs and a cost benefit evaluation in seven of these programs.\(^1\) This is the site-specific report for the Ramsey County DWI Court (RDWI).

The RDWI was implemented in 2005 to enhance public safety by helping repeat DWI offenders become law-abiding citizens. Currently, there are two judges, each serving in the role of RDWI judge. The judges alternately preside over staffing and court sessions, depending on scheduling and availability, and do not typically attend sessions in which they are not presiding. The program, designed to take a minimum of 13 months to complete, takes only post-conviction participants. The general program population consists of repeat DWI offenders with gross misdemeanor cases (two or more DWI offenses within 10 years) charged in Ramsey County who voluntarily agree to participate in the program. The RDWI has a capacity to serve approximately 60 participants at one time. As of March 2013, there had been 82 graduates and 36 terminated participants.

**Process Evaluation Summary.** The RDWI has been responsive to the community needs and strives to meet the challenges presented by substance-dependent individuals. This program is demonstrating good practices within each of the 10 Key Components, including good team member communication, dedicated defense and prosecuting attorneys assigned to the program, swift participant identification and entry into the program, an array of evidence-based treatment services, random and frequent drug testing, good coordination of team response to participant behavior, regular training for team members, and judges that have presided over the program long term.

Although this program is functioning well in many areas, NPC’s review of program operations resulted in some recommendations for program improvements. These included:

- **Work to streamline communication between treatment providers and the probation officer.** In order for the team to make informed and fair decisions about responses to partic-

\(^1\) No cost evaluations were performed for the Borderland Substance Abuse Court or the Roseau County DWI Court due to the very small participant samples sizes available in those programs.
To the extent possible, coordinate treatment through a single organization. The team noted during the follow-up phone call that this recommendation may be difficult to achieve, as the program does not usually have any influence on where a participant attends treatment.

Consider adjusting some program requirements for those diagnosed as substance abusers. Research has shown that identifying whether participants are substance abusers (low to moderate substance use disorder) can help ensure that appropriate care is provided and suitable expectations are imposed on participants. It is recommended that the RDWI explore alternative requirements or programs for abusers.

Review and adjust drug testing procedures to ensure effectiveness. Multiple concerns were reported during the site visit by both team members and focus group participants regarding the drug testing system. Due to the importance of maintaining integrity in drug testing, establishing a protocol (or MOU) with the drug testing center may help increase accountability. At a minimum, the sample collectors should be trained in appropriate communication skills and professionalism while collecting drug tests.

Explain the reasons for rewards and sanctions in court and be aware of the importance of appearing fair. Because this DWI court often imposes rewards and sanctions on an individualized basis, the team needs to take into consideration the appearance of unequal treatment for similar infractions. It is important to communicate the rationale behind decisions regarding sanctions, even if it seems redundant at times.

Consider decreasing the required frequency of court appearances in Phase 1. Participants in the RDWI are required to attend court once per week during Phase 1 (minimum of 90 days). As recent research has shown that court appearances every 2 weeks can have comparable or even better outcomes compared to more frequent appearances (Carey, Finigan, & Pukstas, 2008; Carey, Mackin, & Finigan, 2012; Marlowe, Festinger, Lee, Dugosh, & Benasutti, 2006), the RDWI may want to consider reducing the frequency of DWI court appearances to once every 2 weeks for some participants in the first phase.

Increase participant time spent before the judge, particularly for participants who are doing well. During the court session observation, participants spent an average of 1 minute speaking with the RDWI judge. An average of 3 minutes per participant is related to graduation rates 15 percentage points higher and recidivism rates that are 50% lower than drug courts that spend less than 3 minutes per participant (Carey, Waller, & Weller, 2011).
Outcome Evaluation Summary. The outcome analyses were primarily performed on RDWI participants who entered the DWI court program from January 2005 through August 2012 ($N = 173$) and a matched comparison group of offenders eligible for DWI court but who received the traditional court process rather than RDWI ($N = 274$).

The results of the outcome analysis for the RDWI are mainly positive. RDWI participants show reduced recidivism for all 3 years. These recidivism reductions are significant at 1 and 2 years, but are no longer significant after 3 years (see Figure A).

**Figure A. Average Number of Rearrests over 3 Years**

Overall, the recidivism findings showed that compared to the comparison group, DWI court participants had:

- 59% fewer rearrests in Year 1
- 36% fewer rearrests in Year 2
- 21% fewer rearrests in Year 3
- Half as many person (violent) arrests and felony arrests
- 50% fewer property arrests

Other outcomes of interest such as rates of license reinstatements and number of crashes in the 3 years after DWI court entry were similar for both the DWI court and comparison groups. The rate of use of the ignition interlock was exactly the same in DWI court participants and the comparison group (14% of offenders in all groups used interlock over a 1-year period).

The average graduation rate for the RDWI program is 71%, which is substantially higher than the national average of 57%. The RDWI team should continue to continue their good work in assisting

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2 Sample sizes by group and time period (1 Year, 2 Years, 3 Years): Graduates $n = 122, 106, 86$; All DWI Court Participants $n = 173, 140, 114$; Comparison Group $n = 270, 230, 191$. 
participants in addressing challenges to following program requirements to successfully complete the program.

Overall, the recidivism results show that the DWI court program has been successful in its main goals of reducing recidivism among its participants and increasing public safety.

**Cost Evaluation Summary.** The cost of the RDWI is $7,358 per participant. Compared to other cost studies completed by NPC Research, this cost is relatively low. Out of 69 DWI and drug court cost evaluations performed, the average program cost per participant was $14,372 per participant, nearly twice the cost of the RDWI program (Carey et al., 2012). The RDWI also results in a small cost savings due to decreased recidivism and fewer victimizations. The benefit due to reduced recidivism and victimizations for DWI court participants over the 2 years included in this analysis came to $1,694. Figure B provides a graph of the outcome costs for graduates, all participants and the comparison group over 2 years, including victimizations and crashes.

**Figure B. Criminal Justice Recidivism Cost Consequences per Person: DWI Court Participants and Comparison Group Members over 2 Years**

The cost savings illustrated in Figure B are those that have accrued in the 2 years since program entry (including jail sanctions). Many of these savings are due to positive outcomes while the participant is still in the program. It is important to note that if DWI court participants spent less time on probation, the cost savings would be higher. The current cost savings would take almost 9 years to recoup the investment cost per participant. However, on the encouraging side, when the yearly per participant savings for positive outcomes is multiplied by the capacity of the program per year (a cohort of 60 offenders), the total amount “saved” by the program per year due to positive outcomes for its participants (i.e., lower recidivism) is $50,820, which can then be multiplied by the number of years the program remains in operation and for additional cohorts of 60 participants per year. After 5 years, the accumulated resource savings come to $762,300 (not including program investment costs).
There are several possibilities for program adjustments that may improve program outcomes, many of which were described in the process evaluation. These include:

- Ensuring that the program is targeting high-risk/high-need offenders
- Exploring ways to allow longer terms for the DWI court judge
- Allowing longer time for court sessions, or see some participants who are doing well less often so that the judge can spend at least 3 minutes per participant
- Look for options to decrease the number of treatment agencies (one or two is best practice)
- Ensure drug testing is consistent and high quality

Although the program outcome results were somewhat mixed, overall, the recidivism and cost results were positive and there is good indication that the program is having a positive impact on its participants and can improve outcomes over time.
BACKGROUND

Drug courts and DWI courts are designed to guide offenders identified as drug- or alcohol-addicted into treatment that will reduce substance dependence and improve the quality of life for offenders and their families. DWI courts specifically target repeat driving-while-intoxicated (DWI) offenders with the goal of protecting public safety. Benefits to society take the form of reductions in future DWIs and other crimes, resulting in reduced costs to taxpayers and increased public safety.

DWI court programs follow both the 10 Key Components of Drug Courts (NADCP, 1997) and the 10 Guiding Principles of DWI Courts (NCDC, 2005). In the typical DWI court program, participants are closely supervised by a judge who is supported by a team of agency representatives operating outside of their traditional roles. The team typically includes a DWI court coordinator, case managers, substance abuse treatment providers, prosecuting attorneys, defense attorneys, law enforcement officers, and probation officers who work together to provide needed services to DWI court participants. Prosecuting and defense attorneys modify their traditional adversarial roles to support the treatment and supervision needs of program participants. Drug court and DWI court programs blend the resources, expertise and interests of a variety of jurisdictions and agencies.

Drug courts have been shown to be effective in reducing criminal recidivism (GAO, 2005), improving the psycho-social functioning of offenders (Kralstein, 2010), and reducing taxpayer costs due to positive outcomes for drug court participants (including fewer rearrests, less time in jail and less time in prison) (Carey & Finigan, 2004; Carey, Finigan, Waller, Lucas, & Crumpton, 2005). Some drug courts have been shown to cost less to operate than processing offenders through business-as-usual in the court system (Carey & Finigan, 2004; Carey et al., 2005). DWI courts, specifically, have been shown to be effective in reducing recidivism (both of DWIs and other crimes) and in reducing taxpayer costs due to positive outcomes for DWI court participants (Carey, Fuller, Kissick, Taylor, & Zold-Kilbourn, 2008).

Process, Outcome, & Cost Evaluation Description and Purpose

In late 2011, NPC Research was contracted by the State of Minnesota’s Department of Public Safety, Office of Traffic Safety (OTS) to conduct an assessment of Minnesota’s DWI courts and to determine the work necessary and the feasibility of performing process, outcome, and cost evaluations in these programs. In June 2012, it was decided to move forward with a full evaluation, including a detailed process evaluation and outcome evaluation in all nine of Minnesota’s DWI court programs and a cost evaluation in seven of these programs. No cost evaluations were performed for the Borderland Substance Abuse Court or the Roseau County DWI Court due to very small sample sizes in those programs.

The overall goal of the DWI court project was to have a credible and rigorous evaluation of Minnesota’s DWI courts.

This process evaluation was designed to include the collection of the following information:

- Jurisdictional characteristics of each of the nine Minnesota DWI courts
- Description of the eligibility criteria for participants
- Description of the DWI court team including the roles and responsibilities of each team member
Ramsey County DWI Court
Process, Outcome, and Cost Evaluation Report

- Description of the DWI courts’ program phases and requirements

The subsequent **outcome evaluation** was designed to provide the following information:

- Recidivism outcomes of all DWI court participants, from date of entry in the DWI court, and a comparison of those outcomes to a matched group that received traditional court monitoring over a period of 12, 24, and 36 months
- Prediction of successful outcomes based on program and participant characteristics
- Description of significant predictors of recidivism at 12, 24, and 36 months

The subsequent **cost evaluation** was designed to gather information that allowed the calculation of:

- Program-related costs such as the DWI court status review hearings, treatment, drug tests, case management, jail sanctions, etc.
- Outcome-related costs such as arrests, court cases, probation, jail, prison, etc.

Evaluation activities included administration of an electronic assessment, interviews performed by telephone and in-person (with key stakeholders, program coordinators at each site, and other team members as needed), site visits to each DWI court, participant focus groups, and administrative data collection from multiple agencies.

This report describes the results of the evaluation of the Ramsey County DWI Court. Details about the methodology used in the evaluation of this program are provided in each of the three sections of this report: 1) process, 2) outcome, and 3) cost.
SECTION I: PROCESS EVALUATION

The purpose of a process evaluation is to establish whether a program has the basic components needed to implement an effective DWI court. The assessment process examined the extent to which the program was implementing the 10 Key Components of Drug Courts (NADCP, 1997) and the 10 DWI Court Guiding Principles as well as the best practices that research indicates are related to positive outcomes. Activities, described in more detail below, included a site visit to the drug court, administration of an electronic assessment, and interviews in person and/or by telephone with the program coordinator and other drug court team members.

Ramsey County DWI Court Process Evaluation Activities and Methods

For the process evaluation, NPC staff conducted the following activities with Ramsey County DWI Court (referred to as RDWI in the remainder of the report):

1. Employed an electronic survey to gather program process information from the DWI court coordinator (in collaboration with other DWI court team members).
2. Conducted a site visit to:
   a. Observe a staffing meeting and DWI court session.
   b. Perform interviews with key DWI court team members to learn more about the program’s policies and procedures and how they are implementing these as they relate to the 10 Key Components, 10 Guiding Principles, and best practices. Interviews also assisted the evaluation team in focusing on day-to-day operations, as well as the most important and unique characteristics of the RDWI.
   c. Facilitate a focus group with current program participants and graduates as well as previous participants who did not complete the program.
3. Reviewed program documents including the policy manual, participant handbook, participant orientation information, forms used to process participants, previous evaluation reports, and other program-related documents.
4. Reviewed a data elements worksheet with program staff to locate/collaborate data for the outcome and cost evaluations.
5. Conducted a detailed review of the program data collection process and data availability (including data available for a comparison group).
6. Facilitated a discussion of practices observed and enhancement recommendations at a teleconference of DWI court staff, court administration, and NPC assessment staff to ensure accuracy and determine feasibility of enhancements.

A synthesis of the information collected through these activities provided NPC with a good understanding of the DWI court’s organization and current processes, assisted the assessment team in determining the direction and content of further questions and technical assistance needs and supports, and informed the outcome and cost evaluations of the program.

This section of the report is the main product of the process evaluation. It summarizes program characteristics and practices, analyzes the degree to which this program is following guidelines based on the 10 Key Components and 10 Guiding Principles, and provides commendations on best practices and recommendations for program improvement and enhancement.
ELECTRONIC PROGRAM ASSESSMENT

An electronic assessment was used to gather program process information from the FJDWI staff. This assessment, which provides a consistent method for collecting structure and process information from programs using a drug court model, was developed based on three main sources: NPC’s extensive experience and research on drug courts, the American University Drug Court Survey, and a published paper by Longshore et al. (2001), which lays out a conceptual framework for drug courts. The assessment is regularly updated based on information from the latest drug court research in the literature and feedback from programs and experts in the field. The assessment covers a number of areas, particularly topics related to the 10 Key Components, including eligibility guidelines, specific program processes (e.g., phases, treatment providers, drug and alcohol testing, fee structure, rewards/sanctions), graduation, aftercare, termination, and identification of team members and their roles. The use of an electronic assessment allows NPC to begin building an understanding of the program, as well as to collect information to support a thorough review of the site.

KEY STAKEHOLDER INTERVIEWS

Key stakeholder interviews, conducted in person and by telephone, were a critical component of the process study. NPC staff conducted detailed interviews with individuals involved in the administration of the DWI court, including the judge, the DWI court coordinator, treatment provider, case managers, probation officers, and attorneys.

NPC’s Drug Court Typology Interview Guide was referenced for detailed questions about the program. This guide was developed from the same sources as the online assessment and provides a consistent method for collecting structure and process information from drug courts. The information gathered through the use of this guide assisted the evaluation team in focusing on the day-to-day operations as well as the most important and unique characteristics of the DWI court.

FOCUS GROUPS

NPC staff conducted a focus group with current participants during the site visit. The focus group provided participants with an opportunity to share their experiences and perceptions regarding the DWI court process.

DOCUMENT REVIEW

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

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

The following is a detailed description of the results of the process evaluation for the RDWI program. To provide background for these results, the 10 Key Components of Drug Courts and DWI Court Guiding Principles are described along with the associated research on best practices within each component. A summary of the overall commendations and recommendations is provided at the end of this section (Section I).

The RDWI was implemented in January 2005. There are currently two judges assigned to the RDWI, who alternately preside over court sessions, depending on their schedules/availability. In the event of one judge’s absence, the other is available to maintain continuity within the program, but there is typically only one judge present who participates in staffing and court on a regular basis. This program, which is designed to take a minimum of 13 months to complete, accepts post-conviction participants only. The general program population consists of repeat DWI offenders charged in Ramsey County (two or more DWI offenses within 10 years) who are substance dependant and who voluntarily agree to participate in the program.

**Key Component #1: Drug Courts Integrate Alcohol and Other Drug Treatment Services with Justice System Case Processing.**

The focus of this component is on the integration of treatment services with traditional court case processing. Practices that illustrate an adherence to treatment integration include the role of the treatment provider in the drug court system and the extent of collaboration of all of 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 treatment, the judge, the prosecutor, the defense attorney, the court coordinator, case managers, and other community partners. Involvement of 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 are valued.

Key Component #1, as well as the associated DWI Court Guiding Principle on forging relationships in the community, focuses on the collaboration of various agencies. The partnerships include the integration of treatment services with traditional court case processing, and the engagement of various other criminal justice and service agencies, including probation, law enforcement, and community partners (employment, housing, transportation, and other groups). Each professional who interacts with the participants observes them from a unique perspective, at different times of the day or week, and under varied circumstances. This offers holistic, useful information for the team to draw upon in determining court responses that will change participant behavior. Participation from all partners contributes to the strength of this model and is one of the reasons it is successful at engaging participants and changing behavior. For these collaborations to be true “partnerships,” regular meetings and communication with these partners should occur. If successful, the DWI 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.

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^4 DWI Court Guiding Principle #5
National Research

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 (Carey et al., 2005; Carey, Finigan, & Pukstas, 2008; Carey, Mackin, & Finigan, 2012). Greater law enforcement involvement increased graduation rates and reduced outcome costs (Carey, Finigan, & Pukstas), and participation by the prosecution and defense attorneys in team meetings and at DWI court hearings had a positive effect on graduation rates and on recidivism costs (Carey, Finigan, & Pukstas; Carey, Waller, & Weller, 2011).  

Recidivism costs are the expenses related to the measures of participant outcomes, such as rearrests, 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.

Research has also demonstrated that drug courts with fewer treatment agencies resulted in more positive participant outcomes, including higher graduation rates and lower recidivism costs (Carey et al., 2005; Carey, Finigan, & Pukstas, 2008; Carey et al., 2012).

RDWI Process

- The team is currently composed of a DWI court coordinator, city attorney, defense attorney, probation officer, surveillance technician, conditional release agent, two volunteer treatment representatives from outside treatment providers, and two judges. The judges assigned to DWI court regularly rotate approximately every 2 to 3 years (as assigned by the Chief Justice), based on the staffing constraints of the other divisions (primarily the need to rotate judges through the family court). Judge rotations within the DWI court do not occur at the same time, which allows for overlap of an experienced DWI judge with a new judge.

- The team noted that a law enforcement representative previously participated on the team, but funding for the representative to attend staffing and court was discontinued 2 years ago. Home visits are completed primarily by the surveillance technician, who works an average of 19 hours per week completing this duty.

- Staffing sessions, where participant progress is discussed, are held weekly on Thursdays. These sessions last 2 hours on average, but may require more time depending on the number of participants scheduled for court. Those who regularly attend include one of the assigned DWI court judges, DWI court coordinator, city attorney, defense attorney, probation officer, surveillance technician, conditional release agent, and two volunteer treatment representatives from outside treatment providers. A large number of treatment providers are utilized by the RDWI, and none of the agencies that work directly with participants attends staffing sessions. Although not affiliated with these treatment agencies, the volunteer treatment representatives provide a treatment perspective during the staffing session.

- Every participant scheduled for court is discussed in staffing. The discussions center on treatment involvement, employment, home visits, phase advancement, drug testing, overall progress and responding to participants’ positive and negative behaviors. Most team members provide feedback and participate in discussions before a decision is reached. Team members represent their roles during these discussions, but also consider the collaboration that is needed for the DWI court to be successful. The judge has the authority to make the final decision (or to implement responses that differ from the team recom-
mendations); however, it was observed that this practice does not occur often. The observed staffing meeting focused heavily on participants who were not doing well in the program in order to discuss appropriate treatment responses and sanctions. A limited amount of time was spent discussing those doing well unless an incentive or reward was going to be provided for a milestone being reached or a similar success, which may have been due to the large number of participants who were scheduled to be seen in court during the site visit.

- DWI court sessions are held weekly on Thursday afternoons (on the same day as staffing), and generally last 2 hours, with an average of 40 participants being seen by the judge. All team members who participate in staffing attend court sessions, except for one of the voluntary treatment representatives. Court security officers may be present if a participant is going into custody, but they are not considered members of the team. Previous graduates and family/friends of participants are occasionally in attendance as well.

- RDWI works with a multitude of organizations to provide treatment services to participants, none of which are directly contracted with the program. If state funds are to be used for treatment services, a number of approved providers are recommended and available for participants to utilize, depending on the level of service needed. Participants with insurance coverage may also receive services from additional providers. Treatment providers do not regularly provide written progress reports, but will advise the probation officer of a participant’s treatment schedule, missed sessions or other immediate issues.

- Due to multiple organizations providing treatment services, the probation officer typically facilitates communication and is the main contact with the various providers. Before treatment begins, letters are initially sent by the providers to the probation officer regarding a participant’s treatment schedule. Treatment providers do not regularly provide updates or progress reports while participants are completing treatment, unless participants have missed treatment sessions or other issues arise. The probation officer contacts providers for written or verbal updates once participants have completed the primary portion of their treatment plan (anywhere from 4-6 weeks after starting treatment). The probation officer will also contact treatment providers if a participant misses a drug test or exhibits other negative behaviors. Team members noted that communication with some providers is timely and efficient but is more challenging with others.

- The DWI court team has a formal policy committee that meets monthly outside of staffing sessions to discuss program issues. The committee consists of all active team members who attend staffing sessions.

- The probation officer (also referred to as the case manager) performs the majority of case management for DWI court participants. The city attorney, surveillance technician, and two voluntary treatment representatives also participate in case management.

**Commendations**

- **Good team member communication.** All team members attend staffing sessions and provide feedback on participant progress as well as court responses. It was also reported that frequent email and phone contact occurs among team members between staffing sessions, which ensures that relevant information is communicated in a timely manner. Research has shown that drug courts that shared information among team members through email had 65% lower recidivism than drug courts that did not use email (Carey et al., 2011).
A policy committee that meets monthly. The program has implemented a policy committee (referred to by team members as their “monthly brown bag” meeting). The purpose of the meetings is to discuss and make decisions about DWI court policy issues that cannot be addressed during staffing sessions, and also ensuring they are working toward program goals. This committee may consider using an upcoming session as a venue for addressing each of the recommendations described in this report such as exploring the options for increasing participant time in front of the judge, coordinating/communicating with treatment providers, and evaluating the current drug testing system.

Suggestions/Recommendations

- Include a law enforcement representative on team. Although the RDWI previously included a law enforcement representative on the team, this team member was unable to continue due to budget cuts. To the extent possible, the DWI court team should ensure that local and state police understand their participation with DWI court is a cost-effective way to deal with repeat offenders who have substance abuse problems. Additionally, the program should be seen as an avenue for addressing quality of life issues and preserving public safety. Research has shown that drug courts that include law enforcement as an active team member have higher graduation rates, lower recidivism rates and higher cost savings (Carey et al., 2011, 2012). The role of law enforcement on the team could include assisting the surveillance technician in conducting additional home visits to verify that participants are living in an environment conducive to recovery. Law enforcement representatives can also learn to recognize participants on the street (while on regular duty) and can provide an extra level of positive supervision. Knowing that limitations may exist with the amount of time the law enforcement representative is available, the RDWI should consider if there are options for them to attend less frequently, or on an as-needed basis.

- Work to streamline communication between treatment providers and the probation officer. In order for the team to make informed and fair decisions about responses to participant behavior, it is crucial that all necessary treatment information be provided to probation and the court before these decisions need to be made. It was reported that while some treatment providers did communicate regularly with the program, others did not provide timely information. The program may consider creating a memorandum of understanding (MOU) with each of the providers utilized that includes guidelines on how information is shared with the program (when information should be sent, what types of information, etc.). One team member noted that Minnesota requires treatment providers to keep weekly progress reports. It is recommended that the RDWI communicate with these agencies to try and obtain this information in a standardized manner. An example of a progress report that can be shared with the treatment providers was provided to the program along with this report. The court can also request modifying the information required for state records.

During the follow-up phone call, team members also suggested that there may be a lack of understanding among some treatment providers as to why this information is so critical to the success of the program and the participants. The team agreed that finding a better way to educate these providers (particularly those that are utilized most often) may lead to better communication. For instance, a treatment counselor had recently attended DWI court to learn more about the program after hearing positive feedback from a participant.
**KEY COMPONENT #2: USING A NON-ADVERSARIAL APPROACH, PROSECUTION AND DEFENSE COUNSEL PROMOTE PUBLIC SAFETY WHILE PROTECTING PARTICIPANTS’ DUE PROCESS RIGHTS.**

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 DWI court. Unlike traditional case processing, DWI court case processing favors a non-adversarial approach. The second focus area is that DWI court programs remain responsible for promoting public safety. The third focus area is the protection of the participants’ due process rights.

**National Research**

Research by Carey, Finigan, and Pukstas (2008) and Carey et al. (2012) found that participation by the prosecution and defense attorneys in team meetings and at drug court status review hearings had a positive effect on graduation rates and on recidivism costs. In addition, courts that allowed non-drug-related charges also showed lower recidivism costs. Allowing participants into the drug court program only post plea was associated with lower graduation rates and higher investment costs, while drug courts that mixed pre-trial and post trial offenders had similar outcomes as drug courts that keep those populations separate (Carey, Finigan, & Pukstas, 2008).⁶

**RDWI Process**

- The only charges currently eligible for admission to the RDWI are gross misdemeanors, and therefore all cases fall under the jurisdiction of the city attorney’s office. The program does not currently accept felony DWI cases, but a federal grant proposal was recently submitted that would allow the program to expand and accept up to 15 felony DWI cases.
- A dedicated city attorney and defense attorney are assigned to the RDWI team indefinitely and actively participate in all staffing and court sessions.
- The position of the RDWI defense attorney is represented by a private attorney who is contracted with the Minnesota State Court Administrator’s Office (SCAO) to participate on the DWI court team. The defense attorney maintains close contact with participants during their time in the program. Participants can contact the defense attorney at any time with questions or to discuss any ongoing issues within the program.
- The city attorney and defense attorney are always included on all RDWI policy-related matters.
- The assigned city attorney and defense attorney have attended state conferences (related to drug court), received DWI court-specific training, and also received role-specific training.
- The program accepts post-plea participants only. Potential admissions are occasionally identified by the city attorney’s office or from the defense attorney.
- Both attorneys are typically contacted when a DWI court participant is sanctioned to jail for noncompliant behavior.

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⁶ 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.
The RDWI does not allow individuals with pending felony charges into the program, or any individuals with current or prior violent charges. The program may allow individuals with mental health issues, drug charges, or those receiving medication-assisted treatment into the program. However, the team conveyed that such admissions are usually considered on a case-by-case basis.

**Commendations**

- **RDWI has a dedicated city attorney and defense attorney assigned to the program.** Best practices research indicates that this results in positive participant outcomes including significantly lower recidivism and increased cost savings (Carey, Finigan, & Pukstas, 2008). Both attorneys are aware of the team approach while participating in DWI court proceedings and are clearly supportive of the DWI court model.

**Suggestions/Recommendations**

- **Continue to maintain non-adversarial roles during court sessions.** An important and common caveat to the commendation above, particularly for attorneys serving on program teams, is to monitor their natural tendency to slip into traditionally more adversarial roles (often particularly in regards to sanctions) during court sessions. Such interactions can be detrimental to participant progress (such as learning to accept ownership for their own behavior) and can create an unintentionally adversarial atmosphere that slows court proceedings.

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

The focus of this component, as well as the DWI Guiding Principle regarding determining the program population, is on the development and effectiveness of the eligibility criteria and referral process. Different drug and DWI courts allow different types of criminal histories. Some courts also include other criteria such as requiring that participants assess as drug dependent, 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 and DWI 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 who fit the court’s target population are referred.

This component also discusses the practices different drug courts use to 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 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 program.

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

Carey, Finigan, and Pukstas (2008) found that courts that accepted pre-plea offenders and included misdemeanors as well as felonies had both lower investment and outcome costs. Courts that accepted additional, non-drug charges (such as theft and forgery) also had lower costs, due to reduced recidivism, though their investment costs in the program were higher.

Those courts that expected it would take 50 days or less from arrest to drug court entry had higher savings than those courts that had a longer time period between arrest and entry (Carey et al., 2012). Further, reducing time between arrest (or other precipitating incident) and the first treatment session has been shown to significantly decrease substance use. Donovan, Padin-Rivera, and Kowaliw (2001) found that in reducing the time to entry approximately 70% of clients entered treatment, and of those clients who entered, 70% completed their assigned treatment. Those individuals who entered treatment showed significant reductions in substance use and improved psychosocial function.

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

RDWI Process

- The target population of the RDWI is Ramsey County residents 21 years of age and over, who are repeat DWI offenders and dependent on alcohol. The program does accept substance abusers to the program, but most participants are substance dependent.
- The program consists of predominantly 2nd and 3rd degree DWIs (both gross misdemeanors). Some 2nd and 3rd degree DWIs are not charged based on repeat offenses, as aggravating factors such as excessive BAC level may result in a more serious DWI charge. However, the majority of participants are on their 3rd DWI offense within the past 10 years.
- Team members reported RDWI participants are higher functioning than many criminal justice system defendants as most have jobs and are able to pay the fees associated with the program. Participants always enter the program in post-plea status, as they are accepted to the program on the date they plead guilty.
- The team reported that most candidates are medium to high risk, based on their Level of Service Inventory – Revised (LSI-R) or Level of Service/Case Management Inventory (LS/CMI) scores. However, a multitude of other factors are also considered before admission including participant criminal history, treatment needs, team member opinions of suitability (what makes them a good candidate, severity of substance use, etc.), and amenability to treatment services. Participant motivation is considered very important as the RDWI is a voluntary program.
- Offenders who do not admit to having a drug or alcohol problem, those with pending felony charges, and those with violent charges are excluded from the program. Discussions regarding eligible participants take place in staffing meetings. While the RDWI has occasionally refused entry to those considered unsuitable, team members reported that it was very rare for a participant to be deemed ineligible for the program based on suitability if a participant expressed interest in joining.
• The RDWI eligibility requirements are written and all referring team agencies have copies of the eligibility criteria.

• The city attorney, defense attorney, district judges, probation office, other team members, or the general public may identify and refer potential participants to the program. The team noted that most referrals are received by the conditional release agent who works with Project Remand, a local nonprofit organization that offers alternatives to traditional detention.

• Most defendants charged with a DWI are placed on conditional release with alcohol monitoring and are assigned to the conditional release agent. These defendants are required to make contact with the conditional release agent (to have the alcohol monitoring device issued), who then screens them for RDWI eligibility. The agent explains the conditions of the program, rules, phases, and program expectations. If participants are interested, they are required to observe court at least twice to ensure a basic understanding of how the program operates. The RDWI does not offer a window of time when a participant can try the program on a trial basis so some team members encourage defendants to consult with their attorney prior to entering the program. Defendants who post bail are not required to have alcohol monitoring devices initially (and therefore not required to make any contact until their next scheduled court date) are typically not contacted by the conditional release agent.

• Interested participants identified by the conditional release agent are discussed in the subsequent staffing session. During this time, the agent will bring information on the individuals, including bail evaluations (a screening that briefly assesses an individual’s resources and history) and an assessment (similar to the TCU Drug Screen tool) that helps determine whether a chemical health assessment should be ordered.

• The estimated time between participant arrest and referral to the DWI court program is 1 week or less. The estimated time between DWI court referral and program entry is 1-2 weeks, for a minimum total estimated time from arrest to DWI court entry of 2 to 3 weeks. The program is able to quickly move participants into the program due to the ability of the conditional release agent to make contact with potential participants within 1-2 weeks.
days of their arrest. It was reported that the majority of participants enter the program within 3 weeks of arrest. Participants are scheduled to complete their Rule 25 Assessment with the chemical health assessor before entering the program. However, team members reported that in some instances, the assessment may be completed shortly after entering the program. All participants are screened for co-occurring mental disorders, suicidal ideation, and whether they are substance dependent or substance abusers. The assessment is also used to determine level of care for a participant.

- The RDWI assesses for risk using the Level of Service/Case Management Inventory (LSCMI). The program has recently begun using this specific tool, and previously used the Level of Service Inventory – Revised (LSI-R). These assessments are completed by the probation officer at program entry and when participants near the end of the program to determine if the participant’s risk level has decreased based on program involvement and whether they have the resources in place to be successful.

- Treatment plans are typically developed by the various treatment providers from the Rule 25 assessment and outline the schedule of therapy sessions.

- The RDWI estimates that 20% of participants are poly-substance users/abusers, with marijuana being the most prominent drug of choice outside of alcohol.

- One of the primary incentives for participants to enter the DWI court is the suspension of jail or prison sentences. Team members and focus group participants also noted that the structure and accountability of the program helps participants remain clean and sober. Charges that led participants to DWI court are not dismissed upon graduation.

- The RDWI’s official capacity is 60 participants. As of March 2013, the program had 52 active participants, but reported that they regularly operate close to capacity.

- Staff noted that a federal grant proposal has been submitted that would allow the program to accept felony DWI cases into the program (up to 15 additional participants). The county attorney’s office (which handles felony level DWI cases in the county) reported that they would not be able to provide a representative for the RDWI due to the DWI court and adult drug court holding sessions on the same day. However, the county attorney has stated that they are willing to cross-deputize the current RDWI city attorney so that the RDWI can still accept these felony cases.

Commendations

- **Participants are identified quickly and promptly placed into the program.** The program has an excellent system where the conditional release agent is able to make contact with potential participants very quickly. One of the goals of DWI court is to expedite the connection of individuals to services, as prompt program placement has been shown to lead to better participant outcomes including higher cost savings. The RDWI is commended for enrolling participants swiftly and limiting the time from arrest to entry to less than one month in most circumstances.

- **Decisions on accepting new participants are made as a team during staffing sessions.** After screening by the conditional release agent, referrals are discussed at the subsequent staffing session, resulting in the entire team making eligibility decisions. Since all team members are part of this decision, there is more buy-in and support for each participant, and the team can better identify issues that may affect their ability to treat each participant in the program.
Suggestions/Recommendations

- **Do not assess potential participants using subjective suitability criteria.** Research has shown that screening participants for suitability based on staff feelings about whether a participant can succeed in the program and excluding “unsuitable” participants has no effect on program outcomes including graduation and recidivism rates (Carey, Finigan, & Pukstas, 2008; Carey & Perkins, 2008; Carey et al., 2011). This may be due to the extreme difficulty and subjectivity in determining what participant characteristics are likely to lead to successful outcomes, particularly at the time of participant referral as the participants are generally not at their best. Even though it has rarely refused entry to those considered unsuitable, we recommend that the RDWI consider dropping its suitability criteria in determining participant eligibility and entry into the program.

**Key Component #4: Drug Courts Provide Access to a Continuum of Alcohol, Drug and Other Treatment and Rehabilitation Services.**

The focus of this component is on the drug court’s ability to provide participants with a range of treatment and other services appropriate to participant needs. Success under this component is highly dependent on success under the first key component (i.e., ability to integrate treatment services within the program). Compliance with Key Component #4 requires having a range of treatment modalities and other types of service available. However, drug courts still have decisions about how wide a range of services to provide, level of care and which services are important for their target population.

There are several DWI Court Guiding Principles that address treatment protocols and other services offered by the program to address needs specific to DWI offenders. These principles include performing a clinical assessment for appropriate placement in treatment and other services, developing a treatment plan, and ensuring that services to address DWI court participants’ unique transportation issues are available.⁸

DWI courts differ in how they determine a client’s needs. While DWI courts are always targeting clients with a substance use problem, the DWI court may or may not use a substance abuse and/or mental health assessment instrument to develop a case plan. A screening and assessment process will result in more accurate identification of a clinically sound treatment plan. The assessment should include alcohol use severity, drug involvement/severity, level of needed care, medical and mental health status, employment and financial status, extent of social support systems including family support, alcohol (or drug) triggers, refusal skills, thought patterns, confidence in their ability to stop using alcohol/drugs, and motivation to change.

Because most DWI offenders will face a revoked or suspended license, the program must work on reinforcing the importance of obeying all laws, including not driving without a license, as well as provide resources and supports for alternative transportation options, particularly related to the participant being able to attend treatment, court, medical and other program-related appointments. The program must encourage the participant to solve her/his own transportation issues as much as possible, but provide case management support and alternatives when needed.

**National Research**

The National Institute on Alcohol Abuse and Alcoholism (NIAAA) maintains an updated guide on the reliability and validity of alcohol assessment instruments (Allen & Wilson, 2003). The

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⁸ DWI Court Guiding Principles #2, #3, and #8
American Society of Addiction Medicine (ASAM) publishes non-proprietary patient placement criteria for matching substance abuse clients to indicated levels or modalities of care. The ASAM guidelines specify the areas that should be covered in a clinical assessment and matches the clients’ results with levels of care that guide a patient’s placement in treatment services (American Society of Addiction Medicine, 1996).

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

A variety of treatment approaches and motivational strategies that focus on individual needs, such as cognitive-behavioral therapy, self-help groups, and appropriate use of pharmacological treatments, can all facilitate positive change and abstinence from alcohol and drug use. Multi-systemic treatment works best because multiple life domains, issues, and challenges are addressed together; using existing resources, skills, and supports available to the participant. It is also crucial to provide aftercare services to help transition a person from the structure and encouragement of the treatment environment to a sustainable network in her/his natural environment (Miller, Wilbourne, & Hettema, 2003).

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

The American University National Drug Court Survey (Cooper, 2000) showed that most drug courts have a single treatment provider agency. NPC, in a study of 18 drug courts in four different states (Carey, Finigan, & Pukstas, 2008), found that having a single provider or an agency that oversees all the providers, is correlated with more positive participant outcomes, including lower recidivism and lower recidivism costs.

Revoking or suspending the license of DWI offenders is an effective method for reducing subsequent dangerous driving (Ross & Gonzales, 1988). However, this procedure also limits the access offenders have to treatment and other rehabilitation services. Ignition interlock systems are another effective way to prevent alcohol-related traffic offenses, even for drivers with multiple prior DWI offenses (Beck, Rauch, Baker, & Williams, 1999), with the benefit of allowing participants to continue to have access to driving as a means of transportation. This intervention, however, only remains effective while the interlock device remains on the vehicle. Once it is removed, the benefits are not retained.

**RDWI Process**

- The RDWI program is intended to last a minimum of 13 months and has 3 phases. Phase 1 is a minimum of 3 months. Phases 2 and 3 are a minimum of 5 months each. Most participants take an average of 15 months to successfully complete the program. In addition, participants continue on standard probation for a period of time after completing the program, as all participants are sentenced to 4 years of supervision when they enter the RDWI. Supervision requirements are reduced during this period of time, with partic-
Participants having monthly meetings with the probation officer and attending quarterly RDWI alumni meetings.

- A Rule 25 assessment is completed on the majority of program participants (as most are uninsured) prior to entering the program to determine an individual’s level of care and includes primary inpatient, primary outpatient, placement in a halfway house, or extended care. Each level of care contains a recommended amount/dosage of treatment for individuals and is determined by the agency that provides services to the individual. There are no general program requirements for group and individual treatment sessions during program involvement.

- Treatment placement is determined by insurance coverage (if any), which agencies have openings, and the needs of the individual (gender-specific, co-occurring disorders, etc.). Numerous agencies in Ramsey County provide treatment services to program participants, with no single agency treating the majority of participants. Team members also reported that the Minnesota Department of Human Services has recently changed licensing requirements, so additional providers (primarily independent and private treatment centers) are now being utilized for individuals who have their treatment paid for through the Consolidated Chemical Dependency Treatment Fund. The fund is a combination of county, state and federal tax dollars that pays for most of the RDWI participant’s treatment services.

- Depending on their placement and the amount of funding available, participants can complete their recommended treatment program within 4-6 weeks (intensive inpatient) or take up to 5-6 months (intensive outpatient). Most RDWI participants complete treatment in 12 weeks through outpatient services that focus on relapse prevention. Some programs may provide additional sessions, but this was reported to be very limited due to lack of funding.

- Participants are required to attend self-help meetings throughout all phases of the program. For participants who are currently attending treatment, only one self-help meeting is required per week. For all other participants, two meetings must be completed per week for the duration of the program.

- The surveillance technician conducts Driving with Care classes (educational classes that are required for some DWI offenders) in addition to their primary duty of performing home visits. One of the volunteer treatment representatives also conducts Driving with Care classes and facilitates a trauma-based women’s recovery group.

- The RDWI requires both substance abusers and those substance dependent to attend substance abuse treatment and self-help meetings. Due to delays in assessments being completed, the program may find out that participants are diagnosed as abusers after they have already entered the program. Team members noted that participants are fully informed and are aware that they must complete these program requirements even if assessments show they are abusers and not dependent.

Participant Quote:
“I think phase 1 is the hardest part of the program to get used to. If you’re coming off the street and you’re doing it just to avoid jail time… going to take a UA every two days and trying to juggle so many things…at one point I thought I should just turn myself in and call it a day. It’s just a little strict in the beginning.”
Participants are always screened for co-occurring mental disorders as well as suicidal ideation. Mental health treatment is required for RDWI participants who are found to have co-occurring disorders as part of their program-related treatment.

**Services (or types of treatment) required for all participants are based on assessed level of care and include:** self-help meetings (AA or NA), gender-specific treatment sessions, aftercare, relapse prevention, health care, dental care, motivational interviewing, recovery training and self-help. **Services (or types of treatment) required for some participants include:** outpatient individual treatment sessions, outpatient group treatment sessions, residential treatment, mental health counseling, language or cultural-specific programs, parenting classes, prenatal program, anger management/violence prevention, twelve-step facilitation therapy, and social skills training. **Services offered to participants but not required include:** detoxification, psychiatric services, job training/vocational program, employment assistance, health education, family counseling, General Education Development (GED)/education assistance, housing assistance, prescription drugs for substance dependence, transportation assistance, Moral Reconciliation Therapy (MRT), Living in Balance, Community Reinforcement Approach, Contingency Management, Motivational Enhancement Therapy, Dialectical Behavior Therapy (DBT), trauma services, Health Realization, Driving With Care, Helping Women Recover, Recovery Coaching, and Telephone Recovery Support Program. **Services not offered include:** acupuncture, Texas Christian University (TCU) mapping enhanced counseling, and child care.

Limited aftercare services are available to participants after graduation. An alumni group is facilitated by the probation officer and surveillance technician on a quarterly basis, with program graduates who are still on probation required to attend. Team members also noted that graduates may make contact with the team after leaving the program, and are welcome to attend court sessions or speak with individual team members for support. Treatment services are not typically accessible to graduates unless funding is available.

All RDWI participants are assessed a fee of $500 upon entry to the program. This amount does not vary by a participant’s ability to pay. The RDWI does allow participants on rare occasions to complete community service in lieu of paying fees if they are indigent. Fees are used to pay for program incentives, drug testing, training, and treatment services.

The RDWI works to have participants in contact with MinnesotaCare, a public program for individuals who do not have access to affordable healthcare, to address medical issues. There are also dentists in the area that have a free clinic twice per year that participants can utilize.

The team regularly refers participants to Minnesota Recovery Connection, an organization that assists individuals in recovery in accessing various resources. These resources include mental health needs, prescription medication assistance, food and clothing assistance, legal aid, and a host of other services.

Additionally, the DWI court has a strong relationship with the Mental Health Court and the Drug Court in Ramsey County, and DWI court participants are regularly referred to the mental health clinic services and resources acquired by these other two courts. This includes access to a mental health physician and nurse, who can be utilized if there is a delay in getting participants connected to mental health services through the RDWI and can also assist with screening participants for mental health disorders.
• Public transportation in the St. Paul area is generally good, with participants residing outside of the metro area having more difficulties with transportation.

Commendations

• **The program length is a minimum of 12 months, and has at least 3 phases.** Programs that have a minimum length of stay of at least 12 months had significantly higher reductions in recidivism. In addition, programs that had 3 or more phases showed greater reductions in recidivism (Carey et al., 2012).

• **The program offers an array of treatment services and uses evidence-based programming.** The RDWI offers a breadth of diverse and specialized services to program participants through partnerships with the various treatment providers.

• **The program offers referrals for ancillary services for participants.** Team members reported that the RDWI makes referrals for medical, dental and psychiatric care when needed. Meeting participant needs across the spectrum of issues affecting their lives can help them be more successful. In addition, appropriate care can help mitigate participant use of substances to self-medicate problems related to physical pain. Many programs have seen benefits with reduction in recidivism from offering health services.

• **Participants must write a relapse prevention plan, and there are resources for participants in the community after their time in the program.** The relapse prevention plan includes ways of avoiding triggers, coping with triggers, and developing alternative alcohol-free activities that support sustained recovery. A relapse prevention plan enhances participants’ ability to maintain the behavioral changes they have accomplished through participation in the RDWI. In addition, an alumni group is required for graduates to attend while still on probation, but also available for any prior participants to attend.

Suggestions/Recommendations

• **To the extent possible, coordinate treatment through a single organization.** The team noted during the follow-up phone call that this recommendation may be difficult to achieve, as the program does not usually have any influence on where a participant attends treatment. Due to the numerous providers that are available to participants, it may never be possible for the RDWI to consolidate all treatment services under one or two providers. However, it may be possible to have a single treatment-knowledgeable team member coordinate services. Research shows that having one to two treatment-providing agencies, or having a single coordinating provider, is significantly related to better program outcomes including lower recidivism and increased cost savings (Carey et al., 2012). This may also aid in better communication between the RDWI and the various providers (discussed further below).

• **Continue efforts to connect participants with treatment services as soon as possible.** Team members noted that while many participants are connected to treatment services quickly, significant delays can occur with others. While this may occur at times due to participant motivation, the program was aware of instances where participants had difficulty getting into treatment because of complications with the providers. Related to the previous recommendation, having fewer providers, or a single team member responsible for coordinating services, may improve communications and minimize the time between referral and placement for participants in need of treatment.
• **Consider adjusting some program requirements for those diagnosed as substance abusers.** Research has shown that identifying whether participants are substance users or abusers can help ensure that appropriate care is provided and suitable expectations are imposed on participants. Some program requirements, particularly self-help meetings, may be inappropriate for non-dependent individuals. AA/NA groups in some communities have complained about the influx of non-dependent individuals referred from the criminal justice system. These individuals can be disruptive to meetings because they do not relate to the discussion. The first step of AA is “admitting that one cannot control one’s addiction or compulsion.” Since this is not true for abusers (the definition of abuser is that they are not dependent), the first thing they are required to do in AA is admit to an untruth. It is recommended that the RDWI explore alternative requirements or programs for abusers.

**KEY COMPONENT #5: ABstinence is monitored by frequent alcohol and other drug testing.**

The focus of this component and the associated DWI Court Guiding Principle is the use of alcohol and other drug testing as a part of the drug court or DWI court program supervision practices. Drug testing is important both for supervision by the court and the team and for participant accountability. It is seen as an essential practice in participants’ treatment. This component encourages frequent testing but does not define the term “frequent,” so drug courts or DWI courts develop their own guidelines on the number of tests required. Related to this component, and specifically outlined in the principle, is that the drug courts or DWI courts must assign responsibility for testing and community supervision to its various partners, and establish protocols for electronic monitoring, drug test collection, and communication about participant accountability.

The drugs included in abstinence monitoring detection should be a reflection of the substances being abused/used within the community or jurisdiction of the court. The drug testing should be sufficiently comprehensive to ensure adequate coverage of the major abused drug classes (e.g., amphetamines, barbiturates, benzodiazepines, cannabinoids (marijuana), cocaine, opiates, and, especially for DWI court, alcohol).

**National Research**

Because of the speed with which alcohol is metabolized, electronic methods of monitoring and detection are recommended, such as transdermal alcohol detection devices (e.g., SCRAM bracelets) and Ignition Interlock Devices (person must take a breath test before his/her car will start).

Research on courts nationally (Carey et al., 2005, 2012) found that drug testing that occurs randomly, at least 2 times per week, is the most effective model. If testing occurs more frequently (that is, more than 3 times per week), the random component becomes less important, as it is difficult to find time to use in between frequent tests.

In addition to frequency of testing, it is important to ensure that drug testing is 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. In focus groups with participants after they have left their programs, individuals have admitted many

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9 DWI Court Guiding Principle #4
10 See this document for additional suggestions on supervision and testing practices: [http://www.dwicourts.org/sites/default/files/ncdc/Guiding_Principles_of_DWI_Court_0.pdf](http://www.dwicourts.org/sites/default/files/ncdc/Guiding_Principles_of_DWI_Court_0.pdf)
ways they were able to “get around” the drug testing process, including sending their cousin to the testing agency and bringing their 12-year-old daughter’s urine to submit.

As a part of the DWI court guidelines, in addition to drug testing, appropriate supervision and monitoring also requires the use of a validated risk assessment instrument. The risk assessment and regular re-assessments indicate how much structure and monitoring is needed for a particular offender, allowing the program staff to make the most effective use of supervision resources, and also indicate the effectiveness of the interventions over time (or whether adjustments to the plan need to occur).

RDWI Process

- Participants are required to call every day for a recorded message that states a drug testing color. Colors are selected randomly and the message is set at 12:00 p.m. each day. If the message states a participant’s assigned color, they must submit a test at the drug testing facility the following day. The drug testing facility hours of operation differ each day of the week, and some days are open for only 4 hours, making reporting for drug tests challenging for participants. Team members and focus group participants noted that the variation in hours makes testing difficult.

- A participant’s drug test color may change (to increase or decrease testing frequency) while participating in the program and any participant can be ordered to submit a drug test for cause (appearing under the influence, etc.). Drug tests can also be collected by the treatment providers, probation office, law enforcement, court staff, surveillance technician and conditional release agent.

- As a substitute for the random drug testing system the program has recently allowed some participants to complete drug testing on a predetermined schedule, usually when a participant is unable to afford alcohol monitoring devices (such as SCRAM). Participants on a set drug testing schedule are usually required to test 3 times per week.

- Drug testing for the RDWI is primarily performed by RS EDEN Drug Testing, which is contracted with the local probation office to collect drug tests for all individuals on probation in Ramsey County. The probation office receives “blind” proposals for drug testing every 3 years and awards the contract to the lowest bidder that meets their contract standards.
Section I: Process Evaluation

- The drug testing facility is typically staffed by a male and female, and tests are fully observed by a same sex employee. Participants are also required to wash their hands and have their pockets searched prior to providing a UA to reduce the likelihood of tampering.

- Ethyl glucuronide (Etg) testing is performed on all participant samples submitted at the drug testing facility, and some samples are also tested using a 5-panel drug screen. Samples are also tested for dilution at the facility.

- Breathalyzers are performed on all participants during home visits, office visits, employer visits, and court dates. The probation officer noted that 5-panel oral swab tests are also used periodically on participants during office visits. Synthetic testing (bath salts, synthetic marijuana, etc.) does not occur due to high costs. The RDWI also uses other testing methods such as 5-panel instant cups, hair, blood, sweat patches, and ignition interlock to supervise participants.

- Any drug testing issues (positive, missed or diluted) are tracked by the probation officer and reported during the subsequent staffing sessions. Concerned team members and participants alike reported numerous problems with the testing process at the lab. There were reports that because of the volume of UAs collected, numerous samples may be left out while tests are still being administered, causing concern that mistakes could easily occur (such as mislabeling a test) and that the integrity of some results could be compromised. The decision to administer additional testing (such as a 5-panel dipstick) for some individuals and not others was also confusing to some participants. Diluted UA samples are reported to be a fairly regular occurrence.

- Participants must be alcohol and drug free for a minimum of 180 days before they can graduate the program.

- All participants are required to use the interlock system in their cars for at least 1 year once they are involved in treatment. In Minnesota, driver’s licenses are revoked until the interlock is installed. This requires a reinstatement and monthly fee for the interlock. The interlock system prevents driving under the influence by requiring participants to provide a breath sample at ignition and again at specific intervals while the car is in operation. Failure to provide a sample or doing so while intoxicated will prevent the vehicle from starting. The interlock system can be installed through multiple private companies. The RDWI does not provide any direct assistance with setting up an ignition interlock device and does not have funding to provide financial aid.

- Field visits are completed primarily by the surveillance technician and usually occur at a participant’s home, but can also occur at a participant’s place of employment or in the general community (at an agreed upon public place). Visits are unannounced and no prior notification is given to participants. Participants are not restricted by curfews, so visits

Participant Quotes:
- “I don’t have an option to deny job site visits. If you’re at work and you’re doing what you’re supposed to be doing... it’s just hard. And of course you can’t say no, otherwise they’re on you even more.”
- “One time I was eating (at a restaurant), and they came and met me there and I blew into the machine right in front of the window.”
- “There’s an embarrassment factor... and we’re trying to do this (program) confidentially.”
occur at various times of the day. During Phase 1, the surveillance technician typically completes a minimum of one visit per week. Visits are reduced to once every 2-3 weeks during Phase 2, and once per month in the last phase of the program. The surveillance technician may also conduct additional visits with participants who are struggling. The surveillance technician always performs a breathalyzer test on participants and may collect UAs for cause during field visits. During the field visit, the surveillance technician discusses their self-help group attendance, sponsor work, treatment activities, specific participant needs that come up in staffing, and general program progress. The surveillance technician will notify one of the RDWI judges, and participants are typically taken into custody if they have a positive breathalyzer test.

- A form is filled out by the surveillance technician for every completed (or attempted) field visit, but most information is reported verbally during staffing sessions.

**Commendations**

- **Drug testing occurs at least 2 times per week in the first phase.** Research indicates that testing 2 or more times per week in the first phase leads to lower recidivism rates. The program is recognized for following this best practice and is encouraged to consider this level of testing throughout other phases of the program.

- **Participants are required to test clean for at least 180 days before they can graduate.** Research has shown that the longer clients are required to be clean before graduation, the more positive their outcomes (both in terms of lowered recidivism and lower costs) (Carey et al., 2005; Carey, Finigan, & Pukstas, 2008; Carey et al., 2012).

**Suggestions/Recommendations**

- **Obtain results from drug testing within 2 days.** The drug testing company utilized by the RDWI (RS EDEN) is able to provide results for most drug tests within a few days, including Etg testing. Team members noted that results are reported within 3-4 days on average, but that this time frame can vary and there have been instances when results took a week or longer. The RDWI should work with the drug testing agency to strive to obtain results within 2 days as research has shown this best practice is associated with higher graduation rates and lower recidivism (Carey, Finigan, & Pukstas, 2008).

- **Announce the drug test color in morning and shorten window of time to give tests.** As detailed in the National Drug Court Institute’s (NDCI) Judicial Benchbook (2011), this strategy will limit the opportunity participants have to engage in sample tampering tactics by reducing the time between notification of a drug test and the time that the sample collection actually occurs. Currently, the drug testing color is announced approximately 24 hours prior to drug tests being submitted, and testing hours vary during the week from the morning...

**Participant Quotes:**

- “The diluted UA is the absolute worst part of the whole program. You can be doing everything right, and out of nowhere you can get a diluted UA, and you get penalized for that. It’s not the community service hours, that’s easy. But for example, if you’re in phase 3 and you’re in your 90 day countdown, you’re in the program 3 more months. It’s just the extra 90 days (that get counted against you).”

- “I had a problem with the diluted UAs. They put me in jail for 2 weeks...”
to late afternoon. While there are numerous factors that constrain the court’s sample collection timing and a client’s ability to travel to the collection site, it is important to limit the interval between notification and collection. The more effective a court is at shrinking this time period (which ideally is no longer than a few hours), the greater the success of the program’s deterrent and monitoring efforts. Also, announcing the drug test color in the morning may help address the large number of diluted tests that the program receives. Participants noted frustration with diluted samples and noted that they occurred frequently despite trying to prevent them.

- **Review/reevaluate drug testing procedures to ensure effectiveness.** Multiple concerns were reported during the site visit by both team members and focus group participants regarding the drug testing system. It was conveyed that the variation in drug testing hours creates issues for many participants, particularly days when the testing center is open for only 3-4 hours. It was reported that occasionally all participants may be required to submit a drug test (known as an “all colors” day) when the drug testing center is only open for 3-4 hours, and can result in participants waiting over an hour to submit a test. The variation in hours of operation throughout the week was also reported to be very confusing for some participants. Additionally, there have been complaints that participants were at times unable to understand the drug testing hotline message.

Due to the importance of maintaining integrity in drug testing, establishing a protocol (or MOU) with the drug testing center may help increase accountability. At a minimum, the sample collectors should be trained in appropriate communication skills and professionalism while collecting drug tests. The program noted during the follow-up call that the local probation office’s contract with their current drug testing lab was set to expire soon, and that additional standards (such as testing hours, etc.) would be added to ensure better testing procedures.

Other factors to consider in selecting a drug-testing facility include: personnel collecting the sample (level of training); volume of testing (which often influences the cost per test); list of drugs to be screened (not all drugs can be easily detected in every specimen type); and turnaround time for results (critical for effective therapeutic intervention). The overall cost associated with drug testing can vary widely between specimen types and between laboratory-based versus on-site testing devices. The adage “you get what you pay for” is especially relevant to drug testing. Drug courts should evaluate cost-benefit differences closely before choosing a specimen type or a testing method. Those courts relying on a lowest bid request for proposals (RFP) should develop those requests with sufficient detail and safeguards to ensure the integrity of the testing. The ability to access drug-testing results quickly and obtain expert technical assistance in addressing questions or concerns should not be overlooked (NDCI Judicial Benchbook, 2011).
• **Consider maintaining a higher frequency of drug testing through Phase 3 of the program.** The RDWI should examine their current process of decreasing the frequency of drug testing (testing goes from an average of 8 per month in Phase 1 to an average of 2 per month in Phase 4) and ensure that it does not occur before other forms of supervision have been decreased successfully. Drug court research (Marlowe, 2008) suggests that the frequency of drug testing be the last thing that is ratcheted down as participants’ progress through phases. As treatment sessions and court appearances are decreased, checking for substance use becomes increasingly important to determine if the participant is doing well with more independence and less supervision.

• **Do not allow scheduled drug testing to occur.** At the time of the site visit, the program had recently begun to allow some participants to submit to drug testing on the same day each week, due to some individuals who were unable to afford electronic alcohol monitoring systems. As detailed in the National Drug Court Institute’s (NDCI) Judicial Benchbook (2011), for testing to correctly assess the drug use patterns of program participants, it is crucial that samples be collected in a random, unannounced manner. The more unexpected and unanticipated the collection regime, the more accurately the testing results will reflect the actual substance use of the client population. Drug courts need to appreciate the value of the element of surprise from an abstinence monitoring standpoint (relapse detection). If clients never know when they are going to be tested, then opportunities for them to use drugs during known testing gaps are reduced, as well as opportunities for them to engage in sample tampering strategies to avoid detection. Some testing protocols may mistake frequency for thoroughness. Believing that testing 3 to 4 times per week (e.g., Monday, Wednesday, Friday) is equally sufficient and effective coverage may be erroneous because it is on a predictable schedule (unless the testing occurs every day). Courts that relinquish the element of surprise may fall victim to creative clients who may find opportunities to subvert the program’s objectives.

• **Increase the frequency of specialized testing.** Knowing that budget constraints limit programs greatly, the RDWI should consider increasing the frequency of specialized testing to ensure participants are not using substances that do not show up on the standard drug tests currently used. The program should also try to perform additional testing on samples collected outside of court sessions or other scheduled program requirements, so participants are not aware of when a test may potentially be sent to a lab and when it will not.

**Key Component #6: A Coordinated Strategy Governs Drug Court Responses to Participants’ Compliance.**

The focus of this component, as well as the Guiding Principle for DWI Courts on case management strategies, is on how the drug or DWI court team supports each participant and addresses his or her individual needs, as well as how the team works together to determine an effective, coordinated, response.\(^{11}\) Drug and DWI courts have established a system of rewards and sanctions that determine the program 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 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 and DWI court team members may meet and decide on responses, or the judge may decide on responses in court. Drug and DWI court participants may or may not be informed of the de-
tails on this system of rewards and sanctions so their ability to anticipate a response from their team may vary significantly across programs.

**National Research**

Case management is an essential component of DWI court programs and should be seen as central to the program, by tying the other principles and components together (Monchick, Scheyett, & Pfeifer, 2006).

Nationally, the judge generally makes the final decision regarding sanctions or rewards, based on input from the drug or DWI court team.

Carey, Finigan, and Pukstas (2008) found that for a program to have positive outcomes, it is not necessary for the judge to be the sole provider of sanctions. Allowing team members to dispense sanctions makes it more likely that sanctions occur in a timely manner, more immediately after the noncompliant behavior, though the entire team should be informed when a sanction occurs outside of court. Carey et al. (2012) showed that drug and DWI courts that responded to infractions immediately (particularly requiring the participant to attend court at the next possible session) had twice the cost savings.

In addition, all programs surveyed in the American University study confirmed they had established guidelines for their sanctions and rewards policies, and nearly two-thirds (64%) reported that their guidelines were written (Cooper, 2000). Research has found that courts that had their guidelines for team responses to participant behavior written and provided to the team had higher graduation rates and higher cost savings due to lower recidivism (Carey, Finigan, & Pukstas, 2008; Carey et al., 2011).

**RDWI Process**

The majority of case management is performed by the probation officer; however, the surveillance technician, voluntary treatment representatives, and city attorney also participate in case management frequently. Participants meet with their probation officer on a regular basis with the frequency of contact set by program phase. During Phase 1, participants meet with their probation officer a minimum of once per week if they are not involved in treatment and once every 2 weeks if they are involved with treatment. Office visits are every 2-3 weeks during Phase 2, and once per month in the last phase of the program. Also, if participants are struggling or have additional needs, the probation officer will schedule additional office visits. The probation officer reviews the participant’s activities such as self-help meetings attended,
job searches, drug testing results, and performs case management (transportation needs, family issues, etc.) as needed.

- Participants are given a written list of possible rewards. There is a written list of specific behaviors and associated rewards, so participants know what kinds of behaviors lead to rewards. The team noted that they have periodically gathered feedback from participants regarding rewards and received no negative feedback.

- Participants receive intangible rewards (such as applause and praise from the judge) and tangible rewards (such as gift cards and certificates). Rewards can only be provided during court by the judge and most rewards are provided in a standardized manner. For example, participants receive medallions after achieving a certain number of days sober.

- Books for phase advancement and the fishbowl drawing were reported by RDWI team members to be particularly effective incentives. All participants who appear for court and have met all program requirements since their last court date have their name placed in a fishbowl, with a name being drawn at the end of the court session. That individual then draws a prize from a separate fishbowl, which contains an assortment of different rewards ranging from gift cards, electronics, lunch with the judge, and even a pass that allows the participant to skip their next court date (although this still must be approved by the team prior to their next court date).

- RDWI team members are given written guidelines about sanctions, rewards and treatment responses to participant behavior. Some team responses are standardized (the same sanction/reward are provided for the same kinds of behavior), but the team noted that responses are always discussed as a group and decided on a case-by-case basis.

- All RDWI team members received training in the use of rewards and sanctions to modify behavior of DWI court participants from the National Center for DWI Courts (NCDC) in 2012.

- Multiple team members noted that there has been a shift in the how the program responds to participants since attending training on incentives and sanctions in 2012. The program realized that sanctions were issued more frequently than incentives, and that certain sanctions were being overused. The program has addressed this practice and is aware of the need to maintain balance with incentives and sanctions.

- Participants are given a written list of behaviors that lead to sanctions and also a list of possible sanctions.

- Sanctions are graduated so that the severity increases with more frequent or more serious infractions.
Sanctions are imposed by the judge at the next court session for non-compliant behavior, and may not be imposed outside of court by team members (other than taking participants into custody during home visits for cause).

Program responses to participant behavior may include writing essays, community service, Sentence to Serve (where participants work on a supervised work crew), increased drug testing, more court appearances, returning to an earlier phase, and jail.

The team noted that written essays, returning to an earlier phase, and community service at the courthouse were particularly effective responses to non-compliance.

Jail is always used as a sanction for ongoing failure to appear in court (a warrant is issued in this circumstance). Jail may be used on occasion for noncompliance, driving without a license, and positive drug tests. The court most often uses 2-day jail sanctions.

Jail is sometimes used as an alternative for detoxification or residential when detoxification or residential treatment is not available.

The probation officer tracks rewards and sanctions given to each participant over the course of the program. This information is provided during staffing each time a participants appears in court.

New arrests for DWI, trafficking, or any violent offense would result in immediate termination from DWI court.

Failure to appear in court, missing treatment sessions, repeated positive drug tests, continued use, or lack of progress in treatment/program may also result in termination, but team members noted that these were not automatic termination criteria. Instead, all circumstances and issues would be considered before anyone was officially terminated from the program for these specific behaviors.

Termination from the program results in the full imposition of the offender’s original sentence.

In order to graduate participants must remain drug and alcohol free for 180 days, complete community service, complete a wellness plan (similar to a relapse prevention plan), pay all DWI court fees, have no infractions for 45 days, and attend a Mothers Against Drunk Driving (MADD) Panel. In addition to these requirements, participants must also complete an action known as “Pay It Forward,” where participants must write about something they’ve done to give back to the community. This must be a self-initiated deed, and participants cannot utilize community service sites or other actions they are otherwise required to complete.

Graduations are held at the end of regularly scheduled court sessions. Participants are recognized individually and asked questions by the judge such as how they plan to maintain sobriety, what they learned from the program, and describing their “Pay It Forward” requirement. Participant families in attendance are recognized, and multiple team members (including the city attorney, surveillance technician and voluntary treatment representative) speak about the participant and their success. Participants are also presented with a framed certificate and a card signed by all team members.
All participants who enter the RDWI are sentenced to 4 years of probation. Graduates must serve any of the time remaining on their supervision period on standard supervision. Requirements during this time are significantly reduced, with participants only required to meet with their probation officer monthly, attend alumni meetings quarterly, and submitting to drug testing as directed.

Commendations

- **Team members have written guidelines for team responses to participant behavior.** The RDWI has guidelines for team responses to participant behaviors in writing, and these are provided to the team. This best practice has been shown to produce higher graduation rates and greater cost savings due to lower recidivism.

- **Good coordination of team response to participant compliance.** A variety of rewards are provided to participants in the court. Participants are rewarded for progress with praise from the judge, promotion to the next phase, reduction in frequency of court hearings and UAs, or sobriety medallions. The team has become aware of the need to provide rewards at least as frequently as sanctions, and it was observed that the RDWI has an appropriate balance. The program also understands that if a participant has engaged in a behavior that requires a sanction, they need to ensure that the sanction occurs as close to the behavior as possible to reinforce the link between behavior and consequence. The RDWI works to achieve this by scheduling the noncompliant participant for the next upcoming court session rather than waiting until the participant’s next scheduled session to have the sanction applied in court.

- **Graduation ceremonies are celebrations of successful participants.** During observations, it was clear that graduation from the RDWI represented a significant accomplishment for the graduates. The program ensures that graduations are distinct from regular DWI court hearings, even if it occurs during a regular hearing. Further, requiring program participants to attend DWI court graduation ceremonies is a way to help create and strengthen a supportive environment among individual participants and serve to motivate current participants to progress to graduation. Graduations also provide an opportunity for community partners to witness program successes. Inviting community partners to observe and participate in graduations is a low-cost way to highlight the effectiveness of the program and garner interest for continued and future involvement with the program.

Suggestions/Recommendations

- **Be aware of cultural issues with team approach to participants.** Focus group participants reported that certain groups within the program (specifically African American males) appeared to be treated differently by the RDWI in regard to team responses to their behavior. To address this perception, it may be helpful for the research analyst within the district to monitor information on the different racial groups served by the program, to see if there are differences in court responses (types of responses, frequency of responses, etc.) and present that information to the team. It would also be useful to continue to monitor the 2nd District’s biennial report to see if any groups of participants are showing better outcomes and work to address any issues that arise (for example, currently African Americans account for a disproportionally large percentage of terminations), although the team should keep in mind that other factors also contribute to success or failure such as employment, income, education and age.
- **Explain the reasons for rewards and sanctions in court and be aware of the importance of appearing fair.** Because this DWI court often imposes rewards and sanctions on an individualized basis, the team needs to take into consideration the appearance of unequal treatment for similar infractions. It is important to communicate the rationale behind decisions regarding sanctions, even if it seems redundant at times. The program is encouraged to explain court responses to behavior in detail during court sessions, both for the benefit of the participant being addressed by the judge and for the participants who are observing.

  **Note:** Certainty, immediacy, and magnitude relate to how rewards and sanctions are actually imposed. However, *perceptions* of rewards and sanctions are also very important. Evidence from cognitive psychology reveals that individuals are more likely to perceive a decision as being correct and appropriate if they believe that fair procedures were employed in reaching that decision. In fact, the perceived fairness of the procedures exerts a greater influence over participants’ reactions than does the outcome of the decision. Specifically, participants will be most likely to accept an adverse judgment if they feel they (1) had a fair opportunity to voice their side of the story, (2) were treated in an equivalent manner to similar people in similar circumstances, and (3) were accorded respect and dignity throughout the process. When any one of these factors is absent, behavior not only fails to improve, but may get worse, and participants may sabotage their own treatment goals.

  This does not mean that participants should necessarily get what they want. The important point is that they should be given a fair chance to explain their side of the story, and they should be offered a clear explanation about how and why a particular decision was reached. If staff members have difficulty articulating a defensible rationale for why a participant is being treated a given way, it may be an opportunity to rethink its response. It should be clear that the sanction is intended to address the participant’s misconduct, and is not being imposed because the participant is a bad person or intrinsically deserves to be punished (NDCI Judicial Benchbook, 2011).

**Key Component #7: Ongoing Judicial Interaction with Each Participant is Essential.**

Key Component #7 and the associated Guiding Principle for DWI Courts are focused on the judge’s role in a drug or DWI court. The judge has an extremely important function in monitoring client progress and using the court’s authority to promote positive outcomes. While this component encourages ongoing interaction, courts must still decide specifically how to structure the judge’s role. Courts need to determine the appropriate amount of courtroom interaction between the participant and the judge, including the frequency of status review hearings, as well as how involved the judge is 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 or DWI court judge is to provide the authority to ensure that appropriate treatment recommendations from trained treatment providers are followed.

The judge is the ultimate arbiter of factual controversies in the program, and makes the final decision concerning the imposition of incentives or sanctions that affect participants’ legal status or personal liberty. The judge should make such determinations after giving due consideration to

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12 DWI Court Guiding Principle #6
the expert input of other team members, and after discussing the matter in court with the participant or participant’s legal representative.

National Research

From its national data in 2000, the American University Drug Court Survey (Cooper, 2000) reported that most drug court programs require weekly contact with the judge in Phase 1, contact every 2 weeks in Phase 2, and monthly contact in Phase 3. The frequency of contact decreases for each advancement in phase. Although most drug courts follow the above model, a substantial percentage reports less court contact.

Research in California, Oregon, Michigan, Maryland, Missouri, and Guam (Carey et al., 2005; Carey, Finigan, & Pukstas, 2008; Carey et al., 2011, 2012) 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 court sessions weekly, or every 2 weeks, were effective for higher risk offenders while less frequent sessions (e.g., monthly) were effective for only low-risk offenders.

In addition, programs where judges remained with the program at least 2 years had the most positive participant outcomes (Carey et al., 2005). 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 (Finigan et al., 2007).

Finally, recent research in 69 drug courts nationally (Carey et al., 2012) showed that programs where the judge spent at least 3 minutes per participant during status review hearings talking with participants had significantly lower recidivism and higher cost savings.

RDWI Process

- There are two district court judges currently assigned to the RDWI. The program initially began with one judge assigned to the program, but availability became an issue due to the judge’s schedule outside of DWI court prompting the chief to assign two judges to the program. Within Ramsey County, judges rotate between different divisions (criminal, civil, family, etc.) approximately every 2-3 years. Interested judges currently assigned to the criminal division are considered to preside over the DWI court program. Although rotations happen every 2-3 years, the program works to ensure overlap between an experienced judge and newly assigned judge for smoother transition.
- The two program judges currently assigned to the program have been on the team for 2 years and 3 years, respectively.
- The two judges alternately preside over court sessions that are held weekly and do not attend staffing and court sessions together. The schedule of presiding over DWI court is not consistent as availability is determined by the judicial criminal dockets, which can vary from week to week. As a result, one judge may preside over the RDWI for 3-4 consecutive weeks at a time.
- DWI court participants are required to attend court sessions once per week in Phase 1, once every 2 weeks in Phase 2, and once per month during Phase 3.
- The observed staffing session began at 11:00 a.m. and lasted 2.5 hours, with the team discussing 50 participants who were scheduled for court.
Staffing is primarily facilitated by the probation officer, city attorney, and judge. However, most team members are engaged in discussions during the staffing, and the team generally displays good communication (see recommendation in Key Component #2). The probation officer typically begins with updates on participants scheduled to appear in court and notes any outstanding issues that need to be discussed as a team. Staffing notes are excellent and contain a lot of detail, including demographics, primary and secondary contact information, initial/final LSIR or LSCMi scores, personal triggers, driving status, employment status, education level, court start date, phase dates, financial information/fees owed, treatment information (sobriety date, medallion, drugs of choice, last use), health insurance, assessment date and any diagnosis, clinic and counseling information, medications, sponsor name, treatment service information (location, type, start and end dates), previous treatments, curriculums required (Driving with Care, MADD panel, etc.), next court date, next medallion, special conditions of probation, UA results (positives, dilutes, dates, and sanctions given), and the current status of the participant (compliant, significant events, etc.).

Participants are required to stay for the entire DWI court session, although exceptions can be made for participants on occasion (those who need to return to work or have been excused for pre-approved reasons).

Due to time constraints and the court schedule, only one court session (with one of the two program judges) was observed during the site visit. The judge with the longer tenure (approximately 3 years) was presiding on the day of observation (referred to as RDWI Judge #1). Court was scheduled to begin at 1:30 p.m. but began at approximately 2:00 p.m. The session ended at 3:00 p.m. with 50 participants seen by the judge. This resulted in an average of 1.2 minutes per participant in front of the judge. Team members noted that court sessions typically average 1.5 to 2 hours. It should also be noted that the observed session was a court date where all phases were scheduled to appear and that a ceremony with four graduates took place after the official court session had ended.

Team members noted that previously when one judge did not preside over the court for several weeks, substantial time was spent updating the judge at the subsequent staffing session they attended. Team members noted that this issue has been greatly improved by the DWI court coordinator sending weekly updates (the day after court) to the judge not presiding over that week’s staffing and court session. In addition to the weekly updates, the judges periodically receive communication from team members about participants and other administrative matters between court sessions.

RDWI Judge #1 has received formal drug court training, DWI court-specific training, and training by previous DWI court judges.

The RDWI Judge #2 has received training on the drug court model, as well as incentives and sanctions training specific to DWI court.

Court sessions begin with all participants lining up to provide a breathalyzer sample and turn in their “passport” to the probation officer. A “passport” is a document that participants keep and contains information on their various program requirements (specific to their current phase). Participants must document and have someone sign each time they provide a drug test and complete a self-help meeting. This information is reviewed by the probation officer during court who then returns the document to the participant.
• RDWI Judge #1 sat on the bench and spoke directly to participants during the court session. Participants were seated in and around the jury box, behind the lawyer tables, and in the gallery. The judge called on participants in alphabetical order and addressed them from where they were seated in the courtroom. Participants do not typically stand up when addressed and only approach the judge’s bench if they were receiving a medallion for sobriety. For those who received a medallion, their sobriety was acknowledged and the courtroom applauded. The atmosphere of the courtroom was non-adversarial, which was aided by the judge’s demeanor and general attitude, as he was relatable and light-hearted throughout the court session. Recognition and encouragement were given to some participants when appropriate. He provided follow-through on warnings to participants and regularly followed recommendations provided by the team.

• Other team members spoke up during the court session or addressed participants privately (when needed) to clarify issues such as community service hours, drug testing schedules, or next appointments.

• Multiple team members engaged in discussions with participants after the court session to confirm requirements, offer encouragement, or just to continue conversations that occurred in court.

**Commendations**

• **The program has a judge who has presided over the program for more than 2 years.** Judicial experience and longevity are correlated with more positive participant outcomes and significantly higher cost savings, particularly 2 years and longer (Carey et al., 2012).

• **The judges require participants to stay through the entire court hearing.** DWI court hearings are a forum for educating all participants and impacting their behavior. It is important that the court requires most participants (exceptions can be made) to stay for the entire hearing both to observe consequences (both good and bad) and to learn how those who are doing well are able to succeed and make healthy choices and positive changes in their lives.

• **Both judges work well together and maintain consistency.** Although the RDWI has a unique arrangement with two judges who alternately preside, both judges receive weekly updates from the DWI court coordinator (updates are provided to the judge that is not present during that week’s staffing and court session), which allows the judges to maintain consistency and perform well together as a team. Although only one judge was observed, it was confirmed by multiple team members and participants during the site visit that although personality and stylistic differences may exist, both judges are very consistent in their approach with the DWI court.

**Participant Quotes:**

• “They are good; seem to care about you, very personal. Always come to all the functions.”

• “The judges are pretty considerate with the outcome of your progress and how you’re doing...show a lot of concern.”

• “I think they are fair and helpful and really seem to truly care about what was best for you. They aren’t there to punish you, they want to see you succeed.”
Weekly staffing notes provide exceptional detail and information on participants. Providing such comprehensive information greatly aids the RDWI staff in considering the circumstances of each individual participant while discussing court responses (both positive and negative). It also allows the program to look back at previous responses and methods that have been used to either increase the severity of sanctions or consider options that have yet to be utilized. Specific items such as the LSCMI scores at entry and prior to exit also serve as a tool to track participant progress and the potential effects of the DWI court.

Suggestions/Recommendations

Consider decreasing the required frequency of court appearances in Phase 1. Participants in the RDWI are required to attend court once per week during Phase 1 (minimum of 90 days). As recent research has shown that court appearances every 2 weeks can have comparable or even better outcomes compared to more frequent appearances (Carey, Finigan, & Pukstas, 2008; Carey et al., 2012; Marlowe et al., 2006), the RDWI may want to consider reducing the frequency of DWI court appearances to once every 2 weeks for some participants in the first phase. During a follow-up call with the team to discuss the recommendations, it was suggested that team members may want to discuss options such as having participants attend court once per week for the first 4-6 weeks of Phase 1, and then every other week for the remainder of the phase. Frequent contact is important when participants begin the program, so if such a policy is implemented, the program has the option of increasing the frequency of court (back to weekly sessions) for participants who are struggling or have greater needs. A concern expressed on the call was that participants with greater needs do need to be seen more frequently, but there was not a good risk-need tool available specific to DWI offenders. A tool has been developed very recently. Information on this tool can be found at [http://www.uscourts.gov/uscourts/FederalCourts/PPS/Fedprob/2011-12/risk.html](http://www.uscourts.gov/uscourts/FederalCourts/PPS/Fedprob/2011-12/risk.html).

Currently, once per month the program holds an “all phase day” where every program participant is scheduled to appear in court. Staggering the court dates of participants (so not all Phase 2 and 3 participants must appear on the same date each month) may also help to reduce the number of participants who must attend court all at one session.

These options may benefit RDWI by helping reduce program costs and freeing up more time for the judges to speak with participants while in the courtroom. Allowing more time during court sessions for the judge to hear about positive behaviors and participant progress could reinforce relationships between the judge and participants and increase opportunities for the participants to receive positive reinforcement for their efforts. It also allows other participants to see the successes of their peers and the benefits of making healthy decisions.

Increase participant time spent before the judge, particularly for participants who are doing well. During the court session observation, participants spent an average of 1 minute speaking with RDWI Judge #1. An average of 3 minutes per participant is related to graduation rates 15 percentage points higher and recidivism rates that are 50% lower than drug courts that spend less than 3 minutes per participant (Carey et al., 2011). Due to the larger number of participants who were scheduled to appear in court, minimal time and attention was given to participants doing well in the program during staffing and court (not including graduates). Since the court session is a learning opportunity for all participants, spending more time with the participants who are doing well will allow oth-
er participants to observe and learn positive behaviors that will help them replace old negative behaviors. While it is important to properly address the negative behaviors of participants in the program, team members should also ensure that this does not happen at the expense of those doing well in the program, particularly in the court session. The program should consider the previous recommendation of having participants appear in court less frequently to allow the judge to see fewer participants each session and therefore spend more time with each participant. The team may also consider seeing successful participants (who are in Phase 2 or 3) earlier in the session and excusing participants early as a reward for positive behavior demonstrated since the previous hearing. During the follow-up call, team members remarked that they were aware that court sessions tended to focus on participants not doing well. Team members were receptive to ideas to increase the attention given to those doing well and understood the need to address positive participant behaviors more often.

- **Consider some adjustments to court session processes.** RDWI Judge #1 typically addresses participants from where they are seated in the courtroom. Due the number of participants, sometimes they are seated quite far away from the bench, which can negatively impact the personal connection between the judge and individuals seated in the gallery. Eye contact is inconsistent as most participants remain seated and multiple obstructions may stand between the judge and participant. Program participants noted that interactions with the judge were brief and “not very personal” at times, depending on how many participants were scheduled for court. Participants also remarked that there were instances where participants who were doing well were addressed as a whole and given applause instead of individually being recognized. Due to the importance of the participant’s relationship with the judge (participants consistently report that their interactions with the judge were the most meaningful aspect of program participation for them), the program should evaluate options to increase the amount of positive, personal interaction the judge has with participants. Such options may include addressing participants in greater proximity to the bench by calling them up to the bench in combination with increasing the average time spent with each participant (as recommended above). During the follow-up call, the team commented that RDWI Judge #2 had instituted a policy in which all participants are required to stand while being addressed in court, and that this seemed to help improve the overall court process.

- **Judges should continue to preside over DWI court for at least 2 years and organize rotations so that the same judges can rotate back to the program.** The program should consider discussion with the district court chief judge (and other appropriate parties) regarding implementation of a policy that would structure the judicial rotation so that judges can eventually return to the DWI court bench, utilizing their past experience. Allowing the judge to volunteer for this service, if possible, also increases the potential for improved client outcomes (Carey, Finigan, & Pukstas, 2008). If it is not possible to change the rotation schedule, the program should continue to have DWI court judges available to new judges for consultation. It is recommended that the DWI court continue to keep the judges on the DWI court bench for at least 2 years and ideally longer, rather than having a frequently rotating assignment, as judge experience and longevity are correlated with more positive participant outcomes and greater cost savings (Finigan et al., 2007).
KEY COMPONENT #8: MONITORING AND EVALUATION MEASURE THE ACHIEVEMENT OF PROGRAM GOALS AND GAUGE EFFECTIVENESS.

This component and the related Guiding Principle encourage drug or DWI 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 increase funding and community support. Monitoring and evaluation require the collection of thorough and accurate records. Drug and DWI courts may record important information electronically, in paper files, or both. Ideally, courts will partner with an independent evaluator to help assess their progress. Lastly, it is important to determine how receptive programs are to modifying their procedures in response to feedback.

National Research

Carey, Finigan, and Pukstas (2008) and Carey et al. (2012) found that programs with evaluation processes in place had significantly 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 evaluation, 2) the use of program statistics by the program to make modifications to drug court operations, 3) the use of program evaluation results to make modification to drug court operations, and 4) the participation of the drug or DWI court in more than one evaluation by an independent evaluator.

RDWI Process

- The RDWI collects and tracks information as required by the state of Minnesota, including the Offender Drug Court Tracking Sheet which includes demographic information, as well as pre and post-program data on employment, education, and jail time. Federal grant requirements also obligate the program to track other relevant information such as recidivism, number of screenings, and jail days.

- The court coordinator tracks data in three separate databases, including one specifically for the DWI court program. Treatment providers, probation and the court also all have separate databases that are utilized. The probation officer enters data regarding drug testing, home visits, employment, and general case notes on participants in the Court Services Tracking System (CSTS).

- Information is monitored to assess whether the program is moving toward its goals and has resulted in program changes. Although the CSTS database is maintained by the probation office, it is accessible to others, including a court research analyst in Ramsey County. It was reported that previous reviews of this information have resulted in increased UA’s, increased cognitive programming, and increased mental health assessments.

- In addition to this current process evaluation, the program has had an evaluator (the research analyst with Ramsey County) assess whether the program is being implemented as intended and whether the program is achieving its intended outcomes. As noted above, adjustments in policy or practice have been made as a result of these evaluations.

Commendations

13 DWI Guiding Principle #9
• **The RDWI collects electronic data.** The program is commended for performing data collection in the local court and probation office databases, as well as entering information in Excel. The team regularly reviews its data/statistics and has included this information for review at policy committee meetings. These reviews are used to assess the program’s functioning and also to make adjustments to program requirements as needed.

• **The RDWI has been reviewed by a county analyst and modified practices in response to the results as well as participating in the current evaluation.** Previous evaluations have been completed on a biennial basis by a research analyst with the local district court and include information on incentives provided, drug testing results, and recidivism for participants who exit the program. Courts that have participated in evaluation and made program modifications based on evaluation feedback have had twice the cost savings compared to courts that have not adjusted their program based on evaluation feedback (Carey et al., 2012).

**Suggestions/Recommendations**

• **Share evaluation and assessment results.** The RDWI team members are encouraged to discuss the overall findings, both to enjoy the recognition of its accomplishments and to identify areas of potential program adjustment and improvement. We recommend that RDWI schedule a time for the policy committee to discuss the results of this evaluation and make a plan for how to use the information. In addition, the assessment and evaluation results can be beneficial to the program when looking to apply for grants to fund additional positions and resources or for local funders/agencies to help them access resources. These results can document needs as well as show how well the program has done in specific areas.

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

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

Team members must receive role-specific training in order to understand the non-adversarial, collaborative nature of the model. Team members must not only be fully trained on their role and requirements, but also be willing to adopt the balanced and strength-based philosophy of the drug/DWI court. Once understood and adopted, long assignment periods for team members are ideal, as tenure and experience allow for better understanding and full assimilation of the model components into daily operations.

**National Research**

Research on the use of evidence-based and promising practices in the criminal justice field has consistently shown that in order to operate effective programs as intended, practitioners must receive the necessary resources to make the program work, receive ongoing training and technical assistance, and be committed to the quality assurance process (Barnoski, 2004; Latessa & Lowenkamp, 2006). Andrews and Bonta (2010) maintain that correctional and court programs must be focused not only on targeting high-risk offenders and matching offenders to appropriate
treatment (needs), but must also concentrate on effectively building and maintaining the skill set of the employees (in the case of drug/DWI courts—team members) who work with offenders. Training and support allow teams to focus on translating drug court best practice findings into daily operations and build natural integrity to the model (Bourgon, Bonta, Rugge, Scott, & Yessine, 2010).

Carey, Finigan, and Pukstas (2008) and Carey et al. (2012) found that drug/DWI court programs requiring all new hires to complete formal training or orientation and requiring all team members be provided with regular training were associated with higher graduation rates and greater cost savings due to lower recidivism.

RDWI Process

- The RDWI Judge #1, city attorney, one of the voluntary treatment representatives, surveillance technician, and DWI coordinator have received either DWI or Drug Court-specific training.
- It was reported that some team members have received specific training about the target population of the program. Some staff have also received training specific to their roles and also on strength-based philosophy and practices.
- All current team members completed sanctions and incentives training specific to DWI court in 2012.
- Staff members occasionally bring new information on DWI court practices, including drug addiction and treatment, to staffing meetings.
- The RDWI court Judge #2, probation officer, one of the voluntary treatment representatives, and conditional release agent have not received any formal DWI (or drug) Court, outside of on-the-job training.
- New DWI court team members do not typically get training on the drug/DWI court model before (or soon after) joining the team.

Commendations

- **The program has invested time on regular training.** The DWI court has engaged in a substantial amount of training for staff and is commended on their dedication to educating team members. Programs that provide training for all team members have significantly better participant outcomes (Carey et al., 2012).

Recommendations

- **Ensure that all team members receive training on drug and DWI court-related topics.** Because of the lack of formal DWI court-specific education for some team members, we recommend that the RDWI team explore ways to obtain training for any team members who have not had this education, as well as refreshers for those who have. These trainings should include education on the drug court model, DWI court methods, and collaboration. NPC’s recent research findings showed that drug courts that obtained regular training for their team members had better participant outcomes, including decreased recidivism, greater program completion, and greater cost savings (Carey et al., 2008, 2012).

The National Drug Court Institute (NDCI) will often provide training or assistance at little or no cost for those programs that show the need (see [http://www.ndci.org/training](http://www.ndci.org/training)). There are also training materials available on the NDCI Web site that may be useful as a reading assignment for all team members. In addition, one low-cost option is to have
team members take turns performing the duty of searching for recent drug and DWI court research and other relevant information (e.g., drug addiction and treatment) and spending a few minutes at team meetings reviewing the main findings and how they can be used to supplement the program.

- **Obtain cultural-specific training for all team members.** The team should update its knowledge and resources regarding cultural awareness and responsiveness to ensure that it is appropriately addressing the needs of its participant population. In order to ensure that services offered through the DWI court are culturally specific/sensitive, staff members working directly with participants need to have experience with and understanding of the cultural characteristics of all the populations being served.

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

This component and associated DWI Court Guiding Principle on sustainability encourage drug/DWI 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/DWI 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/DWI courts must 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/DWI court team; who will provide input primarily through policymaking; and what types of services will be available to clients through these partnerships.

The overall focus is on sustainability, which includes engaging interagency partners, becoming an integral approach to the DWI problem in the community, creating collaborative partnerships, learning to foresee obstacles and addressing them proactively, and planning for future funding needs.

**National Research**

Results from the American University National Drug Court Survey (Cooper, 2000) show most drug courts are working closely with community groups to provide support services for their participants. Examples of community resource partnerships include self-help groups such as AA and NA, medical providers, local education systems, employment services, faith communities, and Chambers of Commerce. Carey et al. (2005, 2012) found that programs that had true formal partnerships with community agencies that provide services to drug court participants had better outcomes than programs that did not have these partnerships.

Additional preliminary findings (Carey et al., 2012) indicate that drug court programs with an advisory committee that includes members of the community nearly doubled the cost savings.

**RDWI Process**

- The RDWI has an advisory board/policy committee that meets monthly outside of staffing sessions to discuss program issues. In addition to all team members, representatives from Mothers Against Drunk Driving (MADD) and local law enforcement attend these
meetings to discuss policy-level issues. The team also attempts to have a retreat each year in January.

- The RDWI was initially funded through the National Highway Traffic Safety Administration (NHTSA) and local city/county funding. The RDWI has been able to secure additional funding through a Byrne Justice Assistance (BJA) grant, state funding provided by the Office of Justice Programs (OJP), and county-level funding to continue operations. Team members noted that state funding currently underwriting various positions on the team was a concern in the upcoming fiscal year.

- The DWI court has developed and maintained relationships with organizations that can provide services for participants in the community and refers participants to those services when appropriate, including education, housing, and employment. The program was recently established as a 501(c)3 organization as well.

- Team members noted the value of a specific relationship with a DWI court alumnus who manages a sober house and that they are able to get more participants into this particular housing unit.

- The RDWI has a psychiatric court clinic (through the Ramsey County Mental Health Department) that is staffed by a nurse and doctor who screen and work with participants that do not have insurance. The nurse frequently comes to staffing for eligibility screening, and the doctor will work with participants to treat mental health issues. Team members reported that they communicate with both staff on a regular basis and also contact them for questions about medications that participants may be taking.

- An alumni group has been established that meets quarterly and also provides support to current participants. The alumni group is usually facilitated by the probation officer and surveillance technician with graduates of the program required to attend the quarterly meetings while they remain on probation.

Commendations

- The program has creatively and effectively addressed many participant needs. The program is commended for creating solutions to program barriers faced by participants. Team members provided examples of challenges they have solved related to psychiatric services and housing. This responsiveness and support helps the participants develop a trust in the program that it really is on their side and working in their best interest and be more likely to succeed. The team should continue discussing possible community connections and resources, and ideas for generating outside support to enhance the program and be responsive to changes in the environment and participant needs.

- The program has established an alumni group. The RDWI has established an alumni group that all graduates must attend quarterly (while they remain on probation) and is open to any previous participants of the program. Although team members noted that the group has not become fully self-sufficient (as team members facilitate the meetings instead of the alumni), it should be noted that this issue is common among all DWI court programs, and that they continually work to address this challenge. The RDWI also works closely with the local drug court alumni group to collaborate and share resources when possible. During court observations, the drug court alumni group made an announcement about an upcoming sober event that RDWI participants were encouraged to help with or to simply attend. The RDWI should continue to work support their alumni
group and encourage certain individual alumni members to take leadership roles (when appropriate) within the group.

Suggestions/Recommendations

- **Continue connecting with existing and new community partners.** The program should continue to build upon current partnerships and seek additional community support. A community mapping worksheet can be found online to possibly help identify all possible community connections. ([http://dn2vfhkykblonm.cloudfront.net/sites/default/files/community_mapping_resources_chart.pdf](http://dn2vfhkykblonm.cloudfront.net/sites/default/files/community_mapping_resources_chart.pdf)).

- **Continue to invite community members and staff from other agencies to RDWI graduations.** Despite being established for many years, multiple team members noted that much of the general community is still unaware of the RDWI program and its mission to improve the community and individual lives. It is important to educate those not familiar with DWI courts in how the DWI court model works and its benefits. Graduation ceremonies provide powerful testimony for the effectiveness of DWI courts. Inviting potential community partners to graduations is one low-cost strategy for strengthening outreach efforts and allows them to witness positive program impacts.

- **Continue to address future DWI court funding during DWI court policy meetings.** The team should continue to discuss program needs and ideas for generating additional resources. The team has already worked toward identifying mechanisms and potential sources of funding (as evidenced by the RDWI’s application for BJA funding to expand the program by accepting felony offenders) and should continue to do so. The NADCP Web site ([www.nadcp.org](http://www.nadcp.org)) and other state and federal sources should continue to be reviewed periodically for funding opportunities as they come available.

**ADDITIONAL RESOURCES**

The appendices at the end of this document contain additional information for DWI courts. Appendix A contains the Guiding Principles of DWI Courts. Appendix B contains Minnesota’s drug court and DWI court standards. Other important and useful resources for drug courts (such as free webinars on a variety of drug court-related topics and sample screening and assessment forms, etc.) are available at these Web addresses: [http://www.dwicourts.org](http://www.dwicourts.org), [http://www.ndcrc.org](http://www.ndcrc.org) and [http://www.ndcrc.org/search/apachesolr_search/sample%20forms](http://www.ndcrc.org/search/apachesolr_search/sample%20forms).
Summary of Process Findings and Recommendations

The RDWI was implemented in January 2005 to enhance public safety by helping repeat DWI offenders become law-abiding citizens. Currently, there are two judges, each serving in the role of RDWI judge. The judges alternately preside over staffing and court sessions, depending on scheduling and availability, and do not typically attend sessions in which they are not presiding. The program, designed to take a minimum of 13 months to complete, takes only post-conviction participants. The general program population consists of repeat DWI offenders with gross misdemeanor cases (two or more DWI offenses within 10 years) charged in Ramsey County who voluntarily agree to participate in the program. The RDWI has a capacity to serve approximately 60 participants at one time. As of March 2013, there had been 82 graduates and 36 terminated participants.

Overall, the RDWI has implemented its DWI court program within the guidelines of the 10 Key Components and 10 Guiding Principles. The program should be commended for the following good practices:

- **Good team member communication.** All team members attend staffing sessions and provide feedback on participant progress as well as court responses. It was also reported that frequent email and phone contact occurs among team members between staffing sessions, which ensures that relevant information is communicated in a timely manner. Research has shown that drug courts that shared information among team members through email had 65% lower recidivism than drug courts that did not use email (Carey et al., 2011).

- **A policy committee that meets monthly.** The program has implemented a policy committee (referred to by team members as their “monthly brown bag” meeting). The purpose of the meetings is to discuss and make decisions about DWI court policy issues that cannot be addressed during staffing sessions, and also ensuring they are working toward program goals. This committee may consider using an upcoming session as a venue for addressing each of the recommendations described in this report such as exploring the options for increasing participant time in front of the judge, coordinating/communicating with treatment providers, and evaluating the current drug testing system.

- **RDWI has a dedicated city attorney and defense attorney assigned to the program.** Best practices research indicates that this results in positive participant outcomes including significantly lower recidivism and increased cost savings (Carey, Finigan, & Pukstas, 2008). Both attorneys are aware of the team approach while participating in DWI court proceedings and are clearly supportive of the DWI court model.

- **Participants are identified quickly and promptly placed into the program.** The program has an excellent system where the conditional release agent is able to make contact with potential participants very quickly. One of the goals of DWI court is to expedite the connection of individuals to services, as prompt program placement has been shown to lead to better participant outcomes including higher cost savings. The RDWI is commended for enrolling participants swiftly and limiting the time from arrest to entry to less than one month in most circumstances.

- **Decisions on accepting new participants are made as a team during staffing sessions.** After screening by the conditional release agent, referrals are discussed at the subsequent staffing session, resulting in the entire team making eligibility decisions. Since all team
members are part of this decision, there is more buy-in and support for each participant, and the team can better identify issues that may affect their ability to treat each participant in the program.

- **The program length is a minimum of 12 months, and has at least 3 phases.** Programs that have a minimum length of stay of at least 12 months had significantly higher reductions in recidivism. In addition, programs that had 3 or more phases showed greater reductions in recidivism (Carey et al., 2012).

- **The program offers an array of treatment services and uses evidence-based programming.** The RDWI offers a breadth of diverse and specialized services to program participants through partnerships with the various treatment providers.

- **The program offers referrals for ancillary services for participants.** Team members reported that the RDWI makes referrals for medical, dental and psychiatric care when needed. Meeting participant needs across the spectrum of issues affecting their lives can help them be more successful. In addition, appropriate care can help mitigate participant use of substances to self-medicate problems related to physical pain. Many programs have seen benefits with reduction in recidivism from offering health services.

- **Participants must write a relapse prevention plan, and there are resources for participants in the community after their time in the program.** The relapse prevention plan includes ways of avoiding triggers, coping with triggers, and developing alternative alcohol-free activities that support sustained recovery. A relapse prevention plan enhances participants’ ability to maintain the behavioral changes they have accomplished through participation in the RDWI. In addition, an alumni group is required for graduates to attend while still on probation, but also available for any prior participants to attend.

- **Drug testing occurs at least 2 times per week in the first phase.** Research indicates that testing 2 or more times per week in the first phase leads to lower recidivism rates. The program is recognized for following this best practice and is encouraged to consider this level of testing throughout other phases of the program.

- **Participants are required to test clean for at least 180 days before they can graduate.** Research has shown that the longer clients are required to be clean before graduation, the more positive their outcomes (both in terms of lowered recidivism and lower costs) (Carey et al., 2005; Carey, Finigan, & Pukstas, 2008; Carey et al., 2012).

- **Team members have written guidelines for team responses to participant behavior.** The RDWI has guidelines for team responses to participant behaviors in writing, and these are provided to the team. This best practice has been shown to produce higher graduation rates and greater cost savings due to lower recidivism.

- **Good coordination of team response to participant compliance.** A variety of rewards are provided to participants in the court. Participants are rewarded for progress with praise from the judge, promotion to the next phase, reduction in frequency of court hearings and unianalysis tests (UAs), or sobriety medallions. The team has become aware of the need to provide rewards a least as frequently as sanctions, and it was observed that the RDWI has an appropriate balance. The program also understands that if a participant has engaged in a behavior that requires a sanction, they need to ensure that the sanction occurs as close to the behavior as possible to reinforce the link between behavior and consequence. The RDWI works to achieve this by scheduling the noncompliant partici-
pant for the next upcoming court session rather than waiting until the participant’s next scheduled session to have the sanction applied in court.

- **The program has a judge who has presided over the program for more than 2 years.** Judicial experience and longevity are correlated with more positive participant outcomes and significantly higher cost savings, particularly 2 years and longer (Carey et al., 2012).

- **The judges require participants to stay through the entire court hearing.** DWI court hearings are a forum for educating all participants and impacting their behavior. It is important that the court requires most participants (exceptions can be made) to stay for the entire hearing both to observe consequences (both good and bad) and to learn how those who are doing well are able to succeed and make healthy choices and positive changes in their lives.

- **Both judges work well together and maintain consistency.** Although the RDWI has a unique arrangement with two judges who alternately preside, both judges receive weekly updates from the DWI court coordinator (updates are provided to the judge that is not present during that week’s staffing and court session), which allows the judges to maintain consistency and perform well together as a team. Although only one judge was observed, it was confirmed by multiple team members and participants during the site visit that although personality and stylistic differences may exist, both judges are very consistent in their approach with the DWI court.

- **Weekly staffing notes provide exceptional detail and information on participants.** Providing such comprehensive information greatly aids the RDWI staff in considering the circumstances of each individual participant while discussing court responses (both positive and negative). It also allows the program to look back at previous responses and methods that have been used to either increase the severity of sanctions or consider options that have yet to be utilized. Specific items such as the LSCMI scores at entry and prior to exit also serve as a tool to track participant progress and the potential effects of the DWI court.

- **The RDWI collects electronic data.** The program is commended for performing data collection in the local court and probation office databases, as well as entering information in Excel. The team regularly reviews its data/statistics and has included this information for review at policy committee meetings. These reviews are used to assess the program’s functioning and also to make adjustments to program requirements as needed.

- **The RDWI has been reviewed by a county analyst and modified practices in response to the results as well as participating in the current evaluation.** Previous evaluations have been completed on a biennial basis by a research analyst with the local district court and include information on incentives provided, drug testing results, and recidivism for participants who exit the program. Courts that have participated in evaluation and made program modifications based on evaluation feedback have had twice the cost savings compared to courts that have not adjusted their program based on evaluation feedback (Carey et al., 2012).

- **The program has invested time on regular training.** The DWI court has engaged in a substantial amount of training for staff and is commended on their dedication to educating team members. Programs that provide training for all team members have significantly better participant outcomes (Carey et al., 2012).
• **The program has creatively and effectively addressed many participant needs.** The program is commended for creating solutions to program barriers faced by participants. Team members provided examples of challenges they have solved related to psychiatric services and housing. This responsiveness and support helps the participants develop a trust in the program that it really is on their side and working in their best interest and be more likely to succeed. The team should continue discussing possible community connections and resources, and ideas for generating outside support to enhance the program and to be responsive to changes in the environment and participant needs.

• **The program has established an alumni group.** The RDWI has established an alumni group that all graduates must attend quarterly (while they remain on probation) and is open to any previous participants of the program. Although team members noted that the group has not become fully self-sufficient (as team members facilitate the meetings instead of the alumni), it should be noted that this issue is common among all DWI court programs, and that they continually work to address this challenge. The RDWI also works closely with the local drug court alumni group to collaborate and share resources when possible. During court observations, the drug court alumni group made an announcement about an upcoming sober event that RDWI participants were encouraged to help with or to simply attend. The RDWI should continue to work support their alumni group and encourage certain individual alumni members to take leadership roles (when appropriate) within the group.

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

The following recommendations represent the primary areas of suggested program improvement that arose during the interviews, focus groups, and observations during the site visit. Background information, more detailed explanations, and additional recommendations presented within each of the 10 Key Components and 10 Guiding Principles are included in the body of the report.

- **Work to streamline communication between treatment providers and the probation officer.** In order for the team to make informed and fair decisions about responses to participant behavior, it is crucial that all necessary treatment information be provided to probation and the court before these decisions need to be made. It was reported that while some treatment providers did communicate regularly with the program, others did not provide timely information. The program may consider creating a memorandum of understanding (MOU) with each of the providers utilized that includes guidelines on how information is shared with the program (when information should be sent, what types of information, etc.). It is recommended that the RDWI communicate with these agencies to try and obtain this information in a standardized manner. An example of a progress report that can be shared with the treatment providers was provided to the program along with this report. The court can also request modifying the information required for state records.

During the follow-up phone call, team members also suggested that there may be a lack of understanding among some treatment providers as to why this information is so critical to the success of the program and the participants. The team agreed that finding a better way to educate these providers (particularly those that are utilized most often) may lead to better
communication. For instance, a treatment counselor had recently attended DWI court to learn more about the program after hearing positive feedback from a participant.

- **To the extent possible, coordinate treatment through a single organization.** The team noted during the follow-up phone call that this recommendation may be difficult to achieve, as the program does not usually have any influence on where a participant attends treatment. Due to the numerous providers that are available to participants, it may never be possible for the RDWI to consolidate all treatment services under one or two providers. However, it may be possible to have a single treatment-knowledgeable team member coordinate services. Research shows that having one to two treatment-providing agencies, or having a single coordinating provider, is significantly related to better program outcomes including lower recidivism and increased cost savings (Carey et al., 2012). This may also aid in better communication between the RDWI and the various providers (discussed further below).

- **Consider adjusting some program requirements for those diagnosed as substance abusers.** Research has shown that identifying whether participants are substance users or abusers can help ensure that appropriate care is provided and suitable expectations are imposed on participants. Some program requirements, particularly self-help meetings, may be inappropriate for non-dependent individuals. Self help groups such as Alcoholics Anonymous (AA) and Narcotics Anonymous (NA) in some communities have complained about the influx of non-dependent individuals referred from the criminal justice system. These individuals can be disruptive to meetings because they do not relate to the discussion. The first step of AA is “admitting that one cannot control one’s addiction or compulsion.” Since this is not true for abusers (the definition of abuser is that they are not dependent), the first thing they are required to do in AA is admit to an untruth. It is recommended that the RDWI explore alternative requirements or programs for abusers.

- **Obtain results from drug testing within 2 days.** The drug testing company utilized by the RDWI (RS EDEN) is able to provide results for most drug tests within a few days, including Etg testing. Team members noted that results are reported within 3-4 days on average, but that this time frame can vary and there have been instances when results took a week or longer. The RDWI should work with the drug testing agency to strive to obtain results within 2 days as research has shown this best practice is associated with higher graduation rates and lower recidivism (Carey, Finigan, & Pukstas, 2008).

- **Announce the drug test color in morning and shorten window of time to give tests.** As detailed in the National Drug Court Institute’s (NDCI) Judicial Benchbook (2011), this strategy will limit the opportunity participants have to engage in sample tampering tactics by reducing the time between notification of a drug test and the time that the sample collection actually occurs. Currently, the drug testing color is announced approximately 24 hours prior to drug tests being submitted, and testing hours vary during the week from the morning to late afternoon. While there are numerous factors that constrain the court’s sample collection timing and a client’s ability to travel to the collection site, it is important to limit the interval between notification and collection. The more effective a court is at shrinking this time period (which ideally is no longer than a few hours), the greater the success of the program’s deterrent and monitoring efforts. Also, announcing the drug test color in the morning may help address the large number of diluted tests that the program receives. Participants noted frustration with diluted samples and noted that they occurred frequently despite trying to prevent them.
Review and adjust drug testing procedures to ensure effectiveness. Multiple concerns were reported during the site visit by both team members and focus group participants regarding the drug testing system. It was conveyed that the variation in drug testing hours creates issues for many participants, particularly days when the testing center is open for only 3-4 hours. It was reported that occasionally all participants may be required to submit a drug test (known as an “all colors” day) when the drug testing center is only open for 3-4 hours, and can result in participants waiting over an hour to submit a test. The variation in hours of operation throughout the week was also reported to be very confusing for some participants. Additionally, there have been complaints that participants were at times unable to understand the drug testing hotline message.

Due to the importance of maintaining integrity in drug testing, establishing a protocol (or MOU) with the drug testing center may help increase accountability. At a minimum, the sample collectors should be trained in appropriate communication skills and professionalism while collecting drug tests. The program noted during the follow-up call that the local probation office’s contract with their current drug testing lab was set to expire soon, and that additional standards (such as testing hours, etc.) would be added to ensure better testing procedures.

Other factors to consider in selecting a drug-testing facility include: personnel collecting the sample (level of training); volume of testing (which often influences the cost per test); list of drugs to be screened (not all drugs can be easily detected in every specimen type); and turnaround time for results (critical for effective therapeutic intervention). The overall cost associated with drug testing can vary widely between specimen types and between laboratory-based versus on-site testing devices. The adage “you get what you pay for” is especially relevant to drug testing. Drug courts should evaluate cost-benefit differences closely before choosing a specimen type or a testing method. Those courts relying on a lowest bid request for proposals (RFP) should develop those requests with sufficient detail and safeguards to ensure the integrity of the testing. The ability to access drug-testing results quickly and obtain expert technical assistance in addressing questions or concerns should not be overlooked (NDCI Judicial Benchbook, 2011).

Consider maintaining a higher frequency of drug testing through Phase 3 of the program. The RDWI should examine their current process of decreasing the frequency of drug testing (testing goes from an average of 8 per month in Phase 1 to an average of 2 per month in Phase 4) and ensure that it does not occur before other forms of supervision have been decreased successfully. Drug court research (Marlowe, 2008) suggests that the frequency of drug testing be the last thing that is ratcheted down as participants’ progress through phases. As treatment sessions and court appearances are decreased, checking for substance use becomes increasingly important to determine if the participant is doing well with more independence and less supervision.

Do not allow scheduled drug testing to occur. At the time of the site visit, the program had recently begun to allow some participants to submit to drug testing on the same day each week, due to some individuals who were unable to afford electronic alcohol monitoring systems. As detailed in the National Drug Court Institute’s (NDCI) Judicial Benchbook (2011), for testing to correctly assess the drug use patterns of program participants, it is crucial that samples be collected in a random, unannounced manner. The more unexpected and unanticipated the collection regime, the more accurately the testing results will reflect the actual substance use of the client population.
• **Be aware of cultural issues with team approach to participants.** Focus group participants reported that certain groups within the program (specifically African American males) appeared to be treated differently by the RDWI in regard to team responses to their behavior. To address this perception, it may be helpful for the research analyst within the district to monitor information on the different racial groups served by the program, to see if there are differences in court responses (types of responses, frequency of responses, etc.) and present that information to the team. It would also be useful to continue to monitor the 2nd District’s biennial report to see if any groups of participants are showing better outcomes and work to address any issues that arise (for example, currently African Americans account for a disproportionately large percentage of terminations), although the team should keep in mind that other factors also contribute to success or failure such as employment, income, education and age.

• **Explain the reasons for rewards and sanctions in court and be aware of the importance of appearing fair.** Because this DWI court often imposes rewards and sanctions on an individualized basis, the team needs to take into consideration the appearance of unequal treatment for similar infractions. It is important to communicate the rationale behind decisions regarding sanctions, even if it seems redundant at times. The program is encouraged to explain court responses to behavior in detail during court sessions, both for the benefit of the participant being addressed by the judge and for the participants who are observing.

• **Consider decreasing the required frequency of court appearances in Phase 1.** Participants in the RDWI are required to attend court once per week during Phase 1 (minimum of 90 days). As recent research has shown that court appearances every 2 weeks can have comparable or even better outcomes compared to more frequent appearances (Carey, Finigan, & Pukstas, 2008; Carey et al., 2012; Marlowe et al., 2006), the RDWI may want to consider reducing the frequency of DWI court appearances to once every 2 weeks for some participants in the first phase. During a follow-up call with the team to discuss the recommendations, it was suggested that team members may want to discuss options such as having participants attend court once per week for the first 4-6 weeks of Phase 1, and then every other week for the remainder of the phase. Frequent contact is important when participants begin the program, so if such a policy is implemented, the program has the option of increasing the frequency of court (back to weekly sessions) for participants who are struggling or have greater needs.

• **Increase participant time spent before the judge, particularly for participants who are doing well.** During the court session observation, participants spent an average of 1 minute speaking with RDWI Judge #1. An average of 3 minutes per participant is related to graduation rates 15 percentage points higher and recidivism rates that are 50% lower than drug courts that spend less than 3 minutes per participant (Carey et al., 2011). Due to the larger number of participants who were scheduled to appear in court, minimal time and attention was given to participants doing well in the program during staffing and court (not including graduates). Since the court session is a learning opportunity for all participants, spending more time with the participants who are doing well will allow other participants to observe and learn positive behaviors that will help them replace old negative behaviors. While it is important to properly address the negative behaviors of participants in the program, team members should also ensure that this does not happen at the expense of those doing well in the program, particularly in the court session. The program should consider the previous recommendation of having participants appear in court
less frequently to allow the judge to see fewer participants each session and therefore spend more time with each participant. The team may also consider seeing successful participants (who are in Phase 2 or 3) earlier in the session and excusing participants early as a reward for positive behavior demonstrated since the previous hearing. During the follow-up call, team members remarked that they were aware that court sessions tended to focus on participants not doing well. Team members were receptive to ideas to increase the attention given to those doing well and understood the need to address positive participant behaviors more often.

- **Consider some adjustments to court session processes.** RDWI Judge #1 typically addresses participants from where they are seated in the courtroom. Due to the number of participants, sometimes they are seated quite far away from the bench, which can negatively impact the personal connection between the judge and individuals seated in the gallery. Eye contact is inconsistent as most participants remain seated and multiple obstructions may stand between the judge and participant. Program participants noted that interactions with the judge were brief and “not very personal” at times, depending on how many participants were scheduled for court. Participants also remarked that there were instances where participants who were doing well were addressed as a whole and given applause instead of individually being recognized. Due to the importance of the participant’s relationship with the judge (participants consistently report that their interactions with the judge were the most meaningful aspect of program participation for them), the program should evaluate options to increase the amount of positive, personal interaction the judge has with participants. Such options may include addressing participants in greater proximity to the bench by calling them up to the bench in combination with increasing the average time spent with each participant (as recommended above). During the follow-up call, the team commented that RDWI Judge #2 had instituted a policy in which all participants are required to stand while being addressed in court, and that this seemed to help improve the overall court process.

- **Judges should continue to preside over DWI court for at least 2 years and organize rotations so that the same judges can rotate back to the program.** The program should consider discussion with the district court chief judge (and other appropriate parties) regarding implementation of a policy that would structure the judicial rotation so that judges can eventually return to the DWI court bench, utilizing their past experience. Allowing the judge to volunteer for this service, if possible, also increases the potential for improved client outcomes (Carey, Finigan, & Pukstas, 2008). If it is not possible to change the rotation schedule, the program should continue to have DWI court judges available to new judges for consultation. It is recommended that the DWI court continue to keep the judges on the DWI court bench for at least 2 years and ideally longer, rather than having a frequently rotating assignment, as judge experience and longevity are correlated with more positive participant outcomes and greater cost savings (Finigan et al., 2007).

- **Ensure that all team members receive training on drug and DWI court-related topics.** Because of the lack of formal DWI court-specific education for some team members, we recommend that the RDWI team explore ways to obtain training for any team members who have not had this education, as well as refreshers for those who have. These trainings should include education on the drug court model, DWI court methods, and collaboration. NPC’s recent research findings showed that drug courts that obtained regular training for their team members had better participant outcomes, including decreased re-
cidivism, greater program completion, and greater cost savings (Carey, Finigan, & Pukstas, 2008; Carey et al., 2012).

- **Obtain cultural-specific training for all team members.** The team should update its knowledge and resources regarding cultural awareness and responsiveness to ensure that it is appropriately addressing the needs of its participant population. In order to ensure that services offered through the DWI court are culturally specific/sensitive, staff members working directly with participants need to have experience with and understanding of the cultural characteristics of all the populations being served.

- **Continue to invite community members and staff from other agencies to RDWI graduations.** Despite being established for many years, multiple team members noted that much of the general community is still unaware of the RDWI program and its mission to improve the community and individual lives. It is important to educate those not familiar with DWI courts in how the DWI court model works and its benefits. Graduation ceremonies provide powerful testimony for the effectiveness of DWI courts. Inviting potential community partners to graduations is one low-cost strategy for strengthening outreach efforts and allows them to witness positive program impacts.

Overall the RDWI has implemented a program that follows the guidelines of the 10 Key Components of Drug Courts and 10 Guiding Principles of DWI Courts. The following sections of the report present the RDWI outcome and cost results, as well as additional recommendations.
SECTION II: OUTCOME EVALUATION

The main purpose of outcome evaluation is to determine whether the program has improved participant outcomes. In other words, did the program achieve its intended goals for its participants? An outcome evaluation can examine short term outcomes that occur while a participant is still in the program. Short term outcomes include whether the program is delivering the intended amount of services, whether participants receive treatment more quickly and complete treatment more often than those who do not participate, whether participants are successfully completing the program in the intended amount of time, whether drug or alcohol use is reduced, and what factors lead to participants successfully completing the program. An outcome evaluation can also measure longer term outcomes (sometimes called an “impact evaluation”), including participant outcomes after program completion. In the case of DWI court programs, one of the largest impacts of interest is recidivism, particularly DWI recidivism. Are program participants avoiding the criminal justice system “revolving door”? How often are participants being rearrested with DWI charges, and are they spending time on probation or in jail? How often are participants in subsequent traffic-related incidents, including crashes and fatalities?

Outcome Evaluation Methods

For the outcome/impact evaluation, we identified a sample of participants who entered the DWI court program, along with a sample of individuals eligible for the DWI court but who received traditional court processing for their DWI charge (a policy alternative). It is important to identify a comparison group of individuals who are eligible for the DWI court because those who are not eligible represent a different population of DWI offenders; thus, any differences that cause individuals to be ineligible for DWI court could also be the cause of any differences found in outcomes. (Our methods for selecting the comparison group are described below.) Data for both program and comparison participants were tracked through existing administrative databases for a period of 1 to 3 years post DWI court entry depending on the availability of the data. The evaluation team used criminal justice, traffic safety, and treatment utilization data sources as described in Table 1 to determine whether DWI court participants and the comparison group differ in subsequent arrests, crashes, use of interlock devices, and license removal or reinstatement.

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

1. What is the impact of DWI court on recidivism?
   1a. Does participation in DWI court reduce the average number of all rearrests and DWI rearrests for those individuals compared with traditional court processing?
   1b. Does participation in DWI court lead to a lower overall recidivism rate (the percent of participants who were rearrested) compared with traditional court?
   1c. Are non-DWI court offenders (DWI offenders who go through the traditional court process) more likely to get a new DWI charge sooner than DWI court participants?
   1d. Does participation in DWI court reduce the number of traffic-related crashes for those individuals compared with traditional court processing?
   1e. Does participation in DWI court lead to a lower crash rate (the number of participants who are involved in crashes) compared with traditional court?
2. What is the impact of DWI court on other outcomes of interest?

2a. Does participation in DWI court lead to an increased rate of license reinstatement (the percent of people whose license is reinstated) compared with traditional court?

2b. Does participation in DWI court lead to increased use of an interlock device (the percent of people who were required to use interlock) compared with traditional court?

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

4. What participant and program characteristics predict successful DWI court outcomes? What predicts non-completion (termination or unsuccessful exit from the DWI court program)?

SAMPLE/COHORT SELECTION

To ensure a rigorous outcome evaluation, it is necessary to select a cohort of individuals who participated in the DWI court and a cohort of similar individuals who did not.

The DWI Court Participant Group

The DWI court participant sample, or cohort, was the population of individuals who entered DWI court from January 1, 2005, to August 23, 2012. Outcomes are presented in 1-, 2-, and 3-year increments.

Evaluations sometimes exclude the first year of participants from analysis to allow the program time to be fully implemented. However, there were several sites in Minnesota in which we needed every available case to detect significant differences between groups. In the case of the RDWI, the largest site, we ran all the analyses excluding the first year participants and found no differences in outcomes. Thus, we decided to retain all participants in this analysis to ensure the highest level of power in the analysis.

The Comparison Group

Step 1: Selecting the Comparison Group

The comparison sample is composed of individuals who are similar to those who participated in the DWI court program (e.g., similar demographics and criminal history) but who did not participate in the program. The comparison sample was selected through a quasi-experimental design. We obtained a list from the Department of Public Safety, Office of Traffic Safety and Driver and Vehicle Services database of all individuals who had two or more DWI convictions from January 2004 to October 2012. These data allowed the identification of individuals in each county who had at least two DWIs in a period of 10 years or less and were therefore potentially eligible for RDWI. Additional information was gathered from the State Court Administrator’s Office Court (SCAO) database on this initial list of potential comparison group members that indicated whether they fit the eligibility criteria for the DWI court program. This information included detailed demographics and criminal history. All DWI court participants were removed from the list, and then the DWI court participants and comparison individuals were matched on all available information (described in detail below) using propensity score matching.
Step 2: Matching the Comparison Groups to the DWI Court Groups - Application of Propensity Score Weighting

Comparing program participants to offenders who did not participate in the DWI court (comparison group members) is complicated by the fact that program participants may systematically differ from comparison group members, and those differences, rather than DWI court, may account for some or all of the observed differences in the impact measures. To address this complication, once the available comparison sample was identified, we used a method called propensity score matching because it provides some control for differences between the program participants and the comparison group (according to the available data on both groups) (Rosenbaum & Rubin, 1983). Propensity scores are a weighting scheme designed to mimic random assignment.

We matched participants with potential comparison group members on a number of participant characteristics including: 1) race, 2) age, 3) gender, and 4) prior criminal history/prior DWI history.15

DATA COLLECTION AND SOURCES

Administrative Data

NPC staff members adapted procedures developed in previous drug and DWI court evaluation projects for data collection, management, and analysis of the DWI court data. The data necessary for the evaluation were gathered from administrative databases as described in Table 1. The table lists the type of data needed and the source of these data.

Table 1. MN DWI Court Evaluation Data and Sources

<table>
<thead>
<tr>
<th>Data</th>
<th>Source</th>
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</thead>
<tbody>
<tr>
<td><strong>DWI Court Program Data</strong></td>
<td></td>
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<tr>
<td>Examples:</td>
<td></td>
</tr>
<tr>
<td>- Identifiers</td>
<td>SCAO Drug Court Tracking Sheets</td>
</tr>
<tr>
<td>- Participant demographics</td>
<td>SCAO/Judicial Branch (MNCIS)</td>
</tr>
<tr>
<td>- Program start and end dates</td>
<td></td>
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<tr>
<td>- Substances used in the year before program entry</td>
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<tr>
<td>- Treatment attended</td>
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<tr>
<td>- Driver’s license status</td>
<td></td>
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<tr>
<td>- Employment at entry and exit</td>
<td></td>
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<tr>
<td>- Housing status</td>
<td></td>
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<tr>
<td>- Dates of DWI court appearances/status review hearings</td>
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</table>

15 We attempted to collect data on risk and need assessment scores in order to match the DWI court and comparison group on risk and need level. However, most DWI offenders who did not participate in DWI court were not assessed for risk or need, so these data were unavailable. We believe that criminal history and prior DWI history provide some indication of risk level for this population.
<table>
<thead>
<tr>
<th>Data</th>
<th>Source</th>
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<tbody>
<tr>
<td><strong>Treatment Data</strong></td>
<td></td>
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<tr>
<td><em>Examples:</em></td>
<td></td>
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<tr>
<td>• Identifiers and Demographics</td>
<td>Minnesota Department of Human Services (DHS)</td>
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<tr>
<td>• Treatment Modality</td>
<td></td>
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<tr>
<td>• Dates of treatment sessions and/or start and end dates for each modality</td>
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<tr>
<td>• Dates of assessments performed</td>
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<tr>
<td>• Assessment score (e.g., Needs assessment)</td>
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<tr>
<td>• Billing information for treatment services</td>
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<tr>
<td><strong>Court-Related Data</strong></td>
<td></td>
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<tr>
<td><em>Examples:</em></td>
<td></td>
</tr>
<tr>
<td>• Identifiers</td>
<td>SCAO/Judicial Branch (MNCIS)</td>
</tr>
<tr>
<td>• Incident dates (arrest dates)</td>
<td></td>
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<tr>
<td>• Dates of case filings</td>
<td></td>
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<td>• Charges</td>
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<tr>
<td>• Dates of convictions</td>
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<tr>
<td>• Dates of court appearances</td>
<td></td>
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<tr>
<td><strong>DWI History and Recidivism Data</strong></td>
<td></td>
</tr>
<tr>
<td><em>Examples:</em></td>
<td></td>
</tr>
<tr>
<td>• Identifiers</td>
<td>Department of Public Safety, Driver and Vehicle Services (DVS) data</td>
</tr>
<tr>
<td>• Dates of DWI arrests</td>
<td></td>
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<tr>
<td>• Dates of DWI convictions</td>
<td></td>
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<tr>
<td>• Dates of DWI-related crashes</td>
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<tr>
<td><strong>Department of Corrections Recidivism-Related Data</strong></td>
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<tr>
<td><em>Examples:</em></td>
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<tr>
<td>• Identifiers</td>
<td>Minnesota Department of Corrections (DOC)</td>
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<tr>
<td>• Demographics</td>
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<tr>
<td>• Jail entry and exit dates</td>
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<tr>
<td>• Prison entry and exit dates</td>
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<td>• Parole start and end dates</td>
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<td>• Probation start and end dates</td>
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<tr>
<td>• Dates of drug tests</td>
<td></td>
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<tr>
<td>• Results of drug tests</td>
<td></td>
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<tr>
<td>• Risk assessment results (LSIR/RANT)</td>
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</table>
Section II: Outcome Evaluation

<table>
<thead>
<tr>
<th>Data</th>
<th>Source</th>
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<tbody>
<tr>
<td><strong>Probation Recidivism Data</strong></td>
<td>Local Probation Department Databases or Files</td>
</tr>
<tr>
<td>Examples:</td>
<td>County Court Services or Probation Department for each of the nine DWI court counties</td>
</tr>
<tr>
<td>• Probation start and end dates</td>
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<tr>
<td>• Risk assessment results</td>
<td></td>
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<tr>
<td>• Dates of drug tests</td>
<td></td>
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<tr>
<td>• Results of drug tests</td>
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*Note.* Availability of drug test dates and results, as well as risk assessment scores, varied by site. In some sites where these data were available, they were sometimes incomplete and/or unavailable for the comparison group.

**DATA ANALYSES**

Once all data were gathered on the study participants, the data were compiled and cleaned and moved into SPSS 20.0 for statistical analysis. The analyses used to answer specific questions are described below.¹⁶

**RESEARCH QUESTION #1: WHAT IS THE IMPACT OF DWI COURT ON RECIDIVISM?**

1a. *Does participation in DWI court reduce the average number of all rearrests and DWI rearrests for those individuals compared with traditional court processing?*

Independent sample *t* tests and univariate analysis of covariance (ANCOVA) were performed to compare the mean number of all rearrests (including those for DWI charges) for all DWI court participants and the comparison group for each year up to 3 years after DWI court start date or an equivalent date for the comparison group *(in the interest of simplicity, we will refer to this as the “program start date” for both groups going forward).* Means generated by univariate analysis were adjusted in the analysis based on gender, age at program entry (or equivalent in the comparison group), race, and number of prior arrests.¹⁷ The non-adjusted means for graduates are included in the results for reference but should not be compared directly with the comparison group as the comparison group includes an unknown number of individuals who, had they participated in DWI court, may have unsuccessfully terminated from the program and are therefore not equivalent to DWI court graduates.

¹⁶ Analyses that examine outcome time periods greater than 1 year include only participants who have the full outcome time available. For example, analyses that examine outcomes 3 years from DWI court entry will only include individuals that entered the program at least 3 full years from the time we received the data. Outcomes are based upon program entry date (or a similar date calculated for the comparison group).

¹⁷ Time at risk to offend (i.e., the length of time an individual spent in the community—not incarcerated—during each follow-up time period) was NOT controlled for in this or subsequent research questions, as the intention of the analysis was to determine whether DWI court participation (which typically occurs in the community) reduces recidivism more effectively than business-as-usual, which typically includes at least some incarceration. If incarceration was used for non-DWI court participants and was effective in reducing crime, then controlling for this factor would prevent us from determining which path (DWI court or business as usual) was more effective. However, in the interest of testing this question, i.e., whether time at risk would impact rearrests, we ran analyses controlling for time-at-risk and found no effect on any recidivism results.
1b. Does participation in DWI court lead to a lower overall recidivism rate (the percent of participants who were rearrested) compared with traditional court?

Crosstabs were run to examine differences in recidivism rate (the number/percentage of individuals rearrested at least once during the specified time period) between DWI court and the comparison group for each year up to 3 years following program entry. Chi-square analyses were used to identify any significant differences in rearrest rates between DWI court and comparison group participants.

A logistic regression was used to determine if differences between DWI court participants and the comparison group were significant over and above any differences due to gender, age, race, and criminal history (number of arrests in the 2 years prior to DWI court program entry date).

1c. Are non-DWI court offenders (DWI offenders who go through the traditional court process) more likely to get a new DWI charge sooner than DWI court participants?

Due to the low prevalence of DWI rearrests, survival analysis of time to DWI rearrest was inappropriate. In its place, we used survival analysis to examine the time to any rearrest after program start date between the DWI court group and the comparison group (DWI offenders who went through “business as usual” probation processing). Time to any rearrest, or survival time, was calculated by subtracting the date rearrested from the program start date. The survival opportunity window for each individual was calculated by subtracting the date of program entry from the date of the earliest outcome dataset collected for this study (court data received on August 23, 2013). The number of months of observation for each participant serves as the censor date for those not rearrested. A Kaplan-Meier estimator and—if appropriate—a Cox Regression were used to determine if there were any significant differences in how swiftly (or how soon) DWI rearrests occur between DWI court participants and the comparison group.

1d. Does participation in DWI court reduce the number of traffic-related crashes for those individuals compared with traditional court processing?

Independent sample t tests and univariate analysis of covariance (ANCOVA) were performed to compare the mean number of all rearrests, including those for DWI charges, for all DWI court participants with the comparison group for each year up to 3 years after program start date. Means generated by univariate analysis were adjusted in the analysis based on gender, age at program entry (or equivalent in the comparison group), race, and number of prior arrests. The non-adjusted means for graduates are included in the results for reference but should not be compared directly with the comparison group as the comparison group includes an unknown number of individuals who, had they participated in DWI court, may have terminated from the program and are therefore not equivalent to DWI court graduates.

1e. Does participation in DWI court lead to a lower crash rate (the number of participants who are involved in crashes) compared with traditional court?

Crosstabs were run to examine differences in crash rate (the number/percentage of individuals in crashes at least once during the specified time period) between DWI court and the comparison group for each year up to 3 years following the program start date. Chi-square analyses were used to identify any significant differences in rearrest rates between DWI court and comparison group participants.

A logistic regression was used to determine if differences between DWI court participants and the comparison group were significant over and above any differences due to gender, age, race, and criminal history (number of arrests in the 2 years prior to DWI court start).
RESEARCH QUESTION #2: WHAT IS THE IMPACT OF DWI COURT ON OTHER OUTCOMES OF INTEREST?

2a. Does participation in DWI court lead to an increased rate of license reinstatement (the percent of people whose license is reinstated) compared with traditional court?

Crosstabs were run to examine differences in license reinstatement rate (the number/percentage of individuals who regained their licenses at least once during the specified time period) between DWI court and the comparison group for each year up to 3 years following program entry (or an equivalent date for the comparison group). Chi-square analyses were used to identify any significant differences in license reinstatement rates between DWI court and comparison group participants.

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

2b. Does participation in DWI court lead to increased use of an interlock device (the percent of people who were required to use interlock) compared with traditional court?

The percentage of individuals who were required to use an interlock device within 1 year after their program start date was compared between the DWI participants and the comparison group. Interlock data were only available from late 2011 forward; therefore, analysis was limited to 1-year outcomes due to the low number of people on interlock in conjunction with the limited number of program and comparison group people with 2 years of outcomes.

Crosstabs were run to examine differences in interlock device use rate (the number/percentage of individuals who were required to use interlock at least once during the specified time period) between DWI court and the comparison group for each year up to 1 year following program entry. Chi-square analyses were used to identify any significant differences in rates between DWI court and comparison group participants.

RESEARCH QUESTION #3: HOW SUCCESSFUL IS THE PROGRAM IN BRINGING PROGRAM PARTICIPANTS TO COMPLETION AND GRADUATION WITHIN THE EXPECTED TIME FRAME?

Whether a program is bringing its participants to completion in the intended time frame is measured by program graduation (successful completion) rates, and by the amount of time participants spent in the program. The program graduation rate is the percentage of participants who graduated from the program out of the total group of participants who started during a specified time period and who have all left the program either by graduating or being unsuccessfully discharged (that is, none of the group is still active and all have had an equal chance to graduate). The DWI court graduation rate is included for all participants, by entry year, from January 2005 to August 2012. The average graduation rate (for participants entering between 2005 and 2012, to allow for enough time to complete the program) is compared to the national average for DWI court graduation rates, and the differences are discussed qualitatively.

To measure whether the program is graduating participants in its expected time frame, the average amount of time in the program was calculated for participants who had enrolled in the DWI court program between January 2005 and August 2012, by DWI court entry year, and have been successfully discharged from the program. The average length of stay for graduates and for all participants was compared to the intended time to program completion, and the differences are discussed qualitatively.
RESEARCH QUESTIONS #4: WHAT PARTICIPANT CHARACTERISTICS PREDICT PROGRAM SUCCESS AND DECREASED RECIDIVISM?

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

Participant characteristics and arrest history were also examined in relation to whether an individual was rearrested following DWI court entry. Chi-square and independent samples t tests were performed to identify which factors were significantly associated with recidivism. A logistic regression was used including all variables in the model to determine if any factors were significantly related to recidivism above and beyond the other factors.
Outcome Evaluation Results

Tables 2-4 provide the demographics for the study sample of DWI court participants (all participants who entered from 2005 to 2012) and the comparison group. Propensity score matching included the characteristics with bolded text, and showed no imbalances. Additional independent samples *t* tests and chi-square analyses confirmed no significant differences between groups on the bolded characteristics. Other characteristics, not used in matching due to lack of availability of consistent data in the comparison group, are provided as additional information.

Overall, Table 2 shows that about three-quarters of DWI court participants were male, seven in 10 were White, and the average age at program entry was 39 years old with a range in age from 21 to 69. None of these characteristics was statistically different in the comparison group.

| Table 2. DWI Court Participant and Comparison Group Characteristics: Demographics |
|---------------------------------|-------------------|-------------------|
| | RDWI Participants | Comparison Group |
| | N = 173 | N = 274 |
| Gender | | |
| Male | 76% | 82% |
| Female | 24% | 18% |
| Race/Ethnicity* | | |
| White | 71% | 76% |
| Black/African American | 19% | 17% |
| Hispanic/ Latino | 8% | 8% |
| Age at Entry Date | | |
| Average age | 39 years | 38 years |
| Range | 21–69 | 18–69 |

*a Percents will not add to 100% because race/ethnicity categories are not mutually exclusive (i.e., some people have more than one designation such as white and Latino).*
In terms of prior criminal history, the DWI court participants and comparison group were very similar (Table 3). Most program participants and comparison group individuals had a gross misdemeanor DWI as their index offense.

Table 3. DWI Court Participant and Comparison Group Characteristics: Criminal History

<table>
<thead>
<tr>
<th>Prior Arrests</th>
<th>RDWI Participants</th>
<th>Comparison Group</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N = 173</td>
<td>N = 274</td>
</tr>
<tr>
<td>Percent with felony DWI as index arrest (the arrest that led to participation in DWI court)</td>
<td>&lt;1%</td>
<td>1%</td>
</tr>
<tr>
<td>Percent with Gross Misdemeanor DWI as index arrest</td>
<td>78%</td>
<td>72%</td>
</tr>
<tr>
<td>Average number of DWI arrests 10 years prior to index arrest</td>
<td>1.64</td>
<td>1.47</td>
</tr>
<tr>
<td>Average number of arrests 2 years prior to program entry</td>
<td>1.88</td>
<td>1.77</td>
</tr>
<tr>
<td>Average number of DWI arrests 2 years prior to program entry</td>
<td>1.31</td>
<td>1.27</td>
</tr>
<tr>
<td>Average number of person arrests 2 years prior to program entry</td>
<td>0.12</td>
<td>0.09</td>
</tr>
<tr>
<td>Average number of property arrests 2 years prior to program entry</td>
<td>0.05</td>
<td>0.05</td>
</tr>
<tr>
<td>Average number of drug arrests 2 years prior to program entry</td>
<td>0.02</td>
<td>0.03</td>
</tr>
<tr>
<td>Average number of other arrests 2 years prior to program entry</td>
<td>0.94</td>
<td>0.88</td>
</tr>
<tr>
<td>Average number of misdemeanor arrests 2 years prior to program entry</td>
<td>0.89</td>
<td>0.93</td>
</tr>
<tr>
<td>Average number of gross misdemeanor arrests 2 years prior to program entry</td>
<td>1.36</td>
<td>1.28</td>
</tr>
<tr>
<td>Average number of felony arrests 2 years prior to program entry</td>
<td>0.02</td>
<td>0.03</td>
</tr>
</tbody>
</table>
Table 4 displays additional characteristics of the DWI court program participants that were not available for the comparison group. Over half (54%) of DWI court participants had some college or were college graduates, and six in 10 were employed either full or part time. Just over one in four participants had a mental health diagnosis at program entry, and four in five were assessed as substance dependent. Just over half were assessed as high risk (56%). Program participants were asked about all substances used in the last year before program entry; all of them reported alcohol consumption, followed by marijuana use (30%) and crack or cocaine use (15%).

Table 4. DWI Court Participant Characteristics: Other

<table>
<thead>
<tr>
<th>Education</th>
<th>RDWI Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than high school</td>
<td>8%</td>
</tr>
<tr>
<td>High school/GED</td>
<td>38%</td>
</tr>
<tr>
<td>Some college or technical school</td>
<td>38%</td>
</tr>
<tr>
<td>College graduate</td>
<td>16%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Employment at Program Entry</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Unemployed</td>
<td>40%</td>
</tr>
<tr>
<td>Employed full or part time</td>
<td>60%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Mental Health Diagnosis</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>28%</td>
</tr>
<tr>
<td>No</td>
<td>72%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Report Addiction Severity at Program Entry</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>No identifiable problem</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>At risk</td>
<td>1%</td>
</tr>
<tr>
<td>Abusing</td>
<td>17%</td>
</tr>
<tr>
<td>Dependent/Substance Use Disorder</td>
<td>81%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Risk Assessment Level</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Low Risk</td>
<td>15%</td>
</tr>
<tr>
<td>Moderate/Medium Risk</td>
<td>29%</td>
</tr>
<tr>
<td>High Risk</td>
<td>56%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Substances Used in Last Year</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol</td>
<td>100%</td>
</tr>
<tr>
<td>Marijuana</td>
<td>30%</td>
</tr>
<tr>
<td>Crack or Cocaine</td>
<td>15%</td>
</tr>
<tr>
<td>Methamphetamine</td>
<td>6%</td>
</tr>
<tr>
<td>Prescription Drugs (Pills)</td>
<td>5%</td>
</tr>
<tr>
<td>Heroin</td>
<td>2%</td>
</tr>
</tbody>
</table>

* Risk assessment information was missing for 20% of participants (n = 35).
* Numbers based on data from Chemical Health Assessment performed at DWI court entry. Numbers do not add up to 100% as participants could report more than one type of substance.
RESEARCH QUESTION #1: WHAT IS THE IMPACT OF DWI COURT ON RECIDIVISM?

1a. Does participation in DWI court reduce the average number of all rearrests and DWI rearrests for those individuals compared with traditional court processing?

YES. DWI court participants had fewer rearrests than the comparison group for any offense. These results were significant at 1 and 2 years, but were not statistically significant after 3 years. The DWI court group and comparison group had a similar number of DWI rearrests, but the total number of DWI rearrests was very small for both groups.

Figure 1 illustrates the average number of cumulative rearrests for each year up to 3 years after program entry for RDWI graduates, all RDWI participants, and the comparison group. DWI court participants had fewer rearrests than the comparison group in each year following program entry, but these results were not statistically significant. We also examined the average number of DWI court graduate rearrests, which were lower than found in the comparison group, but cannot be statistically compared. The reported average number of rearrests for all participants and the comparison group were adjusted for age, race, gender, and prior arrests. While there were no statistical differences in the number of total rearrests, the fact that there was less than one arrest on average per individual over the 3-year period after program entry is a positive one.

Figure 1. Average Number of Rearrests over 3 Years

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18 The unadjusted means are provided for graduates in the figure; they are not directly comparable to the adjusted means of the comparison group, but are provided to add context for differences in outcomes between all DWI participants and graduates.

19 Adjusted means were not significantly different from unadjusted means. For the Year 1 and Year 2 outcomes, the alternate model including time-at-risk was significant at $p < .01$ and $p < .05$, respectively. The adjusted means including time-at-risk in the model for the DWI court program and comparison group are 0.13 and 0.28, respectively, in Year 1; and 0.29 and 0.47, respectively, for Year 2.

20 Sample sizes by group and time period (1 Year, 2 Years, 3 Years): Graduates $n = 122, 106, 86$; All DWI Court Participants $n = 173, 140, 114$; Comparison Group $n = 270, 230, 191$. 
Figure 2 illustrates the average number of cumulative rearrests with DWI charges for each year up to 3 years after program entry for RDWI graduates, all RDWI participants, and the comparison group. The average number of DWI rearrests for all participants and the comparison group was adjusted for age, race, gender, and prior arrests.\textsuperscript{21} DWI court participants had similar DWI rearrest outcomes to the comparison group in each year. Program graduates had similar recidivism outcomes as the entire DWI court group. Results should be drawn with caution, as there were very few DWI rearrests over the 3-year period (after 3 years, there were a total of 11 DWI rearrests in both groups combined—five in the DWI court group and six in the comparison). We should be encouraged that the average number of DWI rearrests even 3 years after program entry is remarkably small.

\textbf{Figure 2. Average Number of DWI Rearrests over 3 Years}\textsuperscript{22}

\begin{figure}
\centering
\includegraphics[width=\textwidth]{figure2.png}
\end{figure}

\textsuperscript{21} Adjusted means were not significantly different from unadjusted means.

\textsuperscript{22} Sample sizes by group and time period (1 Year, 2 Years, 3 Years): Graduates $n = 122, 106, 86$; All DWI Court Participants $n = 173, 140, 114$; Comparison Group $n = 270, 230, 191$. 

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63
1b. Does participation in DWI court lead to a lower overall recidivism rate (the percent of participants who were rearrested) compared with traditional court?

**YES.** The percent of DWI court participants rearrested was significantly lower than the comparison group in Years 1 and 2 (p < .01 in Year 1), but the recidivism rates were similar for both groups in Year 3.

In addition to looking at average number of rearrests, it is also useful to look at what percent of individuals from each group was rearrested over time. Figure 3 illustrates the percent of DWI court graduates, all DWI court participants, and comparison group members who were rearrested over a 3-year period for any charge following program entry. The percent of DWI court participants rearrested was significantly lower than the comparison group at the 1-year mark (10% compared to 20%, respectively, p < .01), but this difference did not persist over time and by the third year the groups had similar results. Again the percent of DWI court graduates rearrested in each year was lower than that of the comparison group, but cannot be statistically compared. The logistic regression comparing DWI court participants and comparison group members controlled for age, race, gender, and prior arrests. Due to turnover in judges in the program, those participants with 3 years of available outcome data had a different judge (or judges) than those who were in the program more recently. It is possible that the change in judges impacted the outcomes for participants in different time frames.

*Figure 3. Percent of Individuals Rearrested over 3 Years*²³

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²³ Sample sizes by group and time period (1 Year, 2 Years, 3 Years): Graduates – n = 122, 106, 86; All DWI Court Participants n = 173, 140, 114; Comparison Group n = 270, 230, 191.
A key indicator of DWI court outcomes is the percent of individuals rearrested for a DWI offense. Figure 4 shows the percent of DWI court graduates, all DWI court participants, and the comparison group who were rearrested with a DWI charge. The percent of DWI court participants who were rearrested with DWI charges was similar to the comparison group in all 3 years. None of the results were statistically significant, which is likely due to the extremely low prevalence of rearrests in both groups (after 3 years there were a total of 11 DWI rearrests—five in the DWI court group and six in the comparison).

**Figure 4. Percent of Individuals Rearrested with a DWI Charge over 3 years**

![Bar chart showing percent of individuals rearrested with a DWI charge over 3 years.](chart.png)

---

24 Sample sizes by group and time period (1 Year, 2 Years, 3 Years): Graduates n = 122, 106, 86; All DWI Court Participants n = 173, 140, 114; Comparison Group n = 270, 230, 191.
To present a more descriptive picture of the criminality of the groups, arrests are also presented as person (e.g., assault), property (e.g., theft), drug (e.g., possession), or other arrest charges (e.g., traffic violations) 3 years from program entry in Figure 5. For each type of arrest charge, except for rearrests for charges such as traffic violations, DWI court participants were less likely to be rearrested than the comparison group. However, logistic regressions were run to control for age, race, gender, and prior arrests, and the differences between groups were not significantly different. “Other” arrests, accounting for the greatest portion of offenses, include a wide variety of offenses such as driving under a suspended or canceled license, speeding, public disorder, restraining order violations, and disturbing the peace, some of which may be directly or indirectly linked to alcohol use and may be more typical of DWI offenders than the other categories.

Figure 5. Percent of Individuals Rearrested by Arrest Charge at 3 Years

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25 When an individual received more than one charge per arrest, a single arrest could be coded as both a person and drug crime. Therefore, the percents in Figures 5-6 do not add up to the percent of total arrests reflected in Figure 4.

26 Sample sizes by group: Graduates n = 86; All DWI Court Participants n = 114; Comparison Group n = 191.
Figure 6 displays the arrest charge level (misdemeanor, gross misdemeanor, or felony). Again, there is no statistical difference between the DWI court participants and the comparison group 3 years after program entry. It is notable that DWI offenders across groups are more likely to be rearrested for lower level charges (misdemeanors) rather than felony charges over the 3-year period.

**Figure 6. Percent of Individuals Rearrested by Arrest Level at 3 Years**

![Bar chart showing percent of individuals rearrested by arrest level at 3 years.](chart)

- **Graduates**
  - Misdemeanor: 17%
  - Gross Misdemeanor: 24%
  - Felony: 2%

- **DWI Court**
  - Misdemeanor: 15%
  - Gross Misdemeanor: 21%
  - Felony: 4%

- **Comparison**
  - Misdemeanor: 27%
  - Gross Misdemeanor: 13%
  - Felony: 8%

Sample sizes by group: Graduates $n = 86$; All DWI Court Participants $n = 114$; Comparison Group $n = 191$. 

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27 Sample sizes by group: Graduates $n = 86$; All DWI Court Participants $n = 114$; Comparison Group $n = 191$. 

---
1c. Are non-DWI court offenders (DWI offenders who go through the traditional court process) more likely to get a new DWI charge sooner than DWI court participants?

POSSIBLY. We were unable to conduct a survival analysis using DWI arrests due to the low number of DWI rearrests (a total of 11 arrests over 3 years). Instead, we performed a survival analysis using arrests for any charge. DWI court participants were rearrested for any offense at a slightly lower rate than the comparison group, but the difference was not significant.

We conducted a survival analysis of participants with up to 3 years (presented in months) of outcome data. Results in Figure 7 show that the time to any rearrest occurred at slightly different rates for DWI court participants and the comparison group. The solid blue line represents the DWI court group and the dashed line represents the comparison group. As the line drops, this indicates the occurrence of rearrests over time. A steeper drop in the line indicates a greater number of rearrests occurring sooner. As displayed in the graph, the DWI court group’s line is generally above the comparison group’s line, indicating a longer time to rearrest for DWI court participants. The average time to first rearrest for program participants was 30.3 months, and for the comparison group 28.8 months, which was not significantly different. The times to a DWI arrest (not shown due to the low prevalence of DWI rearrests) were similar (program = 35.6 months, comparison = 35.4 months—not significant).

**Figure 7. Probability of Remaining Un-Arrested over Time (Survival Function)**

![Survival Function Graph](image-url)
Id. Does participation in DWI court reduce the number of traffic-related crashes for those individuals compared with traditional court processing?

NO. There were no significant differences in the average number of crashes between DWI court participants and the comparison group. However, the numbers were too small for valid statistical analysis.

The average number of crashes for all participants and the comparison group was less than .03 for both groups in Year 1 and Year 2, and less than .09 in Year 3. Due to the very low number of crashes, any comparisons should be made with caution, as there were 20 total crashes in both groups combined over the 3-year period (Year 1=five, Year 2=seven, and Year 3=eight). While the program group does have a higher average number of crashes than the comparison group in Year 3, .09 and .03 respectively (representing 11 compared to nine total crashes), the difference was not significant. We could not conduct statistical tests for crashes involving drugs or alcohol or crashes with injuries, because of the low prevalence of these types of crashes (two and five crashes, respectively, over the 3-year period).

1e. Does participation in DWI court lead to a lower crash rate (the number of participants who are involved in crashes) compared with traditional court?

NO. A similar percent of DWI court participants and the comparison group were involved in crashes. However, the numbers were too small for valid statistical analysis.

Figure 8 shows the percent of all DWI court participants and comparison group members in crashes over a 3-year period after program entry. Again, comparisons are challenging since there were 20 total crashes over the 3-year period (Year 1=five, Year 2=seven, and Year 3=eight). After controlling for age, race, gender, and prior arrests, DWI court participants and comparison group crash rates were not significantly different. Graduates had a rate similar to the overall DWI program group and were not included in the table. Given the perceived public safety danger of repeat DWI offenders, the low number of crashes in which these offenders were subsequently involved is a positive finding, even if there were no detectable differences between groups.

Figure 8. Percent of Individuals in Crashes over 3 Years

![Figure 8. Percent of Individuals in Crashes over 3 Years](image)

**Note:** Sample sizes by group and time period (1 Year, 2 Years, 3 Years): Graduates $n = 122, 106, 86$; All DWI Court Participants $n = 173, 140, 114$; Comparison Group $n = 270, 230, 191$. 

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28 Sample sizes by group and time period (1 Year, 2 Years, 3 Years): Graduates $n = 122, 106, 86$; All DWI Court Participants $n = 173, 140, 114$; Comparison Group $n = 270, 230, 191$. 

---
RESEARCH QUESTION #2: WHAT IS THE IMPACT OF DWI COURT ON OTHER OUTCOMES OF INTEREST?

2a. Does participation in DWI court lead to an increased rate of license reinstatement (the percent of people whose license is reinstated) compared with traditional court?

NO. DWI court participants were not more likely than the comparison group to have their licenses reinstated over the 3-year period.

Figure 9 illustrates that persons in the DWI court group did not differ in license reinstatement rates from the comparison group. DWI court graduates were left out of the graph because they had the same rates of license reinstatements as the overall DWI court group. Results control for age, race, gender, and prior arrests.

Well over half of repeat DWI offenders received a license reinstatement in the year following program entry, and more than four in five had received a license reinstatement after 3 years. These results should be interpreted with caution, as there are two notable data limitations. First, while we know there were two DWI court participants who had a valid driver’s license at the time of program entry, we did not have this information available for the comparison group, and therefore did not exclude those with valid licenses from the analysis. Second, a license reinstatement appears to be a temporary outcome for some individuals. For example, at the 2-year mark, for those who had a license reinstatement, DWI court participants had an average of 1.94 license reinstatements, and comparison group members had an average of 1.85 license reinstatements. In addition, the data indicate that licenses are reinstated on a temporary basis and renewed periodically for some DWI offenders.

Figure 9. Percent of Licenses Reinstated over 3 Years

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29 Sample sizes by group and time period (1 Year, 2 Years, 3 Years): Graduates n = 122, 106, 86; All DWI Court Participants n = 173, 140, 114; Comparison Group n = 270, 230, 191.
2b. Does participation in DWI court lead to increased use of an interlock device (the percent of people who were required to use interlock) compared with traditional court?

NO. DWI court participants and the comparison group had the same use of interlock proportionally.

Figure 10 shows that persons in the DWI court group, DWI court graduates, and the comparison group used the ignition interlock device at the same rate (14%) in the first year following program entry.\textsuperscript{30} Due to the small numbers, and the availability of interlock data only after 2011, we recommend that further analyses be conducted when more ignition interlock data are available.

Figure 10. Percent of Individuals Ever on Ignition Interlock in the Year Following Program Entry\textsuperscript{31}

\textsuperscript{30} Ignition interlock data were only available starting in 2011, resulting in incomplete data for more than two-thirds of the sample. The sample sizes for comparison and program groups in the second year after program entry were too small for analysis.

\textsuperscript{31} Sample sizes by group: Graduates $n = 14$; All DWI Court Participants $n = 50$; Comparison Group $n = 73$.  


**RESEARCH QUESTION #3: HOW SUCCESSFUL IS THE PROGRAM IN BRINGING PROGRAM PARTICIPANTS TO COMPLETION AND GRADUATION WITHIN THE EXPECTED TIME FRAME?**

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

**YES.** The average graduation rate for RDWI is 79%, which is higher than the national average of 57%.

Whether a program is bringing its participants to successful completion and doing so in the intended time frame is measured by program graduation (completion) rate, and by the amount of time participants spend in the program. Program graduation rate is the percentage of participants who graduated from the program, out of a cohort of participants who started during a similar time frame and who have left the program either by graduating or by being unsuccessfully discharged. Active participants ($n = 34$) are excluded from the calculation. Graduation rate was calculated for each entry year from 2006 to 2012. The program’s graduation rate for all participants entering between January 2005 and August 2012 is 71% (not shown).

Table 5 shows status outcomes by entry cohort year. The graduation rate for each cohort is substantially higher than the national average graduation rate of 57% (Huddleston & Marlowe, 2011).

**Table 5. RDWI Completion Status by Entry Year**

<table>
<thead>
<tr>
<th></th>
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<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Graduates</td>
<td>72%</td>
<td>70%</td>
<td>72%</td>
<td>80%</td>
<td>84%</td>
<td>70%</td>
<td>46%</td>
</tr>
<tr>
<td>Non-Graduates</td>
<td>28%</td>
<td>30%</td>
<td>28%</td>
<td>17%</td>
<td>16%</td>
<td>8%</td>
<td>4%</td>
</tr>
<tr>
<td>Actives</td>
<td>0%</td>
<td>0%</td>
<td>0%</td>
<td>3%</td>
<td>0%</td>
<td>22%</td>
<td>50%</td>
</tr>
</tbody>
</table>

The RDWI is doing very well in graduating participants compared to the national average. The program should continue those practices that are contributing to participant success. In order to graduate, participants must comply with the program practices and requirements. To successfully increase or maintain high graduation rates, DWI court teams must consider the challenges participants face in meeting program requirements, continually review program operations, and adjust as necessary—as the RDWI is doing. This can include practices such as finding transportation for participants who have none (e.g., having participants with cars get rewards for picking up those without transportation and bringing them to treatment and court sessions, or providing bus passes) or assisting participants with child care while they participate in program requirements.

The analysis for Research Question #4 examines more closely the difference between graduates and non-graduates to determine if there are any clear trends for non-graduates that will point to a need for different types of services.

To measure whether the program was following its expected time frame for participant completion, the average amount of time in the program was calculated for participants who had enrolled in the RDWI and have graduated from the program. The minimal requirements of the RDWI would theoretically allow for graduation at approximately 13 months from the time of entry to graduation. The average length of stay in DWI court for all participants, both graduates and non-graduates) was 549 days (about 18 months). Graduates spent an average of 566 days in the pro-
gram, nearly 19 months, ranging from 13 months to 2.7 years in the program. Approximately 25% graduated within 15 months, and 50% graduated within about 17 months of program entry. Participants who did not graduate spent, on average, about 16 months in the program. This indicates that the program is following the trend of most drug and DWI court participants in that participants typically take longer to complete program requirements than the minimum time frame. This is to be expected in a population struggling with substance abuse and addiction.

**Research Question #4: What participant and program characteristics predict successful DWI court outcomes?**

**Yes.** Graduates of the DWI court program were less likely to have used marijuana in addition to alcohol in the year prior to program entry, more likely to have completed the treatment requirements of the program, had fewer arrests in the 2 years prior to program entry, particularly gross misdemeanor arrests, and had fewer DWIs on average in the 10 years prior to program entry. When analyzed together, no characteristic predicted graduation above and beyond all other factors, but this is likely due to the small sample size of the non-graduate group. Graduates and non-graduates were compared on demographic characteristics and criminal history to determine whether there were any patterns in predicting program graduation. The following analyses included participants who entered the program from January 2005 through June 2012. Of the 153 people who entered the program during that time period, 31 (20%) were unsuccessfully discharged from the program and 122 (80%) graduated.

Analyses were performed to determine if there were any demographic or criminal history characteristics of participants that were related to successful DWI court completion, including gender, race/ethnicity, age, criminal history, education, employment, length of time in the program, mental health status, and substance use history. Tables 6-9 show the results for graduates and unsuccessfully discharged participants from chi-square and t test analyses. Characteristics that differ significantly between graduates and unsuccessfully discharged participants are formatted in bold text in the tables below ($p < .05$). Additional analyses were performed to determine if any characteristics were significant in a logistic regression, and none was found.
As presented in Table 6, below, male and female participants had similar rates of graduation, and graduates did not differ significantly in race or age from unsuccessfully discharged participants.

Table 6. DWI Court Graduate and Non-Graduate Characteristics:
Demographics

<table>
<thead>
<tr>
<th></th>
<th>Graduates ( n = 122 )</th>
<th>Non-Graduates ( n = 31 )</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>76%</td>
<td>74%</td>
</tr>
<tr>
<td>Female</td>
<td>24%</td>
<td>22%</td>
</tr>
<tr>
<td>Race/Ethnicity(^a)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>White</td>
<td>75%</td>
<td>65%</td>
</tr>
<tr>
<td>Black/African American</td>
<td>15%</td>
<td>29%</td>
</tr>
<tr>
<td>Hispanic/Latino</td>
<td>7%</td>
<td>7%</td>
</tr>
<tr>
<td>Age at Entry Date</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Average age</td>
<td>40 years</td>
<td>38 years</td>
</tr>
<tr>
<td>Range</td>
<td>21 - 66</td>
<td>22 - 69</td>
</tr>
</tbody>
</table>

Note. The \( n \) for each category may be smaller than the total group \( n \) due to missing data.

\(^a\) Percents will not add to 100% because race/ethnicity categories are not mutually exclusive (i.e., some people have more than one designation).
Table 7 displays the criminal history of graduates and unsuccessfully discharged participants prior to entering the program. Graduates were significantly more likely to have lower number of prior arrests, particularly gross misdemeanor arrests, and DWI arrests in the last 10 years.

**Table 7. DWI Court Graduate and Non-Graduate Characteristics: Criminal History**

<table>
<thead>
<tr>
<th>Prior Arrests</th>
<th>Graduates $n = 122$</th>
<th>Non-Graduates $n = 31$</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percent with a gross misdemeanor DWI as index arrest and 2 or more DWI arrests in the 10 years prior to index arrest</td>
<td>75%</td>
<td>87%</td>
</tr>
<tr>
<td><strong>Average number of DWI arrests 10 years prior to index arrest</strong></td>
<td>1.52</td>
<td>2.00</td>
</tr>
<tr>
<td><strong>Average number of arrests 2 years prior to program entry</strong></td>
<td>1.70</td>
<td>2.45</td>
</tr>
<tr>
<td>Average number of DWI arrests 2 years prior to program entry</td>
<td>1.24</td>
<td>1.45</td>
</tr>
<tr>
<td>Average number of person arrests 2 years prior to program entry</td>
<td>0.08</td>
<td>0.26</td>
</tr>
<tr>
<td>Average number of property arrests 2 years prior to program entry</td>
<td>0.05</td>
<td>0.03</td>
</tr>
<tr>
<td>Average number of drug arrests 2 years prior to program entry</td>
<td>0.02</td>
<td>0.03</td>
</tr>
<tr>
<td>Average number of other arrests 2 years prior to program entry</td>
<td>0.81</td>
<td>1.39</td>
</tr>
<tr>
<td>Average number of misdemeanor arrests 2 years prior to program entry</td>
<td>0.76</td>
<td>1.32</td>
</tr>
<tr>
<td><strong>Average number of gross misdemeanor arrests 2 years prior to program entry</strong></td>
<td>1.26</td>
<td>1.55</td>
</tr>
<tr>
<td>Average number of felony arrests 2 years prior to program entry</td>
<td>0.01</td>
<td>0.06</td>
</tr>
</tbody>
</table>

*Note.* The $n$ for each category may be smaller than the total group $n$ due to missing data.
Table 8 illustrates that DWI court graduates had no statistically different characteristics in terms of education, employment, time to program entry, number of hearings, or average number of days in program.

### Table 8. DWI Court Graduate and Non-Graduate Characteristics: Other

<table>
<thead>
<tr>
<th></th>
<th>Graduates n = 122</th>
<th>Non-Graduates n = 31</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Education</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Less than high school</td>
<td>8%</td>
<td>10%</td>
</tr>
<tr>
<td>High school/GED</td>
<td>36%</td>
<td>51%</td>
</tr>
<tr>
<td>Some college or technical school</td>
<td>39%</td>
<td>29%</td>
</tr>
<tr>
<td>College graduate</td>
<td>17%</td>
<td>10%</td>
</tr>
<tr>
<td><strong>Employment at Program Entry</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unemployed</td>
<td>36%</td>
<td>48%</td>
</tr>
<tr>
<td>Employed full or part time</td>
<td>64%</td>
<td>52%</td>
</tr>
<tr>
<td><strong>Arrest to Program Entry</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Average number of days from index arrest to DWI court program entry</td>
<td>114 days</td>
<td>78 days</td>
</tr>
<tr>
<td><strong>DWI Court Hearings</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Average number of DWI court hearings</td>
<td>33.3</td>
<td>28.3</td>
</tr>
<tr>
<td><strong>Program Length of Stay</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Average number of days in program</td>
<td>566 days</td>
<td>481 days</td>
</tr>
</tbody>
</table>

*Note.* The n for each category may be smaller than the total group n due to missing data.
As depicted in Table 9, DWI court graduates were less likely to have a mental health diagnosis (assessed at program entry), and more likely to have used substances in addition to alcohol in the year prior to program entry; however, only the difference in marijuana use was significantly different. Graduates were equally likely to be assessed as being substance-dependent (addicted) at program entry as unsuccessfully discharged participants. An additional factor on which graduates were significantly different from the comparison group was in completing treatment (which makes sense since this is a requirement for graduation).

Table 9. DWI Court Graduate and Non-Graduate Characteristics: Risk and Needs Assessments and Treatment

<table>
<thead>
<tr>
<th></th>
<th>Graduates n = 122</th>
<th>Non-Graduates n = 31</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Mental Health Diagnosis</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>25%</td>
<td>40%</td>
</tr>
<tr>
<td>No</td>
<td>75%</td>
<td>60%</td>
</tr>
<tr>
<td><strong>Substances Used in Last Year</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alcohol</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td><strong>Marijuana</strong></td>
<td>25%</td>
<td>48%</td>
</tr>
<tr>
<td>Crack or Cocaine</td>
<td>12%</td>
<td>26%</td>
</tr>
<tr>
<td>Methamphetamine</td>
<td>4%</td>
<td>13%</td>
</tr>
<tr>
<td>Prescription Drugs (Pills)</td>
<td>3%</td>
<td>10%</td>
</tr>
<tr>
<td>Heroin</td>
<td>2%</td>
<td>3%</td>
</tr>
<tr>
<td><strong>Reported Addiction Severity at Program Entry</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>No identifiable problem</td>
<td>1%</td>
<td>0%</td>
</tr>
<tr>
<td>At risk</td>
<td>1%</td>
<td>0%</td>
</tr>
<tr>
<td>Abusing</td>
<td>19%</td>
<td>19%</td>
</tr>
<tr>
<td>Dependent/Substance Abuse Disorder</td>
<td>79%</td>
<td>81%</td>
</tr>
<tr>
<td><strong>Risk Assessment Level</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low Risk</td>
<td>18%</td>
<td>5%</td>
</tr>
<tr>
<td>Medium/Moderate Risk</td>
<td>30%</td>
<td>15%</td>
</tr>
<tr>
<td>High Risk</td>
<td>52%</td>
<td>80%</td>
</tr>
<tr>
<td><strong>Completed Treatment Requirements</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>100%</td>
<td>40%</td>
</tr>
<tr>
<td>No</td>
<td>0%</td>
<td>60%</td>
</tr>
</tbody>
</table>

*Note.* The n for each category may be smaller than the total group n due to missing data.

* Numbers based on data from Chemical Health Assessment performed at DWI court entry. Numbers do not add up to 100% as participants could report more than one type of substance.
After reviewing the characteristics listed in Tables 6-9, all background and criminal history characteristics were entered into a logistic regression (with the exception of program length of stay and number of DWI court hearings attended) to determine which characteristics were most strongly tied to graduation, above all other factors. There were no characteristics predicting graduation once all variable were controlled, but this is likely due to the small sample size in the non-graduate group (n = 31).

**Characteristics Related to Recidivism**

Another indicator of program success is whether or not participants are being rearrested. All program participants were reviewed to determine whether any factors or characteristics were related to being rearrested within 2 years after program entry. We found that successful graduates of the program and participants who completed all treatment requirements were less likely to be rearrested 2 years after program entry ($p < .05$ and $p < .01$, respectively). When controlling for all other factors, there were no significant differences for any characteristic between participants rearrested and those not rearrested within 2 years after program entry (again, likely due to the small size of the re-arrested group).

**Summary of Outcome Results**

The results of the outcome analysis for the RDWI are promising. Compared to DWI offenders who experienced traditional court processes, the RDWI participants (regardless of whether they graduated from the program) had:

- 59% fewer rearrests in Year 1
- 36% fewer rearrests in Year 2
- 21% fewer rearrests in Year 3
- 50% fewer property arrests
- Half as many person (violent) arrests

DWI rearrest rates for DWI court participants were similar to the comparison group, although the total number of rearrests was too small for valid analyses.

Due to lack of data availability and low incidence (for outcomes such as crashes, license reinstatements, and interlock use), limited conclusions can be made for these other outcomes of interest. With a total of 20 crashes over a 3-year period for the participant and comparison group combined (11 in the program group and nine in the comparison), the analyses showed no impact on the number of subsequent crashes or the percent of individuals involved in crashes.

Graduation rates for the program were particularly high (71%), substantially higher than the national average of 57%. This indicates that the team is doing well in providing the needed supports for participants to meet program requirements.

An analysis of the characteristics of those who successfully graduated from the program compared to those who did not showed that participants who did not comply with the treatment requirements of the program, and those who used marijuana in addition to alcohol in the year prior to program entry, were less likely to graduate. In addition, those participants who graduated from the program and completed all treatment requirements were less likely to be rearrested in the 2 years following program entry.

There are several possibilities to consider for lack of significantly improved outcomes for RDWI participants at the 3-year time point. Our more detailed exploration of the DWI court group
showed that there were very few felony DWI participants, and very few participants with more than one arrest in the 2 years prior to program entry, which may indicate that many participants are lower risk. Risk assessment scores from the program data indicated that just under half of the participants did not score as high risk (44%). The research-based best practice standards (NADCP, 2013) state that the drug court model is best suited to high-risk/high-need participants, and lower risk participants may not do well with high-intensity structure and supervision.

In addition, the judge is a central player in the DWI court model, and the relationship between the judge and participants is key to participant success. As part of the process evaluation we learned that the RDWI court judge rotates approximately every 2 years, and there are two judges that switch off every 2 weeks. Research has shown that judge consistency and longevity is associated with improved participant outcomes (e.g., Finigan et al., 2007). Further, programs where judges speak with each participant at least 3 minutes during court hearings have significantly better outcomes. The RDWI should explore ways of increasing judge communication and consistency.

Finally, at the time of the process evaluation, the RDWI was having some struggles with the drug testing agency mixing samples and allowing dilute tests, which they were working on improving at the time. The participants in the evaluation sample would have been participating at a time when drug testing was inconsistent or of poor quality, which could have a significant impact on results.
SECTION III: COST EVALUATION

Cost Evaluation Design and Methods

NPC conducted full cost-benefit analyses for seven of the DWI court programs that participated in this study to assess the extent to which the costs of implementing the program are offset by cost-savings due to positive outcomes. The RDWI was one of the programs that received the cost-benefit analysis.

The main purposes of a cost analysis for this study were to determine the cost of the program and to determine if the costs due to criminal justice and other outcomes were lower due to DWI court participation. This is called a “cost-benefit” analysis. The term “cost-effectiveness” is often confused with the term “cost-benefit.” A cost-effectiveness analysis calculates the cost of a program and then examines whether the program led to its intended positive outcomes without actually putting a cost to those outcomes. For example, a cost-effectiveness analysis of DWI courts would determine the cost of the DWI court program and then look at whether the number of new DWI arrests were reduced by the amount the program intended (e.g., a 50% reduction in rearrests compared to those who did not participate in the program). A cost-benefit evaluation calculates the cost of the program and also the cost of the outcomes, resulting in a cost-benefit ratio. For example, the cost of the program is compared to the cost-savings due to the reduction in rearrests. In some drug court programs, for every dollar spent on the program, over $10 is saved due to positive outcomes.32

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

1. How much does each DWI court program cost? What is the average investment per agency in a DWI court participant case?
2. What are the 1- and 2-year cost impacts on the criminal justice system of sending offenders through DWI court compared to traditional court processing? What is the average cost of criminal justice recidivism per agency for DWI court participants compared to DWI offenders in the traditional court system?
3. What is the cost-benefit ratio for investment in the DWI court?
4. What is the cost of the “lag” time between arrest and DWI court entry?

COST EVALUATION DESIGN

Transaction and Institutional Cost Analysis

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

32 See Drug Court cost-benefit studies at http://www.npcresearch.com
approach to conducting costs assessment in an environment such as a DWI court, which involves complex interactions among multiple taxpayer-funded organizations.

**Cost to the Taxpayer**

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

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

**Opportunity Resources**

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

**COST EVALUATION METHODS**

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

The TICA methodology is based upon six distinct steps. Table 10 lists each of these steps and the tasks involved.

Table 10. The Six Steps of TICA

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

Step 1 (determining program process) was performed during site visits, through analysis of DWI court documents, and through interviews with key informants. Step 2 (identifying program transactions) and Step 3 (identifying the agencies involved with transactions) were performed through observation during site visits and by analyzing the information gathered in Step 1. Step 4 (determining the resources used) was performed through extensive interviewing of key informants, direct observation during site visits, and by collecting administrative data from the agencies involved in the DWI courts. Step 5 (determining the cost of the resources) was performed through interviews with DWI court and non-DWI court staff and with agency financial officers, as well as analysis of budgets found online or provided by agencies. Finally, Step 6 (calculating cost results) involved calculating the cost of each transaction and multiplying this cost by the number of trans-
actions. For example, to calculate the cost of drug testing, the unit cost per drug test is multiplied by the average number of drug tests performed per person. All the transactional costs for each individual were added to determine the overall cost per DWI court participant/comparison group individual. This was reported as an average cost per person for the DWI court program, and outcome/impact costs due to rearrests, jail time and other recidivism costs, as well as any other service usage. In addition, due to the nature of the TICA approach, it was also possible to calculate the cost of DWI court processing per agency, so that it was possible to determine which agencies contributed the most resources to the program and which agencies gained the most benefit.

**COST DATA COLLECTION**

Cost data collected for the Minnesota DWI court evaluation were divided into program costs and outcome costs. The **program costs** were those associated with activities performed within the program. The program-related “transactions” included in this analysis were DWI court hearings (including staffing meetings and other activities preparing for the hearings), case management, alcohol/drug tests, drug and alcohol treatment (such as outpatient group and individual sessions, and residential treatment), jail sanctions, and any other unique services provided by the program to participants for which administrative data were available. The **outcome costs** were those associated with activities that occurred outside the DWI court program. These transactions included criminal justice-related activities (e.g., new arrests subsequent to program entry, subsequent court cases, jail days, prison days, probation days, and parole days) as well as events that occurred outside the criminal justice system such as crashes and victimizations.

**Program Costs**

Obtaining the cost of DWI court transactions for status review hearings (i.e., DWI court sessions) and case management involved asking each DWI court team member for the average amount of time they spend on these two activities (including preparing for staffing meetings and the staffing meetings themselves), observing their activities on site visits and obtaining each DWI court team member’s annual salary and benefits from a supervisor or financial officer at each agency involved in the program. As this is typically public information, some of the salaries were found online, but detailed benefits information usually comes from the agency’s financial officer or human resources department. In addition to salary and benefits, the indirect support rate and jurisdictional overhead rate were used in a calculation that results in a fully loaded cost per DWI court session per participant and a cost per day of case management per participant. The indirect support rate for each agency involved in the program (District Court, county/city attorney, public defender, probation, treatment agencies, law enforcement, etc.) was obtained from county budgets either found online or by contacting the county auditor office. The jurisdictional overhead rate was obtained from the county’s cost allocation plan (if jurisdictional overhead costs were not already included in the agency budgets).

Alcohol and drug testing costs were obtained directly from DWI court coordinators or probation, or treatment providers, depending on which agency or agencies are conducting the tests at each site. If the cost per test had not yet been determined, NPC used TICA or the agency’s alcohol/drug testing budget and number of tests to calculate the average cost per test. The specific details for how the cost data were collected and the costs calculated for RDWI are described in the results.

Treatment costs for the various modalities used at each site were obtained from Minnesota’s Medicaid Drug and Alcohol Treatment Reimbursement Rates and the percentage of DWI court
participants using public funds for treatment, which varies by site. NPC used the amount of treatment (e.g., number of sessions) and the reimbursement rate to calculate the cost per session. Jail sanction costs per day were obtained from the MN Department of Corrections Performance Report for the most recently available fiscal year, which includes jail per diem for jails and detention facilities in all 87 counties. Costs were updated to fiscal year 2014 at the time of the cost calculations using the Consumer Price Index.

**Outcome/Impact Costs**

For arrest costs, information about which law enforcement agencies typically conduct arrests in each site were obtained by talking with program staff (attorneys, law enforcement, and judicial staff) along with Web searches. The major law enforcement agencies were included, as well as a sampling of smaller law enforcement agencies as appropriate. NPC contacted staff at each law enforcement agency to obtain the typical positions involved in an arrest, average time involvement per position per arrest, as well as salary and benefits and support/overhead rates. NPC used that information in its TICA methodology to calculate the cost of an average arrest episode. Some cost information was obtained online from agency budgets or pay scales. The arrest cost at each law enforcement agency was averaged to calculate the final “cost per arrest” in the outcome analysis.

The cost per court case was calculated from budget information and caseload data from three agencies—the District Court, the county and/or city attorney, and the public defender. This information is generally found online at each agency’s Web site, but occasionally it has to be obtained by contacting agency staff.

The cost per day of prison, and the cost per day of parole and Department of Corrections’ probation were found on the Minnesota Department of Corrections’ Web site and updated to fiscal year 2014 at the time of the cost calculations using the Consumer Price Index:


Similar to the program jail sanction costs, jail costs per day were obtained from the Minnesota Department of Corrections Performance Report for the most recently available fiscal year, which includes jail per diem for jails and detention facilities in all 87 counties. Costs were updated to fiscal year 2014 at the time of the cost calculations using the Consumer Price Index.

NPC contacted staff at each relevant jail facility to obtain the cost per jail booking, which includes the typical positions involved in a booking, average time involvement per position per booking, as well as salary and benefits and support/overhead rates. NPC used that information in its TICA methodology to calculate the cost of a jail booking episode. Some cost information was obtained online from agency budgets or pay scales.

The cost per day of county probation was obtained from probation department staff. If the cost per day of probation had not yet been determined, NPC used the agency’s adult supervision budget and caseload to calculate the average cost per day.
The cost of crashes, by severity of injury, was found on the National Safety Council’s Web site and updated to fiscal year 2014 at the time of the cost calculations using the Consumer Price Index:


Person and property victimizations were calculated from the National Institute of Justice’s *Victim Costs and Consequences: A New Look* (Miller, Cohen, & Wiersema, 1996). The costs were updated to fiscal year 2014 dollars using the Consumer Price Index.

These numbers were checked through interviews with agency financial staff and budget reviews to confirm whether they were calculated in a compatible methodology with TICA.

**Cost Evaluation Results**

**COST EVALUATION RESEARCH QUESTION #1: PROGRAM COSTS**

*How much does the RDWI program cost?*

As described in the cost methodology, the Transactional and Institutional Cost Analysis (TICA) approach was used to calculate the costs of each of the transactions that occurred while participants were engaged in the program. Transactions are those points within a system where resources are consumed and/or change hands. Program transactions for which costs were calculated in this analysis included DWI court sessions, case management, drug and alcohol treatment, drug and alcohol tests, and jail sanctions. The costs for this study were calculated to include taxpayer costs only. All cost results provided in this report are based on fiscal year 2014 dollars or were updated to fiscal year 2014 using the Consumer Price Index.

*Program Transactions*

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

- 2nd Judicial District Court (judges, coordinator, research analyst, and surveillance tech);
- St. Paul City Attorney’s Office (prosecutor);
- Contracted Defense Attorney (defense attorney);
- Ramsey County Community Corrections (probation officer);
- Project Remand (conditional release agent);
- Hazelden (treatment representative); and
- Community Volunteer (recovery support advisor).

The cost of a *DWI Court Appearance* (the time during a session when a single program participant interacts with the judge) is calculated based on the average amount of court time (in minutes) each participant interacts with the judge during the DWI court session. This includes the direct costs for the time spent for each DWI court team member present, the time team members spend preparing for the session, the time spent in staffing, the agency support costs, and jurisdictional overhead costs. The cost for a single DWI court appearance is $109.90 per participant.
Case Management is based on the amount of staff time dedicated to case management activities during a regular work week and is then translated into a total cost for case management per participant per day (taking staff salaries and benefits, and support and overhead costs into account). The agencies involved in case management are the District Court, Community Corrections, Project Remand, and Hazelden. The daily cost of case management is $2.85 per participant.

Drug and Alcohol Treatment costs for RDWI participants were based on Minnesota’s Medicaid Drug and Alcohol Treatment Reimbursement Rates. Using these rates, a 1-hour individual treatment session is $70.00; a group treatment session is $34.00; medium-intensity residential treatment is $129.00 per day plus $54.09 for room and board; and hospital inpatient is $300 per day. The drug and alcohol treatment costs used in this analysis only include the costs to taxpayers. Treatment paid for by the individual or by private insurance was not included in the cost calculations. For this reason, NPC asked RDWI team members to estimate the percentage of participants using public funds for treatment. Because an estimated 60% of RDWI participants use public funds for their treatment, the final treatment costs used in this report were 60% of the rates mentioned above. In addition, while many participants may be receiving mental health treatment, it was not included in the cost analysis because NPC was not able to acquire administrative data on mental health treatment usage. For this reason, the Medicaid Drug and Alcohol Treatment Reimbursement Rates are the addiction-only basic rates and do not include any additional payments for co-occurring treatment complexities.

Drug and Alcohol Testing is mainly performed by Community Corrections and the Surveillance Tech, with law enforcement and Hazelden also doing some testing. The cost per UA test is $8.10, and breathalyzer tests are $0.70. Drug and alcohol testing costs were obtained from the DWI court coordinator.

Jail Sanctions and Jail Bookings are provided by the Sheriff’s Office. The cost of jail was acquired from the Minnesota Department of Corrections Performance Report, which includes jail per diem for jails and detention facilities in all 87 counties. Costs were updated to fiscal year 2014 using the Consumer Price Index. The cost of jail at the Adult Detention Center is $157.43 per day. Ramsey County also has the Adult Correctional Facility, which is operated by Ramsey County Community Corrections. The cost at this facility is $127.88 per day. Jail booking costs include all staff, facilities, and support and overhead costs. The cost of a jail booking is $69.05. Unfortunately, the jail data did not allow NPC to determine which jail days were due to DWI court sanctions, so jail sanction and jail bookings were not included in the program costs. However, any jail sanctions received will show up in the outcome cost section under jail days, so all jail sanction costs are accounted for.

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

34 http://www.dhs.state.mn.us/main/idcplg?IdcService=GET_FILE&RevisionSelectionMethod=LatestReleased&Rendition=Primary&allowInterrupt=1&noSaveAs=1&DocName=dhs16_160263

35 There are three reimbursement rates for residential—low, medium, and high intensity. Because the treatment usage data did not differentiate the level, NPC used the medium intensity reimbursement rate for all residential treatment days, plus the room and board reimbursement.

RDWI participants pay a *DWI Court Fee* to the DWI court which helps to offset program supplies, incentives, workbooks, medallions, graduation supplies, and the annual picnic. The fee is $500. Participants also pay a $50 fine plus court costs (for a total of $136) which goes to the District Court, and a $300 probation fee, which goes directly to the Community Corrections budget to help with drug testing costs, facilitating cognitive groups, and paying for probation officer salaries). However, due to a lack of data on the exact amount of fees paid by each participant, fees were not taken into account in this cost analysis.

**Program Costs**

Table 11 displays the unit cost per program-related event, the number of events and the average cost *per individual* for each of the DWI court events for program graduates and for all participants. The sum of these transactions is the total per participant cost of the DWI court program. The table includes the average for DWI court graduates (*n* = 122) and for all DWI court participants (*n* = 153), regardless of completion status. It is important to include participants who were discharged as well as those who graduated as all participants use program resources, whether they graduate or not.

<table>
<thead>
<tr>
<th>Transaction</th>
<th>Unit Cost</th>
<th>Avg. # of Events for DWI Court Graduates Per Person</th>
<th>Avg. Cost per DWI Court Graduate Per Person</th>
<th>Avg. # of Events for all DWI Court Participants Per Person</th>
<th>Avg. Cost per DWI Court Participant Per Person</th>
</tr>
</thead>
<tbody>
<tr>
<td>DWI Court Sessions</td>
<td>$109.90</td>
<td>33.30</td>
<td>$3,660</td>
<td>32.29</td>
<td>$3,549</td>
</tr>
<tr>
<td>Case Management Days</td>
<td>$2.85</td>
<td>566.16</td>
<td>$1,614</td>
<td>548.79</td>
<td>$1,564</td>
</tr>
<tr>
<td>Individual Treatment Sessions</td>
<td>$42.00</td>
<td>4.00</td>
<td>$168</td>
<td>4.47</td>
<td>$188</td>
</tr>
<tr>
<td>Group Treatment Sessions</td>
<td>$20.40</td>
<td>30.72</td>
<td>$627</td>
<td>33.63</td>
<td>$686</td>
</tr>
<tr>
<td>Residential Treatment Days</td>
<td>$109.85</td>
<td>2.43</td>
<td>$267</td>
<td>8.72</td>
<td>$958</td>
</tr>
<tr>
<td>Hospital Inpatient Days</td>
<td>$180.00</td>
<td>0.00</td>
<td>$0</td>
<td>0.00</td>
<td>$0</td>
</tr>
<tr>
<td>UA Drug Tests</td>
<td>$8.10</td>
<td>45.33</td>
<td>$367</td>
<td>40.73</td>
<td>$330</td>
</tr>
<tr>
<td>Breathalyzer Tests&lt;sup&gt;37&lt;/sup&gt;</td>
<td>$0.70</td>
<td>121.40</td>
<td>$85</td>
<td>117.96</td>
<td>$83</td>
</tr>
<tr>
<td>TOTAL</td>
<td></td>
<td></td>
<td>$6,788</td>
<td>$7,358</td>
<td></td>
</tr>
</tbody>
</table>

<sup>37</sup> The mean number of breathalyzer tests is a proxy based on program policy for the average number of tests per week for each phase. A proxy was used as accurate data on actual breathalyzer tests were not available.
The unit cost multiplied by the number of events per person results in the cost per person for each transaction during the course of the program. When the costs of the transactions are summed the result is a total RDWI program cost per participant of $7,358. The cost per graduate is $6,788. The largest contributor to the cost of the program is DWI court sessions ($3,549), followed by treatment ($1,832) and case management ($1,564). Note that the graduates cost slightly less than the participants in general, even though graduates spend a longer time in the program. This is due to higher treatment costs for those who were terminated from the program, especially in terms of residential treatment. Another note of interest is that because an estimated 40% of participants pay for their own drug and alcohol treatment via private insurance or private pay, the program saves an average of $1,221 in program costs per participant.

**Program Costs per Agency**

Another useful way to examine program costs is by agency. Table 12 displays the cost per DWI court participant by agency for program graduates and for all participants.

<table>
<thead>
<tr>
<th>Agency</th>
<th>Avg. Cost per DWI Court Graduate Per Person</th>
<th>Avg. Cost per DWI Court Participant Per Person</th>
</tr>
</thead>
<tbody>
<tr>
<td>District Court</td>
<td>$2,207</td>
<td>$2,140</td>
</tr>
<tr>
<td>City Attorney’s Office</td>
<td>$675</td>
<td>$654</td>
</tr>
<tr>
<td>Contracted Defense Attorney</td>
<td>$444</td>
<td>$431</td>
</tr>
<tr>
<td>Community Corrections</td>
<td>$2,027</td>
<td>$1,939</td>
</tr>
<tr>
<td>Project Remand</td>
<td>$373</td>
<td>$362</td>
</tr>
<tr>
<td>Treatment</td>
<td>$1,062</td>
<td>$1,832</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>$6,788</strong></td>
<td><strong>$7,358</strong></td>
</tr>
</tbody>
</table>

Table 12 shows that the costs accruing to the District Court (DWI court sessions and case management) account for 29% of the total program cost per participant. The next largest cost (26%) is for Community Corrections due to DWI court sessions, case management, and drug testing, followed by treatment (25%) for individual and group treatment sessions and residential treatment days.

**Program Costs Summary**

In sum, the largest portion of RDWI costs is due to DWI court sessions (an average of $3,549, or 48% of total costs), followed by treatment ($1,832, or 25% of total costs) and case management ($1,564, or 21% of total costs). When program costs are evaluated by agency, the largest portion of costs accrues to the District Court ($2,140, or 29% of total costs), followed by Community Corrections ($1,939, or 26%) and treatment ($1,832, or 25%).
COST EVALUATION RESEARCH QUESTION #2: OUTCOME/RECIDIVISM COSTS

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

Outcome Costs

The Transactional and Institutional Cost Analysis (TICA) approach was used to calculate the costs of each of the criminal justice system outcome transactions that occurred for DWI court and comparison group participants. As mentioned previously, transactions are those points within a system where resources are consumed and/or change hands. Outcome transactions for which costs were calculated in this analysis included rearrests, subsequent court cases, probation time, parole time, jail bookings, jail time, prison time, crashes, and victimizations. Only costs to the taxpayer were calculated in this study. All cost results represented in this report are based on fiscal year 2014 dollars or were updated to fiscal year 2014 dollars using the Consumer Price Index.

The outcome cost analyses were based on a cohort of DWI court participants and a matched comparison group of offenders who were eligible for the DWI court program through their criminal history but who did not attend the program. These individuals were tracked through administrative data for 2 years post program entry (and a similar time period for the comparison group). This study compares recidivism costs for the two groups over 2 years and the recidivism costs for participants by agency.

The 2-year follow-up period was selected to allow a large enough group of both DWI court and comparison individuals to be representative of the program, as well as to allow more robust cost numbers through use of as long a follow-up period as possible (with as many individuals as possible having at least some time during the follow-up period that represented time after program involvement).

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

The outcome costs discussed below do not represent the entire cost to the criminal justice system. Rather, the outcome costs include the transactions for which NPC’s research team was able to obtain outcome data and cost information on both the DWI court and comparison group from the same sources. However, we believe that the costs represent the majority of system costs. Outcome costs were calculated using information from the Minnesota Department of Corrections; Ramsey County Community Corrections; Ramsey County Sheriff’s Office; the 2nd Judicial District Court; the St. Paul City Attorney’s Office; the Ramsey County Attorney’s Office; the Minnesota Board of Public Defense; the Minnesota State Court Administrator’s Office; the National Safety Council; the National Institute of Justice; the Mounds View Police Department; the New Brighton Police Department; the Maplewood Police Department; and the White Bear Lake Police Department. The methods of calculation were carefully considered to ensure that all direct costs, support costs and overhead costs were included as specified in the TICA methodology followed by NPC.

38 Even though the St. Paul Police Department is one of the main arresting agencies in the county, the department did not provide cost or time information required to estimate the cost of an average arrest for the agency.
Finally, note that some possible costs or cost savings related to the program are not considered in this study. These include the number of alcohol-free babies born, health care expenses, and DWI court participants legally employed and paying taxes. The gathering of this kind of information is generally quite difficult due to HIPAA confidentiality laws and due to the fact that much of the data related to this information are not collected in any one place, or collected at all. Although NPC examined the possibility of obtaining these kinds of data, it was not feasible within the time frame or budget for this study. In addition, the cost results that follow do not take into account other less tangible outcomes for participants, such as improved relationships with their families and increased feelings of self-worth. Although these are important outcomes to the individual participants and their families, it is not possible to assign a cost to this kind of outcome. (It is priceless). Other studies performed by NPC have taken into account health care and employment costs. For example, Finigan (1998) performed a cost study in the Portland, Oregon, adult drug court which found that for every dollar spent on the drug court program, $10 was saved due to decreased criminal justice recidivism, lower health care costs and increased employment.

**Outcome Transactions**

The cost of an **Arrest** was gathered from representatives of the Mounds View Police Department, New Brighton Police Department, Maplewood Police Department, White Bear Lake Police Department, and the Ramsey County Sheriff’s Office.\(^{39}\) The cost per arrest incorporates the time of the law enforcement positions involved in making an arrest, law enforcement salaries and benefits, support costs and overhead costs. The average cost of a single arrest at the five law enforcement agencies is $172.84.

**Court Cases** include those cases that are dismissed as well as those cases that result in arraignment and are adjudicated. Because they are the main agencies involved, court case costs in this analysis are shared among the District Court, the county attorney, the city attorney, and the public defender. Using budget and caseload information obtained from agency budgets and from agency representatives, as well as information obtained from the Minnesota State Court Administrator’s Office, the cost of a Misdemeanor Court Case is $1,279.61. The cost of a Gross Misdemeanor Court Case is $1,408.11, and the cost of a Felony Court Case is $3,753.36.

**Prison** costs were provided by the Minnesota Department of Corrections. The statewide cost per person per day of prison (found on the Department of Corrections’ Web site)\(^ {40}\) was $84.59 in 2012. Using the Consumer Price Index, this was updated to fiscal year 2014 dollars, or $86.10.

**Jail Booking** costs were provided by the Ramsey County Sheriff’s Office. NPC contacted staff at the Sheriff’s Office to obtain the cost per jail booking, which includes the typical positions involved in a booking, average time involvement per position per booking, as well as salary and benefits and support/overhead rates. The cost of a jail booking is $69.05.

**Jail** costs were provided by the Ramsey County Sheriff’s Office. The cost of jail was acquired from the Minnesota Department of Corrections Performance Report,\(^ {41}\) which includes jail per diem for jails and detention facilities in all 87 counties. Costs were updated to fiscal year 2014

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\(^{39}\) Note that this does not include the St. Paul Police Department, which is one of the main arresting agencies in the county. After numerous phone calls and emails, the St. Paul Police Department was unable to provide NPC with the cost or time information necessary to estimate the cost of an average arrest for the agency. Nevertheless, this cost analysis includes five of the six main arresting agencies within Ramsey County.


using the Consumer Price Index. The cost of jail at the Adult Detention Center is $157.43 per day. Hennepin County also has the Adult Correctional Facility, which is operated by Ramsey County Community Corrections. The cost at this facility is $127.88 per day. Note that jail time in this analysis includes jail sanctions received while participants were in the program, as NPC was unable to determine from the jail data which days were sanctions and which were due to subsequent crimes/cases.

The cost per day of Parole was found on the Minnesota Department of Corrections’ Web site and updated to fiscal year 2014 using the Consumer Price Index. The cost of parole is $4.07 per day.

**Probation** in Ramsey County is provided by Ramsey County Community Corrections. The cost of probation was acquired from a representative of Community Corrections, using budget and caseload information. The cost per person per day of probation is $3.44.

**Crash** costs were found on the National Safety Council’s Web site and updated to fiscal year 2014 using the Consumer Price Index. The cost of a crash with incapacitating injury is $237,619; the cost of a crash with non-incapacitating injury is $60,645; the cost of a crash with possible injury is $28,928; and the cost of a crash with property damage only is $2,583. Note that the cost of a crash that includes a death was not included in this cost analysis. This is because there were a very small number of deaths in the participant and comparison group samples, and the high cost (over $4.5 million per death) would artificially inflate any cost results.

**Victimization** were calculated from the National Institute of Justice’s *Victim Costs and Consequences: A New Look* (Miller et al., 1996). The costs were updated to fiscal year 2014 dollars using the Consumer Price Index. *Property crimes* are $13,281 per event, and *person crimes* are $43,024 per event.

**Outcome Cost Results**

Table 13 shows the average number of recidivism-related events per offender for DWI court graduates, all DWI court participants (regardless of graduation status) and the comparison group over 2 years.

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44 The costs for victimizations were based on the National Institute of Justice’s *Victim Costs and Consequences: A New Look* (Miller et al., 1996). This study documents estimates of costs and consequences of personal crimes and documents losses per criminal victimization, including attempts, in a number of categories, including fatal crimes, child abuse, rape and sexual assault, other assaults, robbery, drunk driving, arson, larceny, burglary, and motor vehicle theft. The reported costs include lost productivity, medical care, mental health care, police and fire services, victim services, property loss and damage, and quality of life. In our study, arrest charges were categorized as violent or property crimes, and therefore costs from the victimization study were averaged for rape and sexual assault, other assaults, and robbery and attempted robbery to create an estimated cost for violent crimes, arson, larceny and attempted larceny, burglary and attempted burglary, and motor vehicle theft for an estimated property crime cost. All costs were updated to fiscal year 2014 dollars using the Consumer Price Index.
Table 13. Average Number of Recidivism Events after DWI Court Entry per Person over 2 Years from DWI Court Entry

<table>
<thead>
<tr>
<th>Recidivism Related Events</th>
<th>DWI Court Graduates Per Person (n = 106)</th>
<th>DWI Court Participants Per Person (n = 140)</th>
<th>Comparison Group Per Person (n = 232)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rearrests</td>
<td>0.19</td>
<td>0.29</td>
<td>0.47</td>
</tr>
<tr>
<td>Misdemeanor Court Cases</td>
<td>0.14</td>
<td>0.21</td>
<td>0.34</td>
</tr>
<tr>
<td>Gross Misdemeanor Court Cases</td>
<td>0.06</td>
<td>0.11</td>
<td>0.15</td>
</tr>
<tr>
<td>Felony Court Cases</td>
<td>0.02</td>
<td>0.02</td>
<td>0.07</td>
</tr>
<tr>
<td>Prison Days</td>
<td>0.00</td>
<td>0.00</td>
<td>1.56</td>
</tr>
<tr>
<td>Jail Bookings</td>
<td>1.27</td>
<td>2.28</td>
<td>1.74</td>
</tr>
<tr>
<td>Adult Detention Center Jail Days(^{45})</td>
<td>1.48</td>
<td>12.63</td>
<td>2.57</td>
</tr>
<tr>
<td>Adult Correctional Facility Jail Days(^{46})</td>
<td>13.35</td>
<td>35.95</td>
<td>40.29</td>
</tr>
<tr>
<td>Parole Days</td>
<td>0.00</td>
<td>0.00</td>
<td>0.92</td>
</tr>
<tr>
<td>Probation Days</td>
<td>565.31</td>
<td>490.24</td>
<td>395.14</td>
</tr>
<tr>
<td>Crashes with Incapacitating Injury</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>Crashes with Non-Incapacitating Injury</td>
<td>0.01</td>
<td>0.01</td>
<td>0.00</td>
</tr>
<tr>
<td>Crashes with Possible Injury</td>
<td>0.01</td>
<td>0.01</td>
<td>0.01</td>
</tr>
<tr>
<td>Crashes with Property Damage Only</td>
<td>0.03</td>
<td>0.02</td>
<td>0.02</td>
</tr>
<tr>
<td>Property Victimizations(^{47})</td>
<td>0.00</td>
<td>0.02</td>
<td>0.06</td>
</tr>
<tr>
<td>Person Victimizations</td>
<td>0.01</td>
<td>0.01</td>
<td>0.07</td>
</tr>
</tbody>
</table>

Overall, as demonstrated in Table 13, DWI court participants have fewer rearrests, new court cases, days in prison, days in the Adult Correctional Facility, and days on parole than the comparison group, but more jail bookings, days in the Adult Detention Center, and days on probation. DWI court participants have slightly more crashes but fewer property and person victimizations than the comparison group.

Table 14 presents the outcome costs for each transaction for graduates, all DWI court participants (graduates and terminated participants), and the comparison group.

\(^{45}\) This includes all jail sanctions while participants were in the program.

\(^{46}\) This includes all jail sanctions while participants were in the program.

\(^{47}\) Property victimizations are separate from crashes with property damage only. Property victimizations are costs that occur due to a crime (with no vehicle involvement), while the property damage from a crash includes property losses based on insurance claims data.
## Table 14. Recidivism (Outcome) Costs per Participant over 2 Years

<table>
<thead>
<tr>
<th>Transaction</th>
<th>Unit Costs</th>
<th>DWI Court Graduates Per Person (n = 106)</th>
<th>DWI Court Participants Per Person (n = 140)</th>
<th>Comparison Group Per Person (n = 232)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rearrests</td>
<td>$172.84</td>
<td>$33</td>
<td>$50</td>
<td>$81</td>
</tr>
<tr>
<td>Misdemeanor Court Cases</td>
<td>$1,279.61</td>
<td>$179</td>
<td>$269</td>
<td>$435</td>
</tr>
<tr>
<td>Gross Misdemeanor Court Cases</td>
<td>$1,408.11</td>
<td>$84</td>
<td>$155</td>
<td>$211</td>
</tr>
<tr>
<td>Felony Court Cases</td>
<td>$3,753.36</td>
<td>$75</td>
<td>$75</td>
<td>$263</td>
</tr>
<tr>
<td>Prison Days</td>
<td>$86.10</td>
<td>$0</td>
<td>$0</td>
<td>$134</td>
</tr>
<tr>
<td>Jail Bookings</td>
<td>$69.05</td>
<td>$88</td>
<td>$157</td>
<td>$120</td>
</tr>
<tr>
<td>Adult Detention Center Jail Days</td>
<td>$157.43</td>
<td>$233</td>
<td>$1,988</td>
<td>$405</td>
</tr>
<tr>
<td>Adult Correctional Facility Jail Days</td>
<td>$127.88</td>
<td>$1,707</td>
<td>$4,597</td>
<td>$5,152</td>
</tr>
<tr>
<td>Parole Days</td>
<td>$4.07</td>
<td>$0</td>
<td>$0</td>
<td>$4</td>
</tr>
<tr>
<td>Probation Days</td>
<td>$3.44</td>
<td>$1,945</td>
<td>$1,686</td>
<td>$1,359</td>
</tr>
<tr>
<td><strong>SUBTOTAL</strong></td>
<td></td>
<td><strong>$4,344</strong></td>
<td><strong>$8,977</strong></td>
<td><strong>$8,164</strong></td>
</tr>
<tr>
<td>Crashes with Incapacitating Injury</td>
<td>$237,619.00</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Crashes with Non-Incapacitating Injury</td>
<td>$60,645.00</td>
<td>$606</td>
<td>$606</td>
<td>$0</td>
</tr>
<tr>
<td>Crashes with Possible Injury</td>
<td>$28,928.00</td>
<td>$289</td>
<td>$289</td>
<td>$289</td>
</tr>
<tr>
<td>Crashes with Property Damage Only</td>
<td>$2,583.00</td>
<td>$77</td>
<td>$52</td>
<td>$52</td>
</tr>
<tr>
<td>Property Victimizations</td>
<td>$13,281.00</td>
<td>$0</td>
<td>$266</td>
<td>$797</td>
</tr>
<tr>
<td>Person Victimizations</td>
<td>$43,024.00</td>
<td>$430</td>
<td>$430</td>
<td>$3,012</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td></td>
<td><strong>$5,746</strong></td>
<td><strong>$10,620</strong></td>
<td><strong>$12,314</strong></td>
</tr>
</tbody>
</table>
Because crashes and victimizations were not calculated using the TICA methodology, the outcome cost results are presented first without, then with, crash and victimization costs. Table 14 shows that the difference in total outcome cost between the DWI court participants and the comparison group is a negative $813 per participant. When costs due to crashes and victimizations are included, the difference increases to a positive $1,694 per participant. This difference is the benefit, or savings, due to DWI court participation. Overall, these findings show that, although graduates of the program show substantial savings compared to the comparison group (a savings of $6,568), graduates cannot be fairly compared to the comparison group as some of the comparison group is made up of people who would have terminated. Overall, participation in DWI court, when all participants are included in the analysis, results in a small savings, due to person and property victimizations.

Not including crashes and victimizations, Table 14 shows that the majority of DWI court participant outcome costs are due to jail (an average of $6,585, or 73% of total costs) and probation (an average of $1,686, or 19% of total costs). Because there was no way to differentiate time in jail due to sanctions versus time in jail due to new charges, it is possible that the larger amount of jail time for participants is actually a reflection of jail sanctions that occurred during program participation. Regardless of the reason, DWI court participants, particularly those who were terminated, used a larger amount of jail resources compared to those who never received the program. In addition, DWI court participants used substantially more probation resources. It appears that participation in the program involves being on probation for a longer time period than the traditional court process. The majority of outcome costs for the comparison group were due to jail (an average of $5,557, or 68% of total costs) and probation (an average of $1,359, or 17% of total costs). The largest savings for the DWI court group (when compared to the comparison group) was in terms of court cases, due to fewer misdemeanor, gross misdemeanor, and felony cases for those who participated in the DWI court program.
Outcome Costs per Agency

These same outcome costs were also examined by agency to determine the relative benefit to each agency that contributes resources to the DWI court program. The transactions shown above are provided by one or more agencies. If one specific agency provides a service or transaction (for example, the Department of Corrections provides prison days), all costs for that transaction accrue to that specific agency. If several agencies all participate in providing a service or transaction (for example, the District Court, county attorney, and public defender are all involved in felony court cases), costs are split proportionately amongst the agencies involved based on their level of participation. Table 15 provides the cost for each agency and the difference in cost between the DWI court participants and the comparison group per person. A positive number in the difference column indicates a cost savings for DWI court participants.

Table 15. Recidivism (Outcome) Costs per Participant by Agency over 2 Years

<table>
<thead>
<tr>
<th>Agency</th>
<th>DWI Court Outcome Costs per Participant</th>
<th>Comparison Group Outcome Costs per Individual</th>
<th>Difference/Savings per Individual</th>
</tr>
</thead>
<tbody>
<tr>
<td>District Court</td>
<td>$186</td>
<td>$307</td>
<td>$121</td>
</tr>
<tr>
<td>City Attorney</td>
<td>$145</td>
<td>$222</td>
<td>$77</td>
</tr>
<tr>
<td>County Attorney</td>
<td>$49</td>
<td>$172</td>
<td>$123</td>
</tr>
<tr>
<td>Public Defender</td>
<td>$119</td>
<td>$208</td>
<td>$89</td>
</tr>
<tr>
<td>Department of Corrections</td>
<td>$0</td>
<td>$138</td>
<td>$138</td>
</tr>
<tr>
<td>Community Corrections</td>
<td>$6,283</td>
<td>$6,511</td>
<td>$228</td>
</tr>
<tr>
<td>Law Enforcement</td>
<td>$2,195</td>
<td>$606</td>
<td>($1,589)</td>
</tr>
<tr>
<td><strong>SUBTOTAL</strong></td>
<td><strong>$8,977</strong></td>
<td><strong>$8,164</strong></td>
<td><strong>($813)</strong></td>
</tr>
<tr>
<td>Crashes*</td>
<td>$947</td>
<td>$341</td>
<td>($606)</td>
</tr>
<tr>
<td>Victimization*</td>
<td>$696</td>
<td>$3,809</td>
<td>$3,113</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>$10,620</strong></td>
<td><strong>$12,314</strong></td>
<td><strong>$1,694</strong></td>
</tr>
</tbody>
</table>

*These costs accrue to a combination of many different entities including the individual, medical care, etc. and therefore cannot be attributed to any particular agency above.

Table 15 shows that every agency has a benefit, or savings, as a result of DWI court except for law enforcement. As demonstrated in Tables 13 and 14, the total cost of recidivism over 2 years for the RDWI per DWI court participant (regardless of graduation status) was $8,977, while the cost per comparison group member was $8,164. The difference between the DWI court and comparison group represents a loss of $813 per participant. This is mainly due to DWI court par-
participants spending longer on probation and more time in jail (possibly due to program sanctions). When crashes and victimization costs are added, the difference in costs turns positive, with DWI court participants costing a total of $1,694 less per participant than non-DWI court offenders due to fewer victim crimes for participants. Program graduates use substantially fewer resources than the comparison group, and particularly fewer resources than those terminated from the program. The program should look into the possibility that participants who are terminated from the program are getting a more punitive sentence than DWI offenders who did not participate in the program at all—or examine their requirements for time on probation compared to the traditional court process. Since the DWI court participants are getting rearrested less often than the comparison group, it is unlikely that the larger amount of probation time for DWI court participants is due to new charges.

Cost-Benefit Analysis

Over time, the RDWI results in a small cost savings and a return on taxpayer investment in the program. The program investment cost is $7,358 per DWI court participant. The benefit due to significantly reduced recidivism and victimizations for DWI court participants over the 2 years included in this analysis came to $1,694. This amount results in a small positive return on the investment over the 2-year time period. However, with an annual cost savings per participant of $847, it would take almost 9 years to repay the investment cost of the program. At 10 years the cost-benefit ratio comes to $1.15 saved for every $1 invested in the program. It is important to note that these are criminal justice system savings only. If other system costs, such as health care and child welfare were included, studies have shown that an even higher return on investment can be expected, up to $10 saved per $1 invested in the program (Finigan, 1998).

**Cost Evaluation Research Question #3: Cost of Time between Arrest and DWI Court Entry**

*What is the impact on the criminal justice system of the time between the eligible arrest and DWI court entry (in terms of rearrests, court cases, jail)?*

Although research has frequently shown that DWI court participants have better outcomes when they enter the program and treatment swiftly—within 50 days of arrest (e.g., Carey et al., 2012), a common issue for DWI courts and other problem-solving courts is a long delay between arrest and program entry. An examination of resources used between arrest and DWI court entry demonstrates the fiscal impact of this delay.

**Costs between Arrest and DWI Court Entry**

Key Component #3 of the Key Components of Drug court is about identifying eligible individuals quickly and promptly placing them in the program. A shorter time between arrest and DWI court entry helps ensure prompt treatment while also placing the offender in a highly supervised environment where he or she is less likely to be rearrested and therefore less likely to be using other criminal justice resources such as jail as well as protecting public safety. The longer the time between arrest and DWI court entry, the greater the opportunity for offenders to re-offend before getting into treatment. This leads to the question, what is the impact in terms of rearrests, court cases, and jail in the time between arrest and entry into the DWI court for RDWI participants?

This section describes the criminal justice costs experienced by DWI court participants between the time of the DWI court-eligible arrest and DWI court entry. All transactions were described in the outcome costs section above. Costs were calculated from the time of the DWI court-eligible
arrest to program entry. For the RDWI, the mean average length of time between arrest and program entry was 108 days.

Table 16 represents the criminal justice costs per person for all DWI court participants (graduates and non-graduates combined) from the DWI court-eligible arrest to program entry.

Table 16. Criminal Justice Costs per DWI Court Participant from Arrest to Program Entry

<table>
<thead>
<tr>
<th>Transaction</th>
<th>Transaction unit cost</th>
<th>Avg. # of transactions per DWI Court participant</th>
<th>Avg. cost per DWI Court participant (n = 173)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rearrests</td>
<td>$172.84</td>
<td>0.07</td>
<td>$12</td>
</tr>
<tr>
<td>Misdemeanor Court Cases</td>
<td>$1,279.61</td>
<td>0.05</td>
<td>$64</td>
</tr>
<tr>
<td>Gross Misdemeanor Court Cases</td>
<td>$1,408.11</td>
<td>0.04</td>
<td>$56</td>
</tr>
<tr>
<td>Felony Court Cases</td>
<td>$3,753.36</td>
<td>0.00</td>
<td>$0</td>
</tr>
<tr>
<td>Jail Bookings</td>
<td>$69.05</td>
<td>1.19</td>
<td>$82</td>
</tr>
<tr>
<td>Adult Detention Center Jail Days</td>
<td>$157.43</td>
<td>1.51</td>
<td>$238</td>
</tr>
<tr>
<td>Adult Correctional Facility Jail Days</td>
<td>$127.88</td>
<td>4.31</td>
<td>$551</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td></td>
<td><strong>$1,003</strong></td>
</tr>
</tbody>
</table>

As is demonstrated in Table 16, there are costs accruing to the criminal justice system per offender from the time of the DWI court-eligible arrest through entry into DWI court ($1,003 per DWI court participant). It should be noted that these costs only include arrests, court cases, jail bookings, and jail time during the average of 108 days from the DWI court-eligible arrest to entry into the RDWI. Other criminal justice costs may also be accruing. These costs emphasize that the sooner offenders can be placed into DWI court, the more criminal justice system costs can be minimized.
Summary of Cost Evaluation

Figure 11 provides a graph of the outcome costs for graduates, all participants and the comparison group over 2 years, including victimizations and crashes.

**Figure 11. Criminal Justice Recidivism Cost Consequences per Person: DWI Court Participants and Comparison Group Members over 2 Years**

The cost savings illustrated in Figure 11 are those that have accrued in the 2 years since program entry (including jail sanctions). Many of these savings are due to positive outcomes while the participant is still in the program. The outcome cost savings are small enough that it would take almost 9 years to regain the investment (the program cost per participant of $7,358). Given the difference between graduates and all DWI court participants, these findings indicate that the DWI court may be resulting in more punitive sentences for those who terminate from the program, and that participants who terminate from the program are particularly in need of additional program resources targeted to their assessed risk and need.

However, on the encouraging side, when the yearly per participant savings for positive outcomes is multiplied by the capacity of the program per year (a cohort of 60 offenders), the total amount “saved” by the program per year due to positive outcomes for its participants (i.e., lower recidivism) is **$50,820**, which can then be multiplied by the number of years the program remains in operation and for additional cohorts of 60 participants per year. After 5 years, the accumulated resource savings come to **$762,300 (not including program investment costs)**.


Kralstein, D. (2010, June). *The impact on drug use and other psychosocial outcomes: Results from NIJ’s Multisite Adult Drug Court Evaluation*. Presentation at the 16th Annual Training Conference of the National Association of Drug Court Professionals, Boston, MA.


National Association of Drug Court Professionals Drug Court Standards Committee (1997). *Defining drug courts: The key components*. U.S. Department of Justice, Office of Justice Programs, Drug Court Programs Office.


APPENDIX A: THE GUIDING PRINCIPLES OF DWI COURTS
The Guiding Principles of DWI Courts

GUIDING PRINCIPLE #1: Determine the Population

Targeting is the process of identifying a subset of the DWI offender population for inclusion in the DWI court program. This is a complex task given that DWI courts, in comparison to traditional drug court programs, accept only one type of offender: the hardcore impaired driver. The DWI court target population, therefore, must be clearly defined, with eligibility criteria clearly documented.

GUIDING PRINCIPLE #2: Perform a Clinical Assessment

A clinically competent and objective assessment of the impaired-driving offender must address a number of bio-psychosocial domains including alcohol use severity and drug involvement, the level of needed care, medical and mental health status, extent of social support systems, and individual motivation to change. Without clearly identifying a client's needs, strengths, and resources along each of these important bio-psychosocial domains, the clinician will have considerable difficulty in developing a clinically sound treatment plan.

GUIDING PRINCIPLE #3: Develop the Treatment Plan

Substance dependence is a chronic, relapsing condition that can be effectively treated with the right type and length of treatment regimen. In addition to having a substance abuse problem, a significant proportion of the DWI population also suffers from a variety of co-occurring mental health disorders. Therefore, DWI courts must carefully select and implement treatment strategies demonstrated through research to be effective with the hardcore impaired driver to ensure long-term success.

GUIDING PRINCIPLE #4: Supervise the Offender

Driving while impaired presents a significant danger to the public. Increased supervision and monitoring by the court, probation department, and treatment provider must occur as part of a coordinated strategy to intervene with hardcore DWI offenders and to protect against future impaired driving.

GUIDING PRINCIPLE #5: Forge Agency, Organization, and Community Partnerships

Partnerships are an essential component of the DWI court model as they enhance credibility, bolster support, and broaden available resources. Because the DWI court model is built on and dependent upon a strong team approach, both within the court and beyond, the court should solicit the cooperation of other agencies, as well as community organizations to form a partnership in support of the goals of the DWI court program.
GUIDING PRINCIPLE #6: Take a Judicial Leadership Role

Judges are a vital part of the DWI court team. As leader of this team, the judge’s role is paramount to the success of the DWI court program. The judge must be committed to the sobriety of program participants, possess exceptional knowledge and skill in behavioral science, own recognizable leadership skills as well as the capability to motivate team members and elicit buy-in from various stakeholders. The selection of the judge to lead the DWI court team, therefore, is of utmost importance.

GUIDING PRINCIPLE #7: Develop Case Management Strategies

Case management, the series of inter-related functions that provides for a coordinated team strategy and seamless collaboration across the treatment and justice systems, is essential for an integrated and effective DWI court program.

GUIDING PRINCIPLE #8: Address Transportation Issues

Though nearly every state revokes or suspends a person's driving license upon conviction for an impaired driving offense, the loss of driving privileges poses a significant issue for those individuals involved in a DWI court program. In many cases, the participant solves the transportation problem created by the loss of their driver’s license by driving anyway and taking a chance that he or she will not be caught. With this knowledge, the court must caution the participant against taking such chances in the future and to alter their attitude about driving without a license.

GUIDING PRINCIPLE #9: Evaluate the Program

To convince stakeholders about the power and efficacy of DWI court, program planners must design a DWI court evaluation model capable of documenting behavioral change and linking that change to the program's existence. A credible evaluation is the only mechanism for mapping the road to program success or failure. To prove whether a program is efficient and effective requires the assistance of a competent evaluator, an understanding of and control over all relevant variables that can systematically contribute to behavioral change, and a commitment from the DWI court team to rigorously abide by the rules of the evaluation design.

GUIDING PRINCIPLE #10: Ensure a Sustainable Program

The foundation for sustainability is laid, to a considerable degree, by careful and strategic planning. Such planning includes considerations of structure and scale, organization and participation and, of course, funding. Becoming an integral and proven approach to the DWI problem in the community however is the ultimate key to sustainability.
APPENDIX B: MINNESOTA OFFENDER DRUG COURT STANDARDS
Minnesota Judicial Branch Policy

Policy Source: Minnesota Judicial Council
Policy Number: 511.1

Category: Statewide Court Programs
Title: Drug Court Standards
Effective Date: July 0, 2007
Revision Date(s): January 16, 2009
Supersedes:

Minnesota Offender Drug Court Standards
FOR ALL JUVENILE, HYBRID,\(^1\) DWI, AND ADULT DRUG COURTS

PURPOSE

Drug courts promote recovery through a coordinated response to participants who are dependent on alcohol and other drugs (AOD). A team approach is required, including the collaboration of judges, drug court coordinators, prosecutors, defense counsel, probation authorities, law enforcement, treatment providers, and evaluators. Drug courts employ a multi-phased treatment process. The goal of drug courts is to engage individuals in treatment long enough to experience the benefits of treatment in order to end the cycle of recidivism and successfully intervene on the addiction.

The Judicial Council, comprised of the leadership of the Minnesota Judicial Branch, has convened the multi-disciplinary, cross-branch Drug Court Initiative Advisory Committee (DCI) to oversee implementation and funding distribution for drug courts in Minnesota. The goal of the Drug Court Initiative is to improve outcomes for alcohol and other drug addicted individuals in the courts through justice system collaboration, thereby:

1. Enhancing public safety
2. Ensuring participant accountability; and
3. Reducing costs to society

\(^1\) Hybrid drug courts combine one or more of the models taking multiple case types. E.g., many adult drug courts that focus on controlled substance and other felony-level crimes also include DWI cases in the court.
Successful drug court initiatives will also improve the quality of life for addicted offenders, their families, and communities through recovery and lead to greater system collaboration and ongoing analysis to ensure effective and fair case outcomes.

DWI and Hybrid DWI courts have a variety of elements that set them apart from the Adult drug court model. While public safety is a priority among all models of drug courts, drinking and driving is a major public safety issue for our communities and our criminal justice system. The main goal of DWI and Hybrid DWI courts is to reduce or eliminate repeat DWI offenses; thereby creating safer roads and saving lives. The detection of alcohol is difficult, requiring more sophisticated testing. Transportation issues tend to be one of the most difficult obstacles for offenders to overcome. To effectively manage these issues and to best treat this population, DWI and Hybrid DWI courts utilize increased supervision, frequent alcohol and other drug testing, including scientifically validated technology to detect ethyl alcohol, and driver’s license reinstatement plans.

Juvenile drug courts focus on a younger population and have many characteristics and needs specific to the model. Most important is the fact that many of the young people in these courts are still living at home and are under the supervision of caregivers. Juveniles are negatively affected by any criminal or addictive issues in the home. Because the court does not have jurisdiction over the caregivers, it is more difficult to effectively intervene in the youth’s problematic use of alcohol and other drugs and support the young person in their recovery. Due to their age and the relatively short period of time using alcohol and other drugs, providing a definitive diagnosis of dependence for juveniles regarding their use of alcohol and other drugs is sometimes difficult and some traditional treatment and recovery supports may not be appropriate. Issues such as school performance, teenage pregnancy, gang involvement, transportation, and appropriate housing greatly impact a juvenile drug court’s ability to support the young person in changing their life.

The following document provides standards to guide the planning and implementation of all offender drug courts in Minnesota’s state trial courts. The Ten Key Components, as published by the U.S. Department of Justice, Office of Justice Programs, are the core structure for these standards. Definitions of each model of drug court – adult, juvenile, and DWI – can be found in Appendix A. The standards are written from the perspective of adult drug courts. Whenever there is a specific standard or practice unique to a juvenile or DWI model of drug court that standard or practice is identified in the appropriate section.

These standards were approved by the Judicial Council on July 20, 2007, and are minimum requirements for the approval and operation of all drug courts in Minnesota. Accompanying each standard are recommended practices that each drug court is encouraged to follow.

The standards are based upon almost twenty years of evaluation and lessons learned from drug courts all across the country, as well as Minnesota’s oldest drug courts. While these standards seek to create a minimum level of uniform practices for drug courts there is much room for innovation and for local drug courts to tailor their courts to meet their needs.
I. STANDARD ONE

*Drug courts must utilize a comprehensive and inclusive collaborative planning process, including:*

1.1 Completion of the federal Drug Court Planning Initiative (DCPI) training or the Minnesota equivalent for the specific approved drug court model before becoming operational. Hybrid drug court teams that seek to combine multiple models of drug court must complete team-based drug court training for all relevant models.

1.2 Development of a written agreement setting forth the terms of collaboration among the prosecutor’s office, the public defender’s office, probation department, the court, law enforcement agency(ies), and county human services.

1.3 Creation of a steering committee comprised of key officials and policymakers to provide oversight for drug court policies and operations, including development and review of the drug court budget, and to communicate regularly with the county board and/or city council.

1.4 Establishment of written policies and procedures which reflect shared goals and objectives for a drug court; at a minimum, the goals of the drug court shall be those of the DCI: enhancing public safety, ensuring participant accountability, and reducing costs to society. (An outline example for a local policies and procedures manual is found in Appendix B.)

1.5 Provision of written roles and responsibilities of each of the core team members. The core team members are as follows:

   A. Judge
   B. Drug Court Coordinator
   C. Prosecutor
   D. Public Defender
   E. Probation/Case Manager
   F. Law Enforcement Representative
   G. Chemical Dependency Expert (Provider, Rule 25 assessor, etc.)
   H. Tribal Representative (when appropriate)

   DWI- All of the above and a victim’s representative
   Juvenile Drug Court- All of the above and a school official
Recommended Practices

1. Drug court teams should take a minimum of six months to plan and prepare for implementation. This amount of time allows for a cohesive team to form; one that has effectively and collaboratively reached consensus on the variety of issues inherent in the implementation of a drug court.

2. When developing a written agreement, teams should include a tribal entity when appropriate.

3. Other possible members of the team, may include, but are not limited to:
   a. Mental Health Professional
   b. Rule 25 Assessor
   c. Social Service Representative
   d. Recovery Community Representatives
   e. Other Community-Based Stakeholders

4. All drug court teams should work with their local community members when planning, implementing, and operating a drug court to ensure that the best interests of the community are considered. Drug court team members should engage in community outreach activities to build partnerships that will improve outcomes and support self-sustainability.

5. A written sustainability plan should be developed and reviewed on an annual basis.

6. A community outreach and education plan should be developed and reviewed regularly.

II. STANDARD TWO

*Drug courts must incorporate a non-adversarial approach while recognizing:*

2.1 Retention of prosecution’s distinct role in pursuing justice and protecting public safety.

2.2 Retention of defense counsel’s distinct role in preserving the constitutional rights of drug court participants.

2.3 Provision of detailed materials outlining the process of the drug court to private legal counsel representing a drug court participant; counsel shall also be invited to attend post-admission drug court staffings (for their client(s) only).

\[\text{2 Specifically these representatives could come from public health, housing, employment, etc.}\]
**Recommended Practice**

1. For consistency and stability in drug court operations, the drug court team members should be assigned to the drug court for a minimum of one year.

**III. STANDARD THREE**

*Drug courts must have published eligibility and termination criteria that have been collaboratively developed, reviewed, and agreed upon by members of the drug court team, including the following elements:*

3.1 Offense eligibility screening based on established written criteria, which cannot be changed without the full agreement of the drug court team.

3.2 Only individuals with a finding of substance dependence consistent with the most current DSM (Diagnostic and Statistical Manual) diagnostic criteria shall be considered appropriate for drug court.

**For Juveniles:**

Only individuals with a finding of substance abuse or dependence consistent with the most current DSM (Diagnostic and Statistical Manual) diagnostic criteria shall be considered appropriate for drug court.

3.3 Only those individuals assessed as having a high recidivism potential are admitted into the drug court. All drug courts must use validated risk tools to assess the risk of the potential drug court candidate. Those individuals who are assessed to be low-risk or medium-risk are not appropriate for drug court and shall not be admitted.

3.4 Participants who have a history of violent crimes, crimes to benefit a gang, or who are an integral part of a drug distribution or manufacturing network are excluded from the drug court. If the drug court team intends to use information other than a conviction to determine whether the participant has a criminal history that would exclude the participant from participating in drug court, local drug court team members must determine as part of their written procedures what additional information may be considered by the drug court team in making a determination as to the participant’s criminal history.

3.5 The local drug court team members must determine, in writing, what constitutes a violent or gang-related crime for purposes of disqualification from the drug court. Other disqualifying crimes or disqualifying factors are as determined in writing by the local drug court team.
Recommended Practices

1. Drug courts should have clear policies regarding bench warrant status as part of written termination criteria.
2. Participants should not be accepted to or excluded from drug court solely on the basis of a Rule 25 assessment.
3. In developing eligibility criteria drug court teams should take into consideration the following factors:
   a. A process to consider the inclusion of serious and repeat (i.e., 1st and 2nd degree controlled substance offense) non-violent offenders.
   b. A provision to evaluate mitigating and aggravating circumstances of the current or prior offenses
   c. Careful examination of the circumstances of prior juvenile adjudications and the age of the participant at the time of the offense
   d. The age of prior disqualifying offenses
   e. Should the mental health capacity of the individual be in question, a mental health assessment should be administered to deem the individual mentally stable enough to participate in the drug court. Additionally, if a co-occurring disorder exists, the drug court should be able to advocate for and access adequate services.

IV. STANDARD FOUR

A coordinated strategy shall govern responses of the drug court team to each participant’s performance and progress, and include:

4.1 Regular drug court team meetings for pre-court staffings and court reviews to monitor each participant’s performance.

4.2 Ongoing communication among the court, probation officer and/or case manager, and treatment providers, including frequent exchanges of timely and accurate information about the individual participant’s overall performance.

4.3 Progression by participants through the drug court based upon the individual’s progress in the treatment plan and compliance with court requirements; drug court phases and an individual’s progress through those phases are not to be based solely upon pre-set court timelines.

4.4 Responses to compliance and noncompliance (including criteria for termination) explained orally and provided in writing to drug court participants during their orientation.
Recommended Practices

1. Having a significant number of drug court participants appear at a single session gives the opportunity to educate both the participant at the bench and those waiting as to the benefits of court compliance and consequences for noncompliance.
2. Mechanisms for sharing decision-making and resolving conflicts among drug court team members should be established, emphasizing professional integrity and accountability.

V. STANDARD FIVE

*Drug courts must promptly assess individuals and refer them to the appropriate services, including the following strategies:*

5.1 Initial appearances before the drug court judge do not exceed:

- 14 days after arrest, charging, or initial appearance in court for those drug courts which are pre-conviction or pre-adjudication for Juvenile drug courts.
- 14 days after conviction for those drug courts which are post-conviction or 14 days after adjudication for all post-adjudication Juvenile drug courts. 14 days after first appearance on a violation of probation

5.2 All chemical dependency and mental health assessments include collateral information to ensure the accuracy of the assessment.

5.3 Defense counsel must review the standard form for entry into the drug court as well as potential sanctions and incentives with the participant, informing them of their basic due process rights.

5.4 The standard Consent Form must be completed by all parties – team members, observers, and adjunct team members - to provide communication about confidentiality, participation/progress in treatment, and compliance with the provisions of 42 CFR, Part 2 and HIPAA (*in development*).

5.5 Once accepted for admission into the drug court, the participant must participate as soon as possible in chemical dependency treatment services and be placed under supervision to monitor their compliance with court expectations.

Recommended Practices

1. Individuals providing screening for substance use disorders and suitability for treatment should be appropriately trained.
2. The drug court team should have the option to accept or reject a chemical dependency assessment without adequate collateral information.
VI. STANDARD SIX

A drug court must incorporate ongoing judicial interaction with each participant as an essential component of the court.

6.1 At a minimum, drug court participants must appear before the drug court judge at least twice monthly during the initial phase of the court. Frequent status hearings during the initial phases of the court establish and reinforce the drug court’s policies and ensure effective supervision of each drug court participant.

Recommended Practices

1. Participants should appear before the judge weekly during the initial phase of the court. Frequent status hearings during the initial phases of the court establish and reinforce the drug court’s policies and ensure effective supervision of each drug court participant.

2. The drug court judge is knowledgeable about treatment methods and their limitations.

3. Hearings should be before the same judge for the length of each participant’s time in the drug court.

VII. STANDARD SEVEN

Abstinence must be monitored by random, frequent, and observed alcohol and other drug testing protocols which include:

7.1 Written policies and procedures for sample collection, sample analysis, and result reporting. The testing policies and procedures address elements that contribute to the reliability and validity of the testing process.

7.2 Individualized drug testing plans; all testing must be random, frequent, and observed.

7.3 Plans for addressing participants who test positive at intake or who relapse must be clearly established with outlined treatment guidelines and sanctions, when appropriate, that are enforced and reinforced by the judge.

7.4 Notification of the court immediately when a participant tests positive, has failed to submit to testing, has submitted the sample of another, diluted the sample, or has adulterated a sample. Failure to submit to testing, submitting the sample test of another, and adulterated samples must be treated as positive tests and immediately sanctioned.

7.5 Testing sufficient to include each participant’s primary substance of dependence, as well as a sufficient range of other common substances.
Recommended Practice

1. When testing for alcohol, drug courts should strongly consider devices worn by the participant, portable breath tests (PBTs), saliva tests, and the use of scientifically validated technology used to detect ethyl alcohol.

VIII. STANDARD EIGHT

*Drug courts must provide prompt access to a continuum of approved AOD and other related treatment and rehabilitation services, particularly ongoing mental health assessments to ensure:*

8.1 All participants have an up-to-date treatment plan and record of activities.

8.2 All chemical dependency and mental health treatment services are provided by programs or persons who are appropriately licensed and trained to deliver such services according to the standards of their profession.

Recommended Practices

1. Each participant should contribute to the cost of the treatment he/she receives while participating in the drug court, taking into account the participant’s, and when appropriate the guardian’s, financial ability.

2. Drug court teams should make reasonable efforts to observe drug court treatment programs to gain confidence in the services being provided and to better understand the treatment process.

3. Whenever possible drug court treatment providers should have separate tracks for drug court participants/criminal justice clients.

IX. STANDARD NINE

*The drug court must have a plan to provide services that are individualized to meet the needs of each participant and incorporate evidence-based strategies for the participant population. Such plans must take into consideration services that are gender-responsive and culturally appropriate and that effectively address co-occurring disorders.***

9.1 All DWI participants with suspended, canceled or revoked licenses must have a license reinstatement plan.
Recommended Practices

1. Services should be trauma-informed\(^3\) when appropriate and clinically necessary to the degree that available resources allow this.
2. All drug court participants with suspended, canceled or revoked licenses should have a license reinstatement plan.
3. Ancillary services that should also be considered may include but are not limited to:
   - Education
   - Transportation
   - Housing
   - Domestic Violence Education Programming
   - Health Related
   - Employment

X. STANDARD TEN

*Immediate, graduated, and individualized sanctions and incentives must govern the responses of the drug court to each participant’s compliance or noncompliance.*

Recommended Practices

1. Adjustment in treatment services, as well as participation in community-based mutual support meetings, should only be based upon the clinically-informed interests of the participant.
2. Time between status hearings should be increased or decreased, based upon compliance with treatment protocols and progress observed.
3. Responses to or incentives for compliance vary in intensity and might include:
   a. Encouragement and praise from the bench;
   b. Ceremonies and tokens of progress, including advancement in the court;
   c. Reduced supervision;
   d. Decreased frequency of court appearances;
   e. Reduced fines or fees;
   f. Dismissal of criminal charges or reduction in the term of probation;
   g. Reduced or suspended sentence; and
   h. Graduation.
4. Responses to or sanctions for noncompliance vary in intensity and might include:
   a. Warnings and admonishment from the bench in open court;
   b. Demotion to earlier court phases;
c. Increased frequency of testing and court appearances;
d. Confinement in the courtroom or jury box;
e. Increased monitoring;
f. Fines;
g. Required community service or work programs;
h. Escalating periods of jail or out-of-home placement, including detention, for Juveniles (drug court participants remanded to jail or out-of-home placement, including detention should receive AOD treatment services while confined); and
i. Termination from the court and reinstatement of regular court processing.

XI. STANDARD ELEVEN

Drug courts must assure continuing interdisciplinary education of its team members to promote effective drug court planning, implementation, and ongoing operations, by:

11.1 Establishing and maintaining a viable continuing education plan for drug court team members.

Recommended Practices

1. At a minimum of once every two years, drug court teams should work with outside experts to assess team functionality, review all policies and procedures, and assess the overall functionality of the court.
2. Each drug court should plan for the transition of a team member and provide sufficient training for new team members.
3. Each court should identify and build a relationship with a mentor court of its specific model.
4. Drug courts should regularly observe other drug courts.
5. The operating procedures should define requirements for the continuing education of each drug court staff member.

XII. STANDARD TWELVE

Drug courts must evaluate effectiveness by:

12.1 Reporting outcome and other data as required by the DCI including information to assess compliance with the Standards.
APPENDIX A:
Definition of Drug Court Models (adapted from the National Drug Court Institute)

**Adult Drug Court** is a specially designed court calendar, the purposes of which are to achieve a reduction in recidivism and alcohol and other drug (AOD) use among nonviolent addicted offenders and to increase the offenders' likelihood of successful habilitation through early, continuous, and intense judicially supervised treatment, mandatory periodic drug testing, community supervision and the use of appropriate sanctions and incentives. The drug court judge maintains close oversight of each case through regular status hearings with the parties involved. The judge both leads and works as a member of a team that comprises representatives from treatment, law enforcement, probation, the prosecution, and the defense.

**DWI Court** is a distinct court dedicated to changing the behavior of the alcohol and other drug dependant offenders arrested for Driving While Impaired (DWI). The goal of DWI court is to protect public safety by using the drug court model to address the root cause of impaired driving, alcohol and other drug problems. With the repeat offender as its primary target population, DWI courts follow the Ten Key Components of Drug Courts and Ten Guiding Principles of DWI Courts, as established by the National Association of Drug Court Professional and the National Drug Court Institute.

**Hybrid Drug Court** is a drug court that combines multiple models. The drug court team has had appropriate training for each of the combined models. E.g., when an Adult drug court decides to also take DWI offenders, the court is structured to support the needs of DWI offenders, in particular the use of alcohol monitoring and the presence of victim’s representatives at staffings, to protect public safety.

**Juvenile Drug Court** is a court calendar within a juvenile court to which selected delinquency cases are referred for handling by a designated judge. The youth referred to this docket are identified as having problems with alcohol and/or other drugs. The juvenile drug court judge maintains close oversight of each case through regular status hearings with the parties involved. The judge both leads and works as a member of a team that comprises representatives from treatment, juvenile justice, social and mental health services, school and vocational training programs, law enforcement, probation, the prosecution, and the defense.
APPENDIX B:
Policy and Procedures Manual Outline

COURT OVERVIEW
   Introduction
      Mission Statement
      Goals and Objectives

COURT PLAN
   Model
   Target Population
   Eligibility Criteria
   Referral Process
   Screening and Intake Process
   Entry Process
   Incentives & Sanctions
   Graduation Requirements
   Termination Criteria
   Staffing (frequency, team operating norms, times)
   Court Session (frequency, times)

ROLES AND RESPONSIBILITIES OF THE KEY PLAYERS OF THE OPERATIONS TEAM

CONFIDENTIALITY

CHEMICAL DEPENDENCY TREATMENT
   Provider Network
   Protocols
   Phases and Duration
   Long Term Recovery Supports/Continuing Care
ANCILLARY SERVICES

CULTURAL AWARENESS & INCLUSION POLICY

COURT OVERSIGHT AND SUSTAINABILITY PLAN

- Marketing and Community Awareness
- Cross Training
- Management Information System
- Evaluation Design
- Budget

APPENDICES

Appendix A  Examples of Incentives & Sanctions
Appendix B  Forms
Appendix C  Orders
Appendix D  Participant Handbook
Appendix E  Phase Description
Appendix F  Team Meeting Ground Rules
Appendix G  Memoranda of Understanding (Enter a brief policy statement followed by necessary MOU’s to maintain for the effective functioning of the court. An appendix section should contain all MOU’s)
Appendix H  Life Plan Packet – this document delineates how the prospective graduate will maintain sobriety and continue law-abiding behavior.
Appendix I  Road Map – monthly review of all case plans so that all cases are prioritized on a regular basis
Appendix J  Steering Committee
Appendix K  Planning Team
Appendix L  Operations Team
Appendix M  Referral & Screening Flow Chart

3 Trauma-informed services are designed to provide appropriate interactions tailored to the special needs of trauma survivors. The focus is on screening for trauma and designing the drug court program to reduce or eliminate triggers of trauma for the survivor. This is particularly important because research shows that occurrence of trauma is a significant factor in most offender populations. This concept is further discussed in the Minnesota Supreme Court’s Chemical Dependency Task Force’s second report (pp. 44-47). http://www.mncourts.gov/?page=631