

Tennessee Statewide Drug Court Evaluation and Training Project

Prepared for:
The Tennessee Office of Criminal Justice Programs

Prepared by:
Performance Vistas, Inc.
Richard Grimm, Ph.D.
Ashley Self, B.A.



Report submitted on June 30, 2011

This report was developed under grant award #2008-DCBX-0016 from the U.S. Department of Justice. The points of view expressed are those of the authors and do not necessarily represent the official position or policies of the Tennessee Office of Criminal Justice Programs nor any of the selected Drug Court programs or the U.S. Department of Justice.

Acknowledgments

The authors would like to recognize the many persons who contributed their time and effort to this evaluation project. We'd like to give special thanks to the following persons:

Greene County

- The Honorable Ken Bailey, General Sessions Court Judge and Presiding Drug Court Judge
- Mattie Rasnake, Greene County Drug Court Coordinator
- Pam Venerable, Greene County Clerk
- Margaret Knight, Sumner County Sheriff's Office
- Lt. Jerry Scott, Sumner County Sheriff's Office

Knox County

- The Honorable Chuck Cerny, Criminal Court Judge and Presiding Drug Court Judge
- Ron Hanaver, Knox County Drug Court Coordinator
- Freda Wiggs, Knox County Drug Court Case Manager
- Mason Meade, Knox County Government Office of Information Technology
- Tim Mynatt, Knox County Government Office of Information Technology

Sumner County

- The Honorable Dee David Gay, Criminal Court Judge and Presiding Drug Court Judge
- The Honorable James Hunter, General Sessions Court Judge and Presiding Drug Court Judge
- Tracye Bryant, Sumner County Drug Court Director
- John Merryman, Sumner County Drug Court Treatment Support

Tennessee Bureau of Investigation

- Jackie Vandercook, Director, Statistical Analysis Center, Tennessee Bureau of Investigation

A special thanks goes to the Drug Court Coordinators/Director. This evaluation could not have been completed successfully without their administrative support, assistance in compiling databases, and coordination of staff interviews, observation of drug court activities, and other meetings.

We would also like to thank the members of the Cost-Benefit Tool and Template Subcommittee. This subcommittee was appointed to assist in task of developing the cost-benefit tool and template and was comprised of five members: the Honorable E. Shayne Sexton, Judge; Deborah Gibson, Ph.D.; Rebekah Provost-Emmons; Ron Hanaver; and Gayle Moyer Harris. These members represented Tennessee's Drug Court Advisory Committee, the Tennessee Association of Drug Court Professionals, the Judge's Conference, and individual drug courts.

This project would not have been initiated and could not have been completed without the assistance of Marie Crosson, Deputy Director of the Tennessee Office of Criminal Justice Programs. Ms. Crosson was instrumental in scheduling meetings with the Drug Court Advisory Committee and the Cost-Benefit Tool and Template subcommittee.

Finally, we'd like to thank the members of the drug court teams in each of the three selected drug courts and three groups of current and former drug court program participants who served as

respondents in the key informant interviews. Their insight was valuable in assisting us to identify the strengths, weaknesses, and improvement recommendations for their respective drug courts.

Table of Contents

TOPIC	PAGE
Acknowledgments	ii
Executive Summary	1
Chapter 1: Introduction	4
- History of Drug Court Implementation	4
- Effectiveness of Drug Courts	5
Chapter 2: Tennessee’s Drug Court Annual Reporting	7
-Overview	7
-Phase I Reporting	7
-Phase II Reporting	8
-Statewide Evaluation	9
-Revision History	9
Chapter 3: Evaluation Plan	10
- Overview	10
- Process Evaluation Methods and Procedures	11
-Examination of Program Elements and Implementation issues	12
- Outcome Evaluation Methods and Procedures	13
Chapter 4: Greene County Treatment Court	14
-Description of the Greene County Treatment Court	14
-Greene County Treatment Court Process Evaluation Findings	30
-Recommendations	57
-Greene County Treatment Court Outcome Evaluation	61
-Impact on Criminal Activity	68
-Impact on Substance Use among Participants	76
-Impact on Life Circumstances	76
-Predictors of Program Success	76
Chapter 5: Knox County Drug Court	78
-Description of the Knox County Drug Court	78
-Knox County Drug Court Process Evaluation Findings	99
-Recommendations	135
-Knox County Drug Court Outcome Evaluation	137
-Impact on Criminal Activity	148
-Impact on Substance Use among Participants	155
-Impact on Life Circumstances	156
-Predictors of Program Success	158
Chapter 6: Sumner County Drug Court	161
-Description of the Sumner County Drug Court	161
-Sumner County Drug Court Process Evaluation Findings	177
-Recommendations	206
-Sumner County Drug Court Outcome Evaluation	210
-Impact on Criminal Activity	220
-Impact on Substance Use among Participants	228
-Impact on Life Circumstances	229

TOPIC	PAGE
-Predictors of Program Success	230
Chapter 7: Statewide Implications	232
-Overview	232
- Summary Process Evaluation Findings	240
- Summary Outcome Evaluation Findings	261
-Predictors of Program Success and Other Findings	270
-Statewide Implications and Recommendations	272
Chapter 8: Cost-Benefit Tool and Template	283
-Introduction and Overview	283
-Cost-Benefit Tool and Template Subcommittee	285
-Specific Guidance from Cost-Benefit Tool and Template Subcommittee	286
-Cost-Benefit Tool and Template	290
Chapter 9: Training	291
References	292
Appendices	294
-Appendix 1: Greene County Treatment Court Rated Scales	295
-Appendix 2: Greene County Treatment Court Consensus Improvement Recommendations Ratings	299
-Appendix 3: Knox County Drug Court Rated Scales	301
-Appendix 4: Knox County Drug Court Consensus Improvement Recommendations Ratings	305
-Appendix 5: Sumner County Drug Court Rated Scales	309
-Appendix 6: Sumner County Drug Court Consensus Improvement Recommendations Ratings	313
-Appendix 7: Composite Rated Scales	316
-Appendix 8: Composite Team Training Needs	320
-Appendix 9: Composite MIS Data Element Analysis	321
-Appendix 10: Composite Outcome Data – Predictors of Success	325
-Appendix 11: TBI Groups of Arrests/Crimes	328
-Appendix 12: Cost-Benefit Tool and Template Default Values for FY 2009-10	330
-Appendix 13: Cost-Benefit Tool and Template	332
-Appendix 14: Training Session PowerPoint Handouts	348

Executive Summary

Tennessee Statewide Drug Court Evaluation and Training Project

Background

Over the past two decades, criminal courts in the U.S. and internationally have developed a range of rehabilitative programs designed to reduce recidivism. These include treatment-based court initiatives such as drug courts and other specialty courts (Bureau of Justice Assistance, 2005; Marlowe, 2010).

Drug courts were implemented in the early 1990's in response to significant backlogs and overcrowding in the criminal justice system related to the rapidly growing population of drug offenders, and to the ineffectiveness of prevailing approaches to keep this population from recycling through the system (Huddleston, 2010). Drug courts are designed to address underlying problems of addiction and incorporate a range of evidence-based treatment principles (e.g., use of sanctions and incentives, rapid responses to behavioral infractions, long-term involvement in treatment) with judicial supervision and case management (Hora, Schma, & Rosenthal, 1999).

In October 2003, Tennessee initiated a process of developing performance measures and indicators that could be used to assess the performance of individual drug courts and the drug court movement as a whole in the state of Tennessee. This effort was in response to the passage of the Drug Court Treatment Act of 2003. This legislation was enacted to assist the drug court movement in Tennessee by providing dedicated funds and guidelines for the establishment of drug courts. The Act also required OCJP to collect outcome data that could be used to assess the performance of established and emerging drug courts in Tennessee and move the state toward compliance with the Drug Court Treatment Act of 2003. The performance measures are used to establish a standard for best practices and support a network of information that can be shared uniformly.

The ultimate goal of the state of Tennessee is to institutionalize drug courts. Without standardized measures and indicators in place, it would be difficult to reproduce and institutionalize the drug court movement in Tennessee. Standardized measures and indicators provide policy-makers and other stakeholders information to continue support and sustenance of the drug court movement. When a member of the community asks, "Does the program work?" a comprehensive response dealing with why and how the program is effective can be provided instead of just a one-word answer.

Call for a Statewide Evaluation

The Drug Court Advisory Committee recognized that a few of the performance standards and measures, while being very important, were beyond the ability of individual drug courts to collect on a routine basis. These performance standards and indicators are:

- Number of times admitted to jail and/or prison in the two years prior to admission to the drug court program.
- Number of times admitted to jail and/or prison in the two years after graduation or termination from the drug court program.
- Amount of time in jail and/or prison in the two years prior to admission to the drug court program.
- Amount of time in jail and/or prison in the two years after graduation or termination from the drug court program.
- Number of felony arrests within one year of graduation or termination from the drug court program.

- Number of misdemeanor arrests measured within one year of either graduation or termination from the drug court program.

The Drug Court Advisory Committee recommended that these performance standards and indicators be gathered through periodic statewide evaluations conducted by outside evaluators. Such evaluations could provide these data on a periodic and timely basis, as well as validate other data provided annually by individual drug courts. The Drug Court Advisory Committee recommended that OCJP fund such an external evaluation not more than every five years to commence in FY 2008.

In March 2009, the Tennessee Office of Criminal Justice Programs contracted with Performance Vistas, Inc. to conduct an external evaluation of three drug courts in Tennessee. These three drug courts were selected, among other reasons, because they were representative of the diversity of drug courts in Tennessee. In addition to conducting a process evaluation and an outcome evaluation of each of the selected drug courts, Performance Vistas was also required to develop a simple, easy-to-use cost-benefit tool and template that local drug courts might use to demonstrate the benefits they are providing to their community. Performance Vistas was also required to train local drug courts on the findings and statewide implications from the evaluations, as well as how to use the cost-benefit tool and template. The statewide drug court evaluation project was funded by a grant from the U.S. Department of Justice.

As mentioned above, this statewide evaluation of drug courts in Tennessee focused on both "process" measures (e.g. program implementation) and program outcomes (e.g. criminal recidivism) in three selected drug court programs, and included collection of both qualitative and quantitative data. Additionally, budget data was compiled from each of the selected drug courts to be used in the development testing of the cost-benefit tool and template. The three selected drug court programs actively participated in evaluation efforts, and provided necessary data (e.g., program completion rates, participant satisfaction, drug test results, change in supervision status, budget, etc.) to support an impact evaluation of the program.

Findings

The results of the process evaluation of the three drug courts reflect that each court is in substantial compliance with the 10 key components of effective adult drug courts. By and large, both drug court team members and current participants perceive their individual drug court to be effective in reducing both criminal behavior and substance use.

The outcome evaluations also provide evidence the three selected drug courts were relatively successful in reducing subsequent criminality and substance use relative to a comparison group of offenders who entered the traditional criminal/judicial process. While not universally applicable to each court, the findings of the outcome evaluations are consistent with findings of other drug court evaluations.

- **Graduation Rates:** Graduation rates are comparable to completion rates cited in other studies. For example, the Governmental Accountability Office published a report in 2005 reviewing 27 evaluations of 39 adult drug courts and found completion rates between 27% and 66%.
- **Age:** The likelihood of graduation increased with age at admission.
- **Length of Stay:** Increased length of stay in the drug court program is highly correlated with graduation.

- **Services:** Participants who received more program services were more likely to graduate from the drug court program.
- **Treatment Engagement:** Participants who had therapeutic services initiated sooner after admission and received those services longer during their participation in the program were more likely to graduate.
- **Reduction of Drug Use:** As the participants progressed through the program, the number of drug screens that are positive or unexcused decreased over time.
- **Education Level:** Education level was significantly related to both program graduation and lack of post-program recidivism.
- **Graduation:** Participants who failed to graduate from drug court were more likely to be arrested after release than were graduates from the program.
- **Participation in the program:** Participants were more likely to have a longer time until first arrest compared to the comparison group and were even less likely to have an arrest for a drug charge, or any substance abuse charge in the two year follow-up period compared to the comparison group.

Chapter 1

Introduction

The criminal justice system in the U.S. has been significantly influenced by the increasing availability of illicit drugs and the drug use epidemic that began in the 1980's. The size of criminal court dockets and jail, prison, and community corrections populations have expanded rapidly during this time, due in large part to the arrest of drug-involved offenders. For example, the size of jail and prison populations has doubled in the U.S. since the 1980's, resulting in over 2 million persons incarcerated and some 5 million others under community supervision. Early responses within the justice system focused on law enforcement and incarceration, but had a relatively small impact in reducing drug-related crime. In recognition that more comprehensive efforts were needed to address this epidemic, a consensus emerged that rehabilitation should be integrated with supervision and sanctions to more effectively interrupt the cycle of drugs and crime. Over the past two decades, criminal courts in the U.S. and internationally have developed a range of rehabilitative programs designed to reduce recidivism. These include treatment-based court initiatives such as drug courts and other specialty courts (Bureau of Justice Assistance, 2005; Marlowe, 2010).

History of Drug Court Implementation

Drug courts were implemented in the early 1990's in response to significant backlogs and overcrowding in the criminal justice system related to the rapidly growing population of drug offenders, and to the ineffectiveness of prevailing approaches to keep this population from recycling through the system (Huddleston, 2010). Drug courts are designed to address underlying problems of addiction and incorporate a range of evidence-based treatment principles (e.g., use of sanctions and incentives, rapid responses to behavioral infractions, long-term involvement in treatment) with judicial supervision and case management (Hora, Schma, & Rosenthal, 1999).

The Omnibus Crime Control Act passed by Congress in 1994 provided funding to support drug courts throughout the country. Nearly 500 drug courts were operational by 2001, and at present, there are over 2,500 drug courts that are operational (National Association of Drug Court Professionals, 2010). Drug courts have been implemented in all 50 states, the District of Columbia, Puerto Rico, in many Federal Districts, and in 13 foreign countries. The successful implementation of drug courts has encouraged widespread adoption of other related problem-solving courts, including juvenile drug courts, family/dependency drug courts, DUI/DWI courts, and domestic violence courts.

Drug court programs balance the community's interest in public safety interests with the rehabilitative needs of offenders through collaborative partnerships between the criminal justice and treatment systems, and several other community service providers. Drug courts are designed to reduce crime by placing drug-involved offenders in ongoing treatment that is supervised and monitored by the courts. Compared to regular criminal courts, drug courts represent a significant departure from traditional adversarial proceedings and operations. Drug court hearings are non-adversarial in nature, and provide an emphasis on accountability and use of incentives and sanctions to encourage participant progress. Participation in drug courts is voluntary, although individuals face significant consequences if they do not successfully follow program guidelines. A multidisciplinary team coordinates ongoing supervision by the drug court judge and leveraged involvement in treatment.

The role of the judiciary is an active one in drug courts, including monitoring participants' progress in treatment through the use of frequent drug testing and mandatory court appearances. The drug court judge encourages participants to stay in treatment through use of a wide range of incentives and graduated sanctions. Most drug court programs provide treatment services that last for one year or more, although duration in the program depends on individual progress and adherence to program guidelines. Accountability is insured through the use of regular court hearings in front of the presiding judge. This strategy is appealing to treatment providers, who benefit from the additional leverage exerted on program participants, and the resulting enhanced rates of program retention.

Most drug court programs provide a comprehensive range of treatment and ancillary services, and use a phased treatment approach. The initial phase provides intensive outpatient treatment, often for several months, followed by less intensive outpatient treatment in later stages of the program. In addition to regular involvement in treatment, drug court participants attend regular court hearings, receive individual and group counseling, case management services, drug testing, peer support groups (e.g., AA, NA), mental health services, and a range of other ancillary services.

The following key components of drug courts were developed by a national consensus panel convened by the U.S. Department of Justice and the National Association of Drug Court Professionals (U.S. Department of Justice, 1997).

1. Drug courts integrate alcohol and drug treatment services with justice system case processing.
2. Using a non-adversarial approach, prosecution and defense counsel promote public safety while protecting participants' due process rights.
3. Eligible participants are identified early and promptly placed in the drug court program.
4. Drug courts provide access to a continuum of alcohol, drug, and related treatment and rehabilitation services.
5. Abstinence is monitored by frequent alcohol and illicit drug testing.
6. A coordinated strategy governs drug court responses to participants' compliance.
7. Ongoing judicial interaction with each drug court participant is essential.
8. Monitoring and evaluating achievement of program goals is necessary to gauge effectiveness.
9. Continuing interdisciplinary education promotes effective drug court planning, implementation, and operations.
10. Forging partnerships among drug courts, public agencies, and community-based organizations generates local support and enhances drug court program effectiveness.

Effectiveness of Drug Courts

Although many drug courts have been implemented in the U.S. and internationally, there remains an important need to examine the effectiveness of these programs, including their impact on criminal recidivism and substance abuse (Belenko, 2001; Marlowe, 2010; Latimer, Morton-Bourgon, & Chretien, 2006; Peters, 1996; U.S. General Accounting Office, 2005; Wilson, Mitchell, & MacKenzie, 2006). Many drug court evaluation studies have focused on implementation issues, and others that examine program outcomes have been hampered by methodological limitations, including lack of adequate comparison groups, relatively brief follow-up periods, and a limited range of outcome measures (U.S. General Accounting Office, 2005). However, the availability of higher quality research using random assignment

and matched comparison samples has increased significantly during the last decade, and includes examinations of the cost-effectiveness of drug courts (Marlowe, 2010; Wilson et al., 2006).

Several recent literature reviews and meta-analyses summarize findings from drug court outcome studies (Belenko, 2001; Cissner & Rempel, 2005; General Accounting Office, 2005; Latimer, Morton-Bourgon, & Chretien, 2006; Wilson et al., 2006). A meta-analytic review of 50 drug court outcome evaluations found consistent support for the effectiveness of drug court programs (Wilson, et al., 2006). In reviewing outcomes among drug courts and comparison groups, drug courts were found to have an average of 26% less criminal recidivism than comparison samples. Drug courts also have higher retention/graduation rates in contrast to other offender treatment programs in the community (Belenko, 2001; Cissner & Rempel, 2005). Research indicates that drug court participants have lower rates of substance abuse than offenders who are placed under community supervision (Belenko, 1998, 2001; Rempel & Green, 2009), and drug court graduates have higher rates of employment than non-graduates or groups of untreated offenders (Belenko, 1998, 2001; Marlowe, 2010).

Chapter 2

Tennessee's Drug Court Performance Reporting

Overview

History: In October 2003, Tennessee initiated a process of developing performance measures and indicators that could be used to assess the performance of individual drug courts and the drug court movement as a whole in the state of Tennessee. This effort was in response to the passage of the Drug Court Treatment Act of 2003. This legislation was enacted to assist the drug court movement in Tennessee by providing dedicated funds and guidelines for the establishment of drug courts. The Act also required OCJP to collect outcome data that could be used to assess the performance of established and emerging drug courts in Tennessee and move the state toward compliance with the Drug Court Treatment Act of 2003. The performance measures are used to establish a standard for best practices and support a network of information that can be shared uniformly.

Standardized Measures: These standardized measures were to be implemented on a statewide basis and their measurement was to be integrated into the ongoing operation of all drug courts in Tennessee. Their implementation was to provide the foundation for future evaluation of drug court programs across the state. Future evaluations using these performance measures could be used to identify any issues within the statewide network needing reassessment and adjustment. Further, these performance measures and indicators should enable individual jurisdictions to evaluate their local courts.

Institutionalization of Drug Courts: The ultimate goal of the state of Tennessee is to institutionalize drug courts. Without standardized measures and indicators in place, it would be difficult to reproduce and institutionalize the drug court movement in Tennessee. Standardized measures and indicators provide policy-makers and other stakeholders information to continue support and sustenance of the drug court movement. When a member of the community asks, "Does the program work?" a comprehensive response dealing with why and how the program is effective can be provided instead of just a one-word answer.

Process: Working under a grant from the Bureau of Justice Assistance (BJA), representatives of the Office of Criminal Justice Programs, the university community, and the Tennessee Drug Court Advisory Committee, under the facilitation of consultants from the National Center for State Courts, developed performance standards to address the six goals enumerated in Section 16-22-102 (b) of the Drug Court Treatment Act of 2003, plus three other goals identified by the Drug Court Advisory Committee, consistent with the best practices of drug courts nationwide. Twenty-six performance standards were identified across the nine goals. These 26 standards were scheduled to begin being collected in two phases: Phase 1 – eight (8) standards to be reported to the Office of Criminal Justice Programs on an annual basis using a format provided by OCJP, in Fiscal Year 2005-06, and Phase II – the remaining eighteen (18) performance measures to be added in the following fiscal year for OCJP reporting purposes.

Phase I Reporting

The following seven performance standards began being reporting in Fiscal Year 2005-06:

- Total number of drug screens administered and the number of positive returns during the fiscal year.
- Percentage of graduates who have at least one arrest within one year of graduation, by year of graduation.
- Percentage of graduates who have at least one arrest within two years of graduation, by year of graduation.
- Number and percentage of drug court clients who are arrested on new charges while in the program.
- List of individuals, agencies, and organizations with which the drug court collaborates.
- Number of days between intake and successful completion.
- Number and percentage of drug court clients who graduate from the program, measured cumulatively from the program's inception.

The data submitted for FY 2005-06 for these performance standards were compiled and reported in the 2006 annual drug court report. Based on an analysis of these data, the Drug Court Advisory Committee approved certain changes in the data collection process geared to improve the ability of the Phase I performance standards to be used for enhanced program evaluation. Among these revisions was the inclusion of reporting items to better describe each drug court (number of phases, funding sources, etc.), the inclusion of formulas to aid in calculating requested data, as well as the addition of conviction data to further expand recidivism data.

Phase II Reporting

The following standards were reported, beginning in Fiscal Year 2006-07:

- Number of times admitted to jail and/or prison during participation in the drug court program.
- Amount of time in jail and/or prison during participation in the drug court program.
- Percentage of positive drug screens during the drug court program during the first phase of the drug court program and during the last phase of the drug court program in which the individual participated. (The annual report is collecting data on the number of drug screens administered in each phase and the number of positive drug screens in each phase).
- Data regarding the following personal, familial, and societal accountability measures:
 - Restoration of custody/visiting rights
 - Birth of drug-free babies
 - Employment, re-employment, and/or improved employment
 - Employment stability
 - Education gains
 - Child support payments
 - Hours of community service
 - Fines, court costs, program costs, and restitution paid
 - Drivers license restoration
- Number of days between referral and intake.
- Extent of compliance (supported with statistical and other information where appropriate) with each benchmark associated with each of the key components of effective drug courts established by the National Association of Drug Court Professionals.

Data definitions for each of these standards were approved by the Drug Court Advisory Committee. Training of drug court personnel was completed in time for drug courts to begin collecting these additional data beginning July 1, 2006.

Statewide Evaluation

The Drug Court Advisory Committee recognized that a few of the performance standards and measures, while being very important, were beyond the ability of individual drug courts to collect on a routine basis. These performance standards and indicators are:

- Number of times admitted to jail and/or prison in the two years prior to admission to the drug court program.
- Number of times admitted to jail and/or prison in the two years after graduation or termination from the drug court program.
- Amount of time in jail and/or prison in the two years prior to admission to the drug court program.
- Amount of time in jail and/or prison in the two years after graduation or termination from the drug court program.
- Number of felony arrests within one year of graduation or termination from the drug court program.
- Number of misdemeanor arrests measured within one year of either graduation or termination from the drug court program.

The Drug Court Advisory Committee recommended that these performance standards and indicators be gathered through periodic statewide evaluations conducted by outside evaluators. Such evaluations could provide these data on a periodic and timely basis, as well as validate other data provided annually by individual drug courts. The Drug Court Advisory Committee recommended that OCJP fund such an external evaluation not more than every five years to commence in FY 2008.

Revision History

Over the years, OCJP has made minor changes to the reporting form as well as the information to be reported. Such revisions have been made to clarify the information requested and the format of the data requested, as well as additional data requested by federal funding agencies.

Chapter 3

Evaluation Plan

Overview

The evaluation of three selected drug court programs in Tennessee was conducted as part of the Tennessee's Statewide Drug Court Evaluation and Training Project, and was supported by a U.S. Department of Justice grant to the Tennessee Office of Criminal Justice Programs.

There were three specific goals to be accomplished in this Statewide Drug Court Evaluation and Training Project:

1. The completion of a process and outcome evaluation of three selected drug courts in Tennessee that will describe each of the programs and the outcomes being achieved by these three drug court programs, as well as a set of recommendations for improving each of the three drug courts.
2. The development of a cost-benefit tool and template that can be used by Tennessee drug court programs for developing their own cost-benefit analyses.
3. The provision of training to state drug court administrators and drug court programs on the (1) key findings and improvement recommendations identified in the process and outcome evaluations and (2) the use of the cost-benefit tool and template.

Specifically, the purposes of this Statewide Drug Court Evaluation and Training Project were to:

- Determine whether the selected drug court programs have met their goals and objectives related to the implementation of services.
- Describe the specific benefits of each drug court program to participants, the community, and the criminal justice system.
- Identify perceived strengths and weaknesses of each selected drug court program from the perspectives of staff, participants and the evaluation team.
- Describe the major components of each drug court program, their effectiveness, and any changes over time that have occurred in the program.
- Examine the degree of coordination between agencies involved in each selected drug court program, and the support for the program from these agencies.
- Identify recommendations from staff and participants for improving each drug court program.
- Examine key drug court outcomes related to criminal recidivism, substance abuse, and other selected outcomes such as employment status.
- Compare outcomes for program participants and a similar group of untreated offenders.
- Determine the cost and benefits of each of the selected drug court programs.

In short, this statewide evaluation of drug courts in Tennessee focused on both "process" measures (e.g. program implementation) and program outcomes (e.g. criminal recidivism) in three selected drug court programs, and included collection of both qualitative and quantitative data. Additionally, budget data was compiled from each of the selected drug courts to be used in the development testing of the cost-benefit tool and template. The three selected drug court programs actively participated in evaluation efforts, and provided necessary data (e.g., program completion rates, participant satisfaction, drug test results, change in supervision status, budget, etc.) to support an impact evaluation of the program.

Selection Criteria for Eligibility to Participate in the Statewide Drug Court Evaluation and Training Project

The Tennessee Office of Criminal Justice Programs selected the three drug court programs to participate in the Statewide Drug Court Evaluation and Training Project using the following criteria:

- Being representative of the type, size and location of drug courts the Advisory Committee wants included.
- Having sufficient program experience (e.g., having at least five years' operation would allow the project to follow up for two years a cohort that has had a year's treatment, given two years of pre-treatment data plus one year of treatment).
- Having achieved certification status, so that the evaluation can provide feedback on the certification process by validating compliance with the "10 Key Components".
- Being willing to participate in the drug court program.
- Having an automated MIS that is capable of providing the data needed to complete the process and outcome phases of the evaluation. This assessment will be made based on the results of an online survey to be completed by each of the certified drug court programs in Tennessee.
- Having a list of offenders determined to be eligible for the drug court program but who otherwise opted out of the program.
- Ability to develop a list of offenders to be used as the comparison group for the outcome evaluation.
- History of submitting timely and accurate annual drug court reports.

Process Evaluation Methods and Procedures

The process evaluation consisted of a series of ongoing activities and reviews of selected program implementation issues. The ongoing process evaluation activities helped to define key characteristics of the selected drug court programs, program services, and the history of their program development and implementation. Review of the implementation issues provided an intensive examination of functional program areas (e.g., screening and assessment, treatment of special populations, etc.) The process evaluation activities enabled the evaluation to provide actionable information that addresses program improvement recommendations, adherence to the "10 Key Components," program process issues, data collection and other areas that were found needing improvement that might be helpful to all drug court programs in Tennessee. This information will help inform the training toward the end of the evaluation period.

Six Major Activities

Six major activities were conducted as part of the process evaluation: (1) online survey of drug court team, (2) interviews, (3) observation of drug court and treatment activities, (4) examination of program databases, forms, and other written materials, (5) description of the minimum data set of key program variables as described in Tennessee's annual reporting and certification processes, and (6) review of selected drug court program implementation issues that are identified as priorities by selected drug court staff. Each is described below:

Online Survey: Early on in the evaluation, all team members were invited to complete an online survey to assess their perceptions of the effectiveness of the different components of their drug court program and to offer recommendations for improving their program. Items on the survey corresponded with standards and indicators identified in *Defining Drug Courts: The Key Components*, published by the

Bureau of Justice Assistance in collaboration with the National Association of Drug Court Professionals (also referred to as the *ten key components of effective drug courts*).

Interviews: Semi-structured interviews were conducted to examine the perceived effectiveness of the different components of the selected drug court programs, and to obtain team and participant satisfaction with recommendations for improving the selected drug court programs from the perspectives of various different staff and program participants. Interviews were conducted with the presiding drug court judges, drug court coordinators, prosecutors, defense attorneys, probation officers, treatment coordinators and program staff, and active program participants.

Observation: Observation of key drug court activities were conducted to examine the quality and comprehensiveness of various program services, and to identify potential areas for improvement. Key program activities observed included drug court status hearings, drug court team staffings, treatment groups within each phase of the selected programs, individual counseling sessions, and intake/assessment interviews, and other primary treatment activities and ancillary services provided by each selected program.

Review of Program Materials: Our evaluation also included an ongoing review of key program materials and records, including clinical and supervision records, status hearing reports, MIS database information, and written materials describing the selected drug court programs. These activities helped to identify the type of information routinely compiled for drug court participants and used by the individual drug court programs in monitoring and evaluation reports. Written materials were reviewed including the histories of the selected programs, listing of sanctions, drug testing protocols, therapy topics, schedule, education topics/schedules, case management and ancillary services, residential treatment services, description of MIS software and systems, program graduate surveys, intake forms, and minutes from any advisory board/committee meetings.

Examination of Program Elements and Implementation Issues

Several elements of each of the three selected drug court programs were examined through interviews, observation, and/or review of program materials. These included the following:

- The target population of the drug court program, including demographic and criminal justice characteristics, and admission and exclusion criteria.
- Screening and assessment approaches, including instruments, staffing, and screening procedures;
- Drug testing procedures.
- Program phases and structure.
- Treatment services and resources.
- Ancillary services, including mental health treatment, medical care, housing, vocational and financial services, parenting classes, and other services.
- Judicial supervision, including the frequency of status hearings, and procedures for status hearings;
- Sanctions and incentives used by the drug court.
- Management information system (MIS) and data coordination activities among drug court staff;
- Termination/expulsion criteria, and consequences for unsuccessful termination.
- Graduation procedures.

- Composition of the drug court team and program coordination, including roles and responsibilities of key team members, affiliated agencies linked with the drug court, and the management and organizational structure.
- Key program components were also assessed to determine whether these components were implemented as intended, to identify key changes, whether the program is achieving stated goals and objectives, any problems identified during implementation, and potential strategies to address these problems.

Outcome Evaluation Methods and Procedures

The outcome evaluation examined the extent to which involvement in the selected drug court programs reduces recidivism and substance use; whether program participants are adequately retained in treatment; and the relative benefits and costs of operating each of the selected programs.

Data compiled for the evaluation included demographic and background information (age, race/ethnicity, gender, marital status, education level, employment status, prior arrests). program/program outcome information (legal status at admission, dates of admission and discharge, drug test results, program phase level at time of discharge, date and type of new arrests while in the drug court program, and discharge status).

The following key questions were addressed by the outcome evaluation to the extent that data were available either in the MIS of the individual drug court program or through coordination with the Tennessee Bureau of Investigation:

- What proportion of drug court participants were arrested prior to graduation from the selected programs, during which phases of the programs, and one and two years after discharge from the selected programs?
- How did arrest rates for program participants compare to arrest rates for a similar group of untreated offenders (the comparison group for each selected program)?
- What were the types of offenses for which drug court participants and comparison group participants were arrested during the one and two-year follow-up periods?
- How did the arrest rates and types of arrest compare with the arrest profiles for the participant groups and comparison groups in the two years prior to admission to the drug court programs?
- What was the time to first arrest for the drug court participants and the comparison groups?
- What numbers and types of technical violations were received by program participants?
- What proportion and number of participants successfully completed each drug court program?
- What proportion of drug court participants remained employed, utilized aftercare services, and experienced reunification with their families?
- Were the costs of the selected drug court programs comparable to those of traditional court processing? Were additional costs, if any, justified by the cost savings offsets related to criminal processing, and other areas?
- What program and/or demographic factors contribute to successful outcomes, such as graduation from the program?

Rigorous procedures were followed to protect the confidentiality of drug court participants who were examined in the study. Project staff carefully adhered to federal confidentiality laws and regulations and other applicable laws and regulations governing the confidentiality of information obtained from research subjects (DHHS 42 C.F.R. Part 2).

Chapter 5

Knox County Drug Court

Description of the Knox County Drug Court

Brief History of the Knox County Drug Court

Planning for the Metropolitan Drug Court began in 1997. The Metropolitan Drug Commission (MDC) headed the planning process. The MDC is a non-profit organization with a mission of drug prevention and to educate the public on issues relating to alcohol and drugs. A Drug Court Planning Committee was formed. Subcommittees were also formed from the planning committee members, each subcommittee having an interconnected but separate piece of the drug court planning and implementation process. The subcommittees were (1) Treatment, (2) Admissions Monitoring, (3) Operations, and (4) Executive.

Ron Hanaver, the current Drug Court Coordinator, was a member of the planning committee and each of the subcommittees.

Planning committee members visited drug courts in Nashville, TN, Lexington, KY, Louisville, KY, and Atlanta, GA. They observed drug court proceedings and spoke with drug court judges and other personnel to gain a better understanding of the purpose and functioning of drug courts. The Drug Court Clearinghouse at American University and the Office of Justice Programs were used extensively for planning and implementation information.

An Office of Justice Programs grant was written in 1998 and a 2-year implementation grant was awarded later that year. On February 1, 1999 the Metropolitan Drug Court began accepting referrals with misdemeanor charges. The original target population was non-violent, addicted adults with misdemeanor convictions in Knox County.

On July 1, 2000, the Metropolitan Drug Court underwent three major changes: (1) Its name was changed to the Knox County Drug Court; (2) It expanded its target population to include non-violent felony convictions in Knox County; and (3) It spun off from the MDC to become part of Knox County government. On July 1, 2000, the Knox County Drug Court received its first Edward Byrne Memorial grant through the Tennessee Office of Criminal Justice Programs. Knox County government also began funding the drug court program. Knox County government ceased providing funding for the Knox County Drug Court in 2002. Since that time the drug court has relied solely on grant funding and participant fees to fund the drug court program.

Also in 2002, the Knox County Drug Court received a SAMHSA Center for Substance Abuse Treatment three-year grant to expand its case management capability. In 2004, the Knox County Drug Court was one of four urban counties to receive on-going funding for residential treatment services. In that same year, the Knox County Drug Court received funding from the Bureau of Justice Assistance to treat the special needs of women in its program. It also received funding from the Tennessee Office of Criminal Justice Programs to identify and admit individuals prior to conviction.

In 2009, the Knox County Drug Court received an ARRA grant to allow the Knox County Drug Court office to have an increased presence in regular Criminal Court and General Sessions Court to more quickly

identify potential referrals to the drug court program. However, due to statewide funding reductions, the Knox County Drug Court program also lost a Senior Case Manager position.

In 2004, the Knox County Drug Court adopted the Matrix Model as its treatment modality. The Matrix Model is an evidence-based treatment curriculum that is still the core treatment model for the Knox County Drug Court program.

Population Movement

As of June 30, 2010, the Knox County Drug Court had admitted 506 persons since the inception of the program. Four-hundred and seventy-six persons had been released, 120 of them as successful graduates.

Population Movement – Inception to June 30, 2010

	Number
Funded Capacity	80
Admitted/Enrolled	506
Graduated	120
Terminated	161
Administratively Withdrawn	195
Ending Population as of June 30, 2010	30

For the 2007-08 fiscal year, the population movement data indicated the following:

Population Movement – Fiscal Year 2007-08

	Number
Funded Capacity	80
Admitted/Enrolled	52
Graduated	14
Terminated	18
Administratively Withdrawn	22
Ending Population as of June 30, 2008	37

Mission of the Knox County Drug Court Program

The mission of the Knox County Drug Court is to promote public safety and health by providing aggressive treatment and supervision to citizens with legal and substance abuse problems through partnerships between local government, law enforcement, the legal community and other community agencies in a non-adversarial process.

The goals of the Knox County Drug Court are as follows:

1. To fairly and justly adjudicate appropriate offenses that have been committed by individuals who are addicted to substances.
2. Increase levels of abstinence and sobriety among program participants.
3. To reduce drug-related criminal activities among program participants.
4. To reduce court crowding.
5. To reduce incarceration levels in the Knox County detention facilities.

Type of Drug Court

According to the information contained in the annual reports the Knox County Drug Court files with the Tennessee Office of Criminal Justice Programs, the Knox County Drug Court considers itself to be an adult drug court that serves both misdemeanants and felons, including probation violators, with a presenting problems of substance abuse and alcohol abuse. The Knox County Drug Court is a post-plea drug court program in that, the candidate must admit to the crime(s) charged in order to be admitted to the program. The Knox County Drug Court also serves persons with co-occurring disorders.

Target Population

The target population for the Knox County Drug Court is adults, 18 years of age and older, who have current legal charges in Knox County, are chemically dependent, nonviolent offenders, and who show a willingness to participate in this voluntary program. The program is accessible to all individuals who meet the above criteria regardless of race, religion, sex, ethnic origin, sexual preference, marital status, age, or physical and/or mental disability. In the event that a participant is not financially able to pay drug court fees, the judge may waive the payment or the coordinator may defer the payment, depending upon potential for future ability to pay.

Specific Admission Criteria: A person is legally eligible for participation in the Knox County Drug Court if:

- They are a mentally stable, and
- They have a substance dependence as determined by the results of an Addiction Severity Index interview, the ASAM PPC2 criteria and the DSM-IV; and
- They have been charged with, and/or convicted of, an offense that does not involve violence; and,
- They have no substantial history of drug sales; and,
- They agree to voluntarily participate in drug court.

Disqualifiers: A person is legally ineligible for participation in the Knox County if they are currently charged with, or have been convicted of, an offense, during the course of which the individual carried, possessed, or used a firearm or other dangerous weapon; or, during the commission of the alleged offense there occurred the use of force against the person of another; or, during the commission of the alleged offense there occurred the death of, or serious bodily injury to any person; or, any person who has one or more prior convictions of a felony involving violence or the use, or attempted use of force against a person with the intent to cause death or serious bodily harm.

Costs/Fees of the Drug Court Program

There are a number of costs/fees that are incurred as part of the drug court program. The applicant/participant is responsible for the payment of these costs/fees. The drug court team will consider the participation, on a case-by-case basis, of any person who can demonstrate they are unable to pay the costs/fees of the program.

The costs/fees of the drug court program include, but are not limited to, the following:

- Admission Fee - \$300.00.
- Urinalysis Fee - \$1.75 per drug tested (Instant Testing Instrument)
- Lab Confirmation of Positive Urinalysis – \$13.00 - \$24.00
- Patch fee \$30.00
- Breathalyzer Fee - \$1.00
- Residency Fees – 100.00 per week

Knox County Demographics

Population: According to U. S. Census data (American Community Survey, 2005-2009), in 2005-2009 Knox County had a total population of 424,000 - 218,000 (51 percent) females and 206,000 (49 percent) males. The median age was 37 years. Twenty-two percent of the population was under 18 years and 13 percent was 65 years and older.

Race and Ethnicity: For people reporting one race alone, 87 percent was White; 9 percent was Black or African American; less than 0.5 percent was American Indian and Alaska Native; 2 percent was Asian; less than 0.5 percent was Native Hawaiian and Other Pacific Islander and 1 percent was some other race. Two percent reported two or more races. Two percent of the people in Knox County were Hispanic. Eighty-six percent of the people in Knox County were White non-Hispanic. People of Hispanic origin may be of any race.

Among people at least five years old living in Knox County in 2005-2009, 5 percent spoke a language other than English at home. Of those speaking a language other than English at home, 39 percent spoke Spanish and 61 percent spoke some other language. 40 percent reported that they did not speak English "very well."

Income: The median income of households in Knox County was \$46,233. Eighty percent of the households received earnings and 18 percent received retirement income other than Social Security. Twenty-six percent of the households received Social Security. The average income from Social Security was \$15,196. These income sources are not mutually exclusive; that is, some households received income from more than one source.

Poverty: In 2005-2009, 15 percent of people were in poverty. Seventeen percent of related children under 18 were below the poverty level, compared with 9 percent of people 65 years old and over. Ten percent of all families and 37 percent of families with a female householder and no husband present had incomes below the poverty level.

Education: In 2005-2009, 88 percent of people 25 years and over had at least graduated from high school and 33 percent had a bachelor's degree or higher. Twelve percent were dropouts; they were not enrolled in school and had not graduated from high school.

The total school enrollment in Knox County was 113,000 in 2005-2009. Nursery school and kindergarten enrollment was 11,000 and elementary or high school enrollment was 60,000 children. College or graduate school enrollment was 41,000.

Mobility: In 2005-2009, 82 percent of the people at least one year old living in Knox County were living in the same residence one year earlier; 11 percent had moved during the past year from another residence in the same county, 3 percent from another county in the same state, 3 percent from another state, and less than 0.5 percent from abroad.

The Drug Court Team

The Knox County Drug Court team is composed of:

- The Drug Court Judge who oversees the court and plays an active role in the treatment progress, including frequently reviewing the treatment progress, responding to each participant's positive efforts as well as to noncompliant behavior, and making final determinations on all actions by the court.

- The Drug Court Coordinator who oversees the day-to-day administration of the drug court including employee management, employee reviews, oversee psychosocial assessment administration, oversee case management and utilization review and coordinate all MIS activities.
- The Drug Court Case Manager II(s) who track the participant's progress in both the therapeutic programs and the court activities and work closely with the participant to see that program expectations are fulfilled. Case Manager IIs also provide ongoing assessment of participant progress and needs, coordinate referrals to services in addition to primary treatment, provide structure and support for individuals who typically have difficulty using services even when they are available, and ensures communication between the court and various service providers.
- The Drug Court Case Manager I(s) who oversee the collection of urine samples and administer breathalyzer tests, and conduct collateral monitoring checks.
- Representatives from State Probation and County Probation.
- Designated representatives of other agencies who have agreed to partner with drug court and who have contributed significant manpower and resources to drug court participants.

Phase Structure

The Knox County Drug Court program is a 15 month-long program. The program can be completed in as few of 9 months, depending on the participants' progress. The program is divided into three phases. According to the drug court model, requirements are typically lessened over time by phase as a participant progresses through the program. For example, during Phase I, participants must appear in court every week. They also undergo a minimum of three random drug tests weekly. During Phase I, participants must also attend 3-8 hours of treatment per week. Once the participant progresses to Phase III, they are typically required to attend court hearings only once per month. They also undergo random drug testing once per week, and attend two hours of treatment each week.

Once admitted into the drug court program, the case proceeds through the program with participants in Phase I appearing in court week. Participants in Phase II appear in court once every other week unless otherwise advised by the Drug Court Judge and participants in Phase III appear in court once every month. Once Phase III has been successfully completed, the participant graduates from the drug court program and his/her disposition is entered consistent with the agreement between the participant's counsel and the state, or, in the case of the unrepresented participant, between the participant and the state.

Initial placement of participants is determined by the results of the completed assessment using the American Society of Addiction Medicine Patient Placement Criteria. All participants must successfully complete the requirements of each phase before moving on to the next phase. Further, all participants enter in Phase I. Listed below are minimum requirements for each participant for each phase. These minimum requirements are also listed in each participant's Program Handbook. Any addition to these minimum requirements is addressed on participant's treatment plan. Participants complete Orientation classes which describe the phase requirements and are given reminders of program requirements throughout the treatment process with formal reviews given each time a participant applies to advance to the next phase. As participants advance through the phases the intensity of their participation in drug court is reduced. Specifically, the number of groups and individual sessions is reduced, number of required drug screens is reduced, the frequency of drug court attendance is reduced, and, if on enhanced supervision, their supervision may be reduced by the Drug Court Judge.

Program Requirements

The Knox County Drug Court program is an intensive program of judicial supervision, treatment and education, drug testing, probation supervision, and case management. As mentioned above the intensity or dosage of such requirements vary by phase.

Judicial Supervision: Throughout the drug court program participants are required to appear before the Drug Court Judge to have their progress and compliance reviewed. Prior to each court hearing, the drug court team meets to discuss each case in detail and to provide the judge with the most updated information regarding the participant's progress or lack of progress in the program. In Phase I, participants are required to appear before the Knox County Drug Court Judge once a week to report on their progress and receive sanctions and/or incentives. When participants are allowed to advance to Phase II, they are required to appear before the Drug Court Judge twice a month. In Phase III, participants meet with the judge once a month.

Treatment and Education:

Phase I: During Phase I, the treatment program consists of between 3 and 8 hours of group sessions and one hour of individual session per week. Depending on ASAM criteria, the participant is placed in Intensive Outpatient Treatment (IOP) or Partial Hospital Treatment (PHT). In addition, participants are required to attend three (3) self-help support groups such as AA/NA, and one (1) hour of individual counseling per week with a therapist. The length of time spent in Phase I is based on the specific needs of each participant and how quickly each participant accomplishes his or her individual goals and objectives for Phase I; but participants are expected to complete Phase I requirements in approximately 10 to 12 weeks. If assessed as needed, participants may also be required to attend family group after completing the 12-week Matrix Model Family Group sessions. **The clinical goal for Phase I** is for the participant to admit the effects of drug abuse and gain acceptance of the need for lifestyle changes. Individual counseling sessions begin with a weekly case manager session, then after two weeks the participant continues weekly individual sessions with the treatment therapist. One of the Orientation sessions covers the Program Handbook in detail and the participant takes a post-test after each group.

Phase II: During Phase II, participants attend group and educational sessions for at least 5 hours per week. During this phase, they must make sufficient progress toward completing goals and objectives in their treatment plan, complete Steps 4 & 5 activities, and complete a Relapse Prevention Workbook. They must also complete all 16 weeks of family group sessions in order to advance to the social support group. **The clinical goal for Phase II** is to develop the participant's life skills to provide a mechanism for living a drug free lifestyle. In Phase II, the participant is expected to attend five hours of outpatient treatment each week; one hour of this will be devoted to mentoring. Individual counseling sessions are conducted twice a month. Phase II lasts approximately 10 to 12, depending on each participant's progress.

Phase III: During this last phase, participants are required to attend outpatient treatment services for three hours of group per week; one hour of this will be devoted to mentoring. Individual counseling may or may not be continued by the drug court treatment team depending upon individual participant needs. Phase III participants also attend support group sessions for two hours per week. Phase III may last between 10 and twenty (20) weeks, depending on each participant's progress. Participants are also required to be a co-leader in at least two Phase I and II groups. Co-leaders must commit to the same group each week – every Monday (Early Recovery) – or – every Friday (Relapse Prevention Group). They also attend individual counseling sessions as needed. **The clinical goal in Phase III** is to teach the participant how to internalize recovery principles and implement them into a recovery-centered

lifestyle. This process includes identifying indicators that the participant has established sufficient family and/or social support to maintain this recovery-centered lifestyle without the help of drug court treatment program.

Drug Testing: Drug testing is an important part of all drug court programs. It is a way to determine abstinence from alcohol and substance use on a real-time basis. During Phase I, participants must submit to at least three (3) random urine screens and/or random breathalyzer tests (per week. In Phase II, the participants are subjected to at least two (2) random urine screens and/or breathalyzer tests per week. During Phase III, participants are tested at least once each week.

Support Groups: Attendance at community support groups (AA, NA, etc.) is an important element of the Knox County Drug Court program. Such meetings are a base for continuing recovery after graduating from the drug court program. In Phase I participants are required to attend three support group meetings each week. In Phases II and III, they are required to attend two support group meetings each week.

Supervision and Case Management:

During Phase I, participants are required to meet with their case manager at least twice. In Phases II and III, they meet with their case manager as needed, or as directed by their counselor or case manager. Throughout the length of the drug court program, participants meet with their probation officer at least once monthly, depending on their level of supervision.

Fines and Fees: Throughout the Knox County Drug Court program, participants are required to pay their program fee and drug testing fees, as well as the court fees and fines and restitution. In order to advance to the next phase, participants must be current on their court fees, fines and restitution, and be within \$10 of being current on the drug testing fees. By the time they are in Phase II they should have paid the entire \$300 drug court fee.

Community Service: Throughout the drug court program, participants are required to provide two hours a week performing community service.

Phase I: complete two (2) hours per week of community service

Other Requirements:

Employment: Throughout the drug court program, participants are required to maintain full-time employment. If not working full-time, participants must be seeking employment and/or participate in Employment/Education Tract in addition to meeting all phase treatment requirements)

Collateral Monitoring: During Phase I there is also one random collateral monitoring check with employers or neighbors each week. This can include employment verification and weekly checks for arrest records or other interactions with the police or sheriff's department. These collateral monitoring contacts are reduced to twice a month during Phase II and monthly during Phase III.

Graduation Requirements

Graduation eligibility includes completion of all goals and objectives on the treatment plan, co-leading all assigned groups, completion of Steps 6-12, negative drug screens for 90 days, have a day-time/full-time (32 to 48 hours per week) job, peer review, payment of court costs/fines, restitution, and completion of the Graduation Application Form. Graduation cannot occur within 30 days of other significant changes to services (such as reductions in probation supervision)

It is estimated that the Knox County Drug Court program will require 9-18 months to complete. All treatment levels and all drug court phases must be completed to graduate. Particular focus is on the review of the treatment plan(s). All core areas of the plan must indicate significant progress to the satisfaction of the drug court team. The participant's monitoring reports must also show a minimum of ninety days of negative urine and breathalyzer analysis.

Graduation requirements include:

- complete steps 6-12 paperwork and presented to peers,
- meet all treatment plan goals,
- pay all drug screen fees,
- current on other court fees and fines/restitution,
- have at least three (3) family/support individual sessions and have representation at the monthly family/support educational groups during Phase III,
- no positive or missed drug screens in past 90 days,
- no new convictions in past thirty (30) days,
- attend at least two (2) AA/NA meetings per week,
- attend groups and individual sessions,
- obtain GED (if participant as not completed formal schooling),
- maintain full-time job (unless disabled or going to school full-time),
- attend drug court,
- attend probation appointments,
- complete all community service,
- complete graduation application,
- mentor new participant(s) in weekly "Mentoring Hour", and meet with case manager to review graduation application.

Expulsion from the Program

Every effort is made to avoid expulsions from the Knox County Drug Court program. Unfortunately, expulsions are a necessary component to maintain the integrity of the drug court program. Only the Knox County Drug Court Judge may expel someone from the program. The following actions may result in expulsion:

- Three or more dirty urine/breathalyzer screens in Phase I;
- Repeated positive screens in Phases II and III;
- The individual's arrest during the course of the drug court program (except minor traffic violations);
- Repeated failure to attend drug court hearings, group sessions, community service assignments, or therapeutic services when scheduled;
- Disruptive behavior in court or repeated disruptive behavior in treatment,
- Threats of violence or violence to others, or
- Failure to respond to therapeutic interventions (treatment).

Any person removed from the Knox County Drug Court program will have their case(s) returned to the regular docket of General Sessions Court and/or Criminal Court. None of the records or information collected during drug court will be released or otherwise disclosed to any person on the regular docket without the written consent of the individual. The individual may also request that his or her case(s) be transferred off the regular docket of any judge who was previously involved in that person's drug court team.

Program Components

Screening and Assessment: Arrest is often a traumatic event in a person's life, and creates an immediate crisis and opportunity to bring substance abusing behavior into the open, making denial difficult (National Association of Drug Court Professionals, 1997). The period following an arrest or probation violation provides drug courts with an important point for intervening productively to engage individuals in court-monitored substance abuse treatment. Screening and assessment are critical elements in this process, and help to insure that individuals are identified quickly and routed to treatment in a timely manner.

In the case of the Knox County Drug Court program, the candidate completes the application form. The application form includes such information as name, address, race, gender, and other data such as emergency contact, aliases, and next court date, etc.. The candidate and defense attorney read and sign the release of confidential information for allowing the Drug Court and defense attorney to speak to each other about the candidate. At this same time, the Referral Form is submitted to the Office of the District Attorney General. The Office of the District Attorney General reviews the candidate's arrest history from NCIC and Knox County's JIMS (the Justice Information Management System).

Legal Screening: Following the receipt of an initial referral, the Office of the District Attorney General, in all cases, conducts a DAG review. This review is usually completed within two working days. The District Attorney General's Office has independent authority to reject a pre-judgment applicant's request for acceptance into the drug court.

Substance Abuse Screening: After the Office of the District Attorney General completes the DAG review and files all necessary legal documents, and determines that the applicant is a suitable person (non-violent offender as defined in TCA 16-22-103 (4) et.seq) to participate in drug court, the Drug Court Case Manager then proceeds to administer the SASSI and conduct an in-depth assessment of the applicant's substance dependency. This assessment is intended to further screen the candidate, determine severity of addiction, type and level of services needed and to match area resources to meet these needs. The result of the assessment and recommendations of the Case Manager, are then submitted to the Knox County Drug Court Coordinator as soon as practical. At this screening, the candidate receives a handbook outlining program requirements and the relative merits of participating in drug court. Responses to compliance and non-compliance are outlined in this document and reviewed verbally before admission. Additionally, a listing of sanctions and incentives is posted in the Drug Court Office bulletin board for candidates and participants to review.

After completion of the referral paperwork, the DAG review, the applicant's substance dependence assessment, and the results of the applicant's substance dependence assessment are reviewed by the Drug Court Team where a final recommendation regarding admission to the drug court program is made. The recommendations are then forwarded to the appropriate General Sessions or Criminal Court judge with jurisdiction over that case for the final decision on admission to the drug court program.

The results of the assessment and evaluation, along with all supporting documentation, are also provided directly to the client's counsel or directly to the unrepresented person who are advised regarding the Knox County Drug Court personnel's recommendation for the individual's suitability for participation in the program. In the event that the individual is not accepted into the program, the individual and his/her counsel are immediately notified. Individuals who are admitted to drug court are notified of the date of their first appearance in court by the staff of the Knox County Drug Court.

Clinical Assessment: In-depth clinical assessments are scheduled by the Knox County Drug Court Case Manager(s). Case Managers are trained in interviewing, administering of the ASI, SASSI, TCU CEST, and NEEDS assessment, and interpreting ASAM PPC2 before they can conduct in-depth clinical assessments.

The clinical evaluation consists of a bio-psychosocial assessment of the applicant, to include at a minimum, the Addiction Severity Index (ASI) and the Substance Abuse Subtle Screening Inventory (SASSI). Preliminary assessment of the results is based on ASAM PPCII (American Society Addiction Medicine Patient Placement Criteria II) and the Diagnostic Statistical Manual of Mental Disorders, fourth edition (DSM-IV). An individual's suitability for admission into the drug court program is discussed during the review process with the case manager. An initial treatment plan is then developed at that time. Admission paperwork, including release of information forms and participation agreements, is presented to the drug court team at the weekly drug court team meeting. Applicants may be admitted to the Knox County Drug Court Program on his or her next scheduled court appearance following the drug court team meeting. At this court appearance, participants are informed that they are expected to begin participating in treatment immediately upon admission.

Admission to the Drug Court Program

Referrals: Referral paperwork consists of the application for admission documentation which asks for data such as the applicant's DOB, race, gender, name of close relatives; the referral form which is completed by the DAG for non-violent offender identification, and the defense attorney's release of confidential information form.

Referrals for drug court participation originate in any of the following ways:

- A referral may be submitted by Counsel for the applicant/client;
- The Knox County Public Defender's Office, after reviewing the daily arrest reports, may determine that an individual will benefit from placement in the Knox County Drug Court and submit a referral to the drug court. A copy of this referral will be immediately forwarded by the drug court to the Office and the District Attorney General.
- The State Probation and County Probation officers may refer a person to drug court by submitting the referral paperwork to the Knox County Drug Court. A copy of this referral will be forwarded immediately by the drug court staff to the DAG for a DAG review.
- The staff of the Knox County Drug Court, after reviewing the daily arrest reports, may determine that an individual will benefit from drug court and generate a referral that is immediately forwarded to the DAG so they may perform a DAG Review;
- The staff of the DAG's Office may likewise review the daily arrest reports and conclude that an individual will benefit from drug court and conduct a DAG Review. A copy of their review would then be submitted to the Knox County Drug Court and the individual's attorney;
- An un-represented person may request, in writing, to the Coordinator of the Knox County Drug Court, that he or she be considered for admission into the program. This self-referral will be forwarded immediately by the drug court to the DAG for a DAG review; or,
- Any Knox County Criminal Court Judge or General Sessions Court Judge may refer a person to drug court by submitting a referral to the Knox County Drug Court. A copy of this referral will be forwarded immediately by the drug court to the DAG for a DAG review.

All employees and treatment providers of the Knox County Drug Court recognize and honor the sanctity of the attorney-client relationship. Consequently, Knox County Drug Court personnel do not contact represented persons without the express written consent of the individual's counsel. In the event Knox County Drug Court staff receives a written request by an unrepresented individual seeking admission

into the drug court program, the staff verifies that the individual has waived his or her right to counsel in writing and obtain a copy of that waiver. Only at that time does the Knox County Drug Court staff have direct contact with the applicant. Following admission into the drug court program, the participant and his or her counsel must execute a waiver allowing drug court personnel and treatment providers to contact the participant without notice to their attorney.

A referral may be made to the Knox County Drug Court at any time. It is the hope of the Knox County Drug Court that the referral will be made as soon as possible after arrest or at the time of the offender's initial court appearance. Early entry into treatment increases the likelihood of success. A copy of each referral is sent to the Office of the District Attorney General.

Pre-Judgment Referrals: Individuals whose cases are pending, pre-judgment, in any Knox County Criminal Court or General Sessions Court, may be referred for participation in Knox County Drug Court by any Criminal Court Judge, Sessions Court Judge, the Office of the District Attorney General, District Public Defenders Office, private defense counsel, Knox County Drug Court or by an unrepresented person's own request.

The District Attorney General's Office, the Drug Court Judges, and the drug court team each retain independent authority to reject a pre-judgment applicant's request for acceptance into the drug court.

Post-Judgment Referrals: Persons, whose cases are pending in the Knox County General Sessions Court or Criminal Courts, post-judgment, may be referred for participation in Knox County Drug Court by any Criminal Court Judge, Sessions Court Judge, the Office of the District Attorney General, District Public Defenders Office, private defense counsel, County and State Probation Offices, or by an unrepresented individual.

Persons who are before the Criminal Court or Knox County General Sessions Court on a violation of probation are not be contacted directly by Knox County Drug Court personnel until drug court personnel first contacts the attorney who represented the individual on the underlying charge to inquire about the possibility of drug court participation for his or her client. However, in those rare circumstances where a person has been arrested for a violation of probation and are unrepresented, the Knox County Drug Court personnel may contact that unrepresented individual, in writing only, limiting the exchange of information to advising them of their eligibility to participate in the drug court.

Admission to the Drug Court Program: Admission to the Knox County Drug Court is accomplished in the following way:

- Referral to the Knox County Drug Court (this may include a self-referral).
- The Defense Counsel advises applicant (candidate) of his/her rights, signs a release form, and through this counsel, screens candidates for eligibility .
- A copy of the referral is sent to the District Attorney General (DAG).
- The DAG will conduct a DAG review.
- Applicants who are not deemed legally ineligible or otherwise excluded by the DAG review through their screening process, will undergo a screening and assessment.

The drug court team reviews the referral paperwork, the DAG review, the screening and the assessment. The Drug Court Team makes a final determination regarding admission to the Drug Court Program.

Individuals recommended for admission to drug court are notified of the date of their first appearance in court by the staff of the Knox County Drug Court. If an individual is represented, counsel is also notified of all court dates.

The Drug Court Judge informs the candidate in open court of the court's decision upon accepting the candidate into drug court including outcomes of completing and not completing drug court.

Current Drug Court Schedule

The current Knox County Drug Court schedule can be seen in the following table:

Current Knox County Drug Court Schedule

Activity	Monday	Tuesday	Wednesday	Thursday	Friday
Court Hearing			5:00 pm		
Staffing			4:30 pm		
Drug Testing	5:30 – 7:00 pm	5:30 – 7:00 pm	5:30 – 7:00 pm	5:30 – 7:00 pm	5:30 – 7:00 pm
Treatment	7:00 – 8:30 pm (Early Recovery) 7:00 – 8:30 pm (Relapse Prevention)	5:30 – 7:00 pm (AA.NA Meeting)	7:00 – 8:30 pm (Family Group) 7:00 – 8:30 pm (Social Support Group)	5:30 – 7:00 pm (Mentoring/Stepwork)	7:00 – 8:30 pm (Early Recovery) 7:00 – 8:30 pm (Relapse Prevention)
Employment/Education Track	9:00am – Noon	9:00am – Noon	9:00am – Noon	9:00am – Noon	9:00am – Noon

Substance Abuse Treatment Program

The Knox County Drug Court provides a range of services within the drug court services. These services include residential treatment, transitional housing, half-way house, intensive outpatient treatment, outpatient treatment, drug screening, and case management. Nine years of drug court assessments show that the majority of all drug court participants have needed residential or intensive outpatient treatment at admission. A small number (less than 1%) of participants have needed medical detoxification which they have received at a partnering agency. When assessment results determine that the candidate needs medical detoxification, that person is referred to an area treatment agency, which is qualified to provide detoxification services. Once released from detoxification services, the participant then enters the drug court in Phase I. Drug court participants have access to other treatment and ancillary resources on an as –available basis through drug court partners.

Treatment Continuum and Plan: The Drug Court Coordinator (or his designee) creates the Initial Treatment Plan (ITP) prior to the participant's first appearance in drug court. The ITP is based on the initial clinical assessment. The results of this assessment and the ITP are presented to the participant and the participant's legal counsel. This is done to determine the participant's willingness to meet the Knox County Drug Court requirements. If the participant wishes to enter the program, the ITP and assessment results are forwarded to the Knox County Drug Court Judge and the drug court team.

An individualized Master Treatment Plan (MTP) is requested from the primary therapist within the participant's first 30 days in the drug court program. A Revised Treatment Plans (RTP) is requested from the primary therapist at least every 90 days or when needed. Participants are screened at these times using ASAM PPC2 to determine treatment level appropriateness and effectiveness. The ASAM PPC2 identifies strengths/weaknesses and specific issues in 6 dimensions of the participant's life which can affect on-going sobriety. Changes to treatment are based on outcomes. This information is passed on to the drug court team at the next drug court team meeting.

The majority of the Knox County Drug Court participants receive substance abuse treatment through the Knox County Drug Court staff. These staff members include counselors and case managers. In 2004 the Knox County Drug Court adopted the Matrix model as its core treatment modality. The Matrix Model is a multi-element package of therapeutic strategies that complement each other and combine to produce an integrated outpatient treatment experience for the participant. It is a set of evidence-based practices that are delivered in a clinically coordinated manner. Many of the treatment strategies within the Matrix Model are derived from clinical research literature, including cognitive behavioral therapy, research on relapse prevention, motivational interviewing strategies, psycho-educational information and 12-Step program involvement.

Treatment is delivered in a 16-week intensive outpatient program primarily in structured group sessions targeting the skills needed in early recovery and for relapse prevention. There is also a 12-week family and participant education group series and induction into an ongoing weekly social support group for continuing care. Social support groups (12-step) meetings are an important supplement to intensive treatment and a continuing source of positive emotional and social support.

However, a number of the participants need even more intensive treatment such as residential treatment. A crucial component of the Knox County Drug Court program is the successful referral of the participants to treatment programs/modalities best suited to deal with their problems. While in these residential treatment programs the Knox County Drug Court Team monitors the progress of each participant. The team makes the decisions regarding the participant's admission into the appropriate treatment level of the program. Direct service providers are licensed where required and/or have education, training, and ongoing clinical supervision provided to treatment staff.

Case Management and Supervision

Supervision is a crucial link between participants and the drug court. Participants are monitored through ongoing random drug and alcohol testing, and are also subjected to random home visits by program officers. Case management is another means by which participants are monitored. Additional assessments and referrals are completed addressing life skills issues. Further, ongoing review is provided to verify completion of all drug court orders and program requirements.

Probation Supervision: The Tennessee Probation and Parole Board probation officers assigned to the drug court program provides community supervision and participate fully as a drug court team members. Offender behavior and administrative and program compliance is monitored through regularly scheduled office visits, as well as any necessary home visits. Probation requirements are based on the level of supervision deemed needed for public safety and offender accountability.

Case Management: The Knox County Drug Court Case Managers track the participants and keep the Drug Court Judge informed of the participant's progress. In Phase I & II, the drug court team meets each week to review the progress of the participant. In Phase III, the drug court team reviews occur once a

month. Case management services also include linking with other services and programs such as housing, education and vocational training, legal services, money management, cognitive-behavioral therapy, anger management, transitional housing, social and athletic activities, and medication or other techniques to promote relaxation and self-control , as well as utilization review and management. The Case managers are responsible for ensuring that all phase requirements have been completed prior to a participant applying for advancement to the next phase.

Use of Ancillary Community Resources

The treatment services at the drug court office are accessible for persons with physical disabilities and are on public transportation lines. Accommodations have been made for those not fluent in English. Specifically in the event that a participant is not fluent in English there are treatment services with interpreters at the Helen Ross McNabb program for individuals with limited English proficiency, and the courts have interpreters.

Additionally, through the Knox County Drug Court’s partnership with child family services Inc., its Great Starts program has accommodations for individuals needing child care. Finally, the drug court staff understands and is sensitive to the fact that some participants have limited literacy. In these cases, staff work more closely in individual sessions with these participants and offer referrals to adult education for literacy classes and GED preparation and testing.

All treatment providers enter into a contractual agreement with the Knox County Drug Court specifying the roles of the treatment providers. These contracts also address other issues, such as confidentiality, maintenance and destruction of participant’s records, etc.

Ancillary Community Services: Due to the multiple psychosocial problems faced by drug court participants, effective treatment includes not only outpatient and residential substance abuse services, but a range of other services related to health care, mental health care, and other social needs and supports.

Ancillary Community Resources: Specialty care programs (not directly related to ATOD) are available to drug court participants if the treatment team determines that the participant requires these services to assist their recover. These services may be ordered during any level of the program.

Employment/Education Track (Day Program): The Knox County Drug Court also has an Employment/Education Track that parallels the treatment provided in the various phases. Education/employment services are provided in the daytime while the treatment is provided in the evening.

Participants may access the day programming regardless of what phase they are in. The day programming or “Employment/Education Track” is designed to assist participants gain employment, complete education, and budget their finances.

In addition to the phase requirements, participants receiving these services will also be required to comply with the following:

Employment/Education Track Minimum Requirements:

Length:	After participant completes minimum classes and gets full-time job as evidenced by paycheck stubs (may require release and varification from
---------	--

	employer)
Classes:	Attend all day program classes until released to seek employment.
Team Building	As scheduled

Participants meeting the eligibility criteria for the Employment/Education Track services are required to complete the requirements in the above table as well as their phase requirements in order to be eligible to advance through the program. They focus on their recovery and on seeking employment. Participants are supervised during the day by Case Manager I's and attend treatment activities during the evening. Daytime schedule deal with educational and employment seeking needs.

Participants entering drug court who are unemployed are required to participate in the Employment/Education Track as well as Phase I required activities.

There are times when participants in Phases II and III lose their jobs. In such cases, those unemployed participants are required to attend the daytime portion of the Employment/Education Track as well as participate in treatment at their prescribed phase dosage, regardless of the phase.

The requirements for advancing in the program include measured progress toward treatment plan goals and objectives (as demonstrated by ASAM clearly showing the participant will succeed at a lower intensity of treatment services), negative (and no missed) drug screens for 30 days, have a day-time, full-time (32 hours per week or more) job, \$0.00 rent balance at the time of filing the phase advancement application form, less than \$10 balance on drug screen fees at the time of filing the phase advancement application form, no sanctions in last 30 days, and completion of all requirements for participant's current phase.

All participant's job status, budget (including payment of court fee/fines/costs, restitution, supervision fees, child support payments and other financial obligations are monitored by the Performance Measures Team.

Drug Testing

Frequent drug testing is essential in developing a framework of accountability to monitor drug court participants' progress. Drug testing provides an objective measure of treatment effectiveness, as well as a source of important information for periodic review of treatment progress, and helps shape the ongoing interaction between the court and each participant. Timely and accurate test results promote frankness and honesty among all parties.

The Knox County Drug Court Judge may order a drug screen, or a confirmation of a drug screen result, on a court participant at any time during the program.

In Phase I, participants undergo at least three random screens per week. In Phase II, participants undergo at least two random urine screens per week. Phase III participants undergo at least one random urine screen per week. The Drug Court Counselor or his or her designee is responsible for the proper collection of the urine samples. The drug screener is trained in conducting drug screens and chain of custody. The drug screener directly observes urine and oral sample collections, observes chain of custody and has documentation of such, and verifies that sample temperature is within acceptable range.

Urine sample analysis is conducted by an independent lab with DOT accreditation. The standard urine test checks for the abuse of alcohol, marijuana, cocaine/crack, opiates (including heroin), phencyclidine, amphetamines and methamphetamine, and sedative hypnotic and central nervous system depressants such as barbiturates, Valium, tranxine, xanax, and soma. Instant testing usually consists of tests for two of the above drugs, randomly varying which drugs are tested. An emphasis is given to testing the participant's drug of choice more frequently. Creatinine levels and specific gravity are tested on lab tests, and samples where adulteration is suspected. Tests for other Schedule I or II drugs (Controlled Substance Act) may be ordered by the Knox County Drug Court Judge. The drug court may also use instant testing instruments. In the event of a non-negative result with an instant testing instrument, the participant is informed at that time and the urine sample is sent to the lab for testing. Besides urine tests, all Knox County Drug Court participants may also undergo a random breathalyzer test for alcohol, oral testing methods, and the Patch.

The drug court team members, specifically case manager, counselor, and probation officer, are immediately notified when a participant has (1) a positive drug screen, (2) failed to submit a sample, (3) did not show up for drug screen, (4) submitted a sample of another, or (5) has submitted an adulterated sample. Only test results confirmed by the lab are recognized by the Drug Court Judge and the drug court team. The response to positive urine screens can vary in each of the program phases.

Judicial Review

Pre-Court Staffing: The drug court team meets weekly to discuss each participant's progress and noncompliance, and to recommend promotions/demotions to other phases. Prior to the meeting, partnering service agencies submit a Weekly Report to the Drug Court Office showing the progress of each participant. These are submitted by 10:00 AM the day before drug court. Information from these reports is entered into the MIS and shows up as part of the court docket.

Discussions at these meetings include consideration of new participants for admission, progress of each participant, and best course of action to bring to bear resources to increase likelihood of success for each participant. The drug court may meet even if all members are not present. The Drug Court Judge and the Drug Court Coordinator may excuse the absence of any team member who is not needed for a particular meeting or for any other valid reason. All drug court team members have access to the drug court MIS system through the MIS-generated Drug Court Docket. The MIS compiles data on participant progress for a particular reporting period to make the weekly drug court docket. The information on this report includes participant's full name, IDN, admission date, current Phase, living environment, treatment provider, last step of the 12-step program formally completed in treatment, individual treatment rating for that reporting period, group treatment rating for that reporting period, number of self help support group meetings attended during that reporting period, total drug screens conducted during that reporting period, and if any were positive results. Each drug court team member receives a copy of this drug court docket at the beginning of the drug court team meeting.

Additionally, throughout the week, counselors, case managers, probation officers and others serving the participants are in communication identifying compliance/non-compliance and beginning to formulate recommendations at the drug court team meeting.

The Drug Court Team is composed of the Drug Court Judges, Drug Court Coordinator, the Drug Court Case Managers, Drug Court Counselor(s), State and County Probation, and other selected agencies.

Each participant's progress is staffed by the drug court team weekly during Phase I, two times per month for Phase II, and monthly during Phase III, to discuss the participant's progress through the program. The Office of the District Attorney General and the District Public Defender's Office (or private defense counsel) receives reports of these meetings. The District Attorney and the District Public Defender do not attend these drug court team meetings unless specifically invited by the Drug Court Judge. Their presence and participation at these drug court team meetings is limited to discussions regarding legal issues of concern to another member of the drug court team.

A number of different topics may be discussed during the weekly drug court team meetings including appropriate sanctions and/or expulsion of a particular participant. Determinations as to appropriate sanctions and/or expulsions are reviewed in open court. The drug court team meetings focus on the participant's progress through the program phases. These activities include judicial contact, community service and substance abuse monitoring results.

Court Hearings: The drug court participants also appear before the judge in a status hearing at intervals outlined for the various phases. Besides the judge and the participant, probation officers, the case managers and counselors, and the Drug Court Coordinator, and other members of the team are present. Representatives of the Office of the District Attorney General and representatives of the District Public Defenders Office (or private counsel) may also be present.

These hearings provide the judge the opportunity to (1) develop trust and maintain an open dialogue with each participant, (2) teach participants what is appropriate behavior for adults, and (3) give participants positive reinforcement from an authority figure. The judge uses the information discussed during the pre-court staffing to assist participants to focus their energy on the things they must do to achieve and maintain sobriety. During the court status hearings, participants interact with the Judge in a semi-formal manner, speaking directly to the judge, not through counsel.

The judge presents rewards or incentives to participants in a setting where the drug court team and audience can recognize the participant's accomplishments with a round of applause. A *capias* is issued for any participant who did not appear and was not excused by a member of the drug court team prior to the court hearing.

Incentives and Sanctions

Drug courts provide treatment and supervision for persons with chronic, relapsing addictive disorders. Treatment and supervision approaches are based on behavioral principles and social learning theory, in which abstinence and recovery is predicated on learning experiences. Infractions, relapses, and other sanctionable behaviors provide an opportunity to teach participants about the recovery process. Incentives and sanctions are key elements of this process, and both positive and negative behaviors are addressed through use of incentives and sanctions. Drug courts must reward cooperation as well as respond to noncompliance. Small rewards for incremental successes have an important effect on a participant's sense of purpose and accomplishment. Praise from the Drug Court Judge for regular attendance or for a period of clean drug tests, encouragement from the treatment staff or the judge at particularly difficult times, and ceremonies in which tokens of accomplishment are rewarded in open court for completing a particular phase of treatment are all small but important rewards that bolster confidence and provide inspiration to continue towards recovery goals.

Incentives and sanctions are used as tools by the judge and the drug court team to ensure participants stay focused on the goal of remaining drug free. Expulsion from the drug court program is used only in

extreme cases where previous sanctions have been used to no avail or the behavior of the participant is likely to harm other participants' physical or mental well-being.

The Knox County Drug Court provides both incentives and sanctions to drug court participants based on their performance in the carefully monitored program. The Drug Court Judge responds to each participant's positive efforts as well as to noncompliant behavior in court. The sanctions and incentives change in each phase. Sanctions and Incentives also vary in intensity in order to take into account each individual's issues and to treat each incident in an individual manner. The Center for Substance Abuse Treatment advises that participants should not be demoted to earlier program phases as this demoralizes and humiliates the participant. Instead, the Knox County Drug Court maintains that person in their current phase and adjusts treatment, drug screens, drug court appearances, and supervision in accordance with the assessed need. As that participant progresses up to and through the current phase, he/she is then eligible to apply to the next phase.

Incentives: Incentives are emphasized in the Knox County Drug Court to bring about an atmosphere of support and positive reinforcement. Progress by participants is recognized immediately as well as formally at Quarterly Milestone Celebrations. Progress such as periods of clean time, having a drug-free baby, paying off court costs and restitution, getting job, advancement in job, completion of education, getting custody of children, advancing through phases, graduation, and graduation with minimal positive drug screens, are all celebrated at the milestone parties. These milestones are verbally acknowledged by the judge both in drug court as they happen and again at the milestone party.

Sanctions: Sanctions are necessary to bring about compliance to the Knox County Drug Court requirements and ensure program integrity. The drug court responds to positive drug screen tests, missed drug screens, and fraudulent screens weekly at the drug court hearing. Sanctions include court observation, additional hours of community service, incarceration, and/or change in the treatment plan. Sanctions can also include demotion to a previous phase of the drug court program or termination from the program. It is anticipated that the Drug Court Judge will use sanctions in a way to help bring about stability to the program. However, the Drug Court Judge may determine that special sanctions may be needed to deal with special behavioral issues. In other words, these sanctions are to be used as guidelines but do not prevent the judge from selecting alternative sanctions.

Personnel of the drug court program recognize that an individual struggling with alcohol and/or drug addiction may engage in conduct that leads to a new arrest while at the same time participating in drug court. Personnel of the drug court understand relapse to be a part of the recovery process. At the same time, however, personnel of the Knox County Drug Court have an interest in the participants remaining alcohol/drug free and arrest free. A participant in the drug court program who is arrested on new charges while engaged in the Knox County Drug Court program have his/her case reviewed by the drug court team (without the District Attorney and Public Defender or private counsel being present). Removal from the program, following a new arrest may be an appropriate sanction. However, the drug court personnel may believe that other sanctions are equally appropriate. A negative collateral contact report (report from a neighbor or employer/coworker etc.) can result in an evaluation from the treatment team and a sanction to be determined by the judge.

Team Member Training Requirements

The Knox County Drug Court encourages continuing training of its staff, the drug court team, and members of the Board of Directors. Cross trainings are provided to develop a shared understanding of

the values, goals, and operating procedures of both the treatment and justice system components. Drug court employees are required to attend all cross trainings.

The drug court office also encourages its staff to attend outside trainings, both regional and national, and, where possible, obtain credits for continuing professional education. The drug court may pay for such training if 1) the training will increase the employees performance in his/her present position, 2) the Drug Court Coordinator authorizes payment of the training expenses, 3) the drug court budget allows for the expenses to be paid, and (4) other upcoming trainings authorized by the coordinator. Additionally, the coordinator semi-annually identifies training needs of the drug court employees and drug court-related training needs of the drug court team. The trainings for the drug court team are interdisciplinary in nature and are designed to promote effective drug court planning, implementation, and operation. Drug court employees are required to attend trainings based on the identified needs. Drug court employees scheduled to attend trainings must attend the training and provide proof of attendance as evidenced by a certificate or letter of training attendance provided by the training sponsor. The coordinator also schedules trainers to present trainings to the drug court team based on the identified needs.

Drug court team trainings are held at least 4 times a year. Typically the trainings are held in the courtroom or jury room or other suitable location before a weekly drug court team meeting. The coordinator or his designee records the training, obtains a written education syllabus, trainer outline, and trainer qualifications, obtains a copy of any handouts, and takes attendance. Unless otherwise noted, these drug court trainings are open so that area service providers may attend. The coordinator or his designee also develops or provides access to training on an annual basis that includes a curriculum to cover cultural competence (annually), drug court's goals, policies and procedures, as well as a plan to provide drug court specific training to every drug court team member. Some training is general while others are drug court specific in nature

Program Monitoring and Management Information System

Fundamental to the effective operation of drug courts are coordinated management, monitoring, and evaluation systems. The design and operation of an effective drug court program results from thorough initial planning, clearly defined program goals, and inherent flexibility to make modifications as necessary. Management and monitoring systems provide timely and accurate information about program operations of the drug court's managers, enabling them to keep the program on course, identify developing problems, and make appropriate procedural changes.

The Knox County Drug Court maintains a database holding information of drug court participants and candidates. The database has a multi-level security system built into it to help ensure participants confidentiality. This database is used to track participants through the program, ensure that participants are meeting certain requirements, ensure the drug court is providing services at a frequency and timeliness to help participants, to collect data as required by the Office of Criminal Justice Programs, and for quality improvement. Included in the data maintained is: drug screens and results, treatment participation, court costs/fees/fines/restitution and payments toward those. The database is also used to store data on:

- Numbers and general demographics of individuals screened for eligibility,
- Extent and nature of AOD problems among those assessed for possible participation in the program,
- Attendance records for those accepted into the program,
- Progress reports for those accepted into the program,
- Drug test results for those accepted into the program,

- Incidence of criminality for those accepted into the program.

All drug court team members have access to the Drug Court MIS system through the MIS-generated Drug Court Docket. The MIS compiles data on participant progress for a particular reporting period to make the weekly Drug Court Docket. The information on this report includes participant's full name, IDN, admission date, current Phase, living environment, treatment provider, last step of the 12-step program formally completed in treatment, individual treatment rating for that reporting period, group treatment rating for that reporting period, number of self help support group meetings attended during that reporting period, total drug screens conducted during that reporting period, and if any were positive results. Each Drug Court Team member receives a copy of this drug court docket at the beginning of the Drug Court Team Meeting. Additionally, throughout the week, counselors, case managers, probation officers and others serving the participant are in communication identifying compliance/non-compliance and beginning to formulate recommendations at the Drug Court Team Meeting.

The Drug Court MIS provides statistically valid data on caseload levels, recidivism rates, drug test results, case management (and other participant records), as well as management and financial records. Members of the Drug Court Team will input the information into the MIS through ACCESS. This information may also be used to aid the evaluation of the Drug Court Program.

Other Data Collection Processes

Knox County Drug Court has a legitimate interest in attempting to collect relevant statistical data to gauge the program's success. With that in mind, personnel from the Knox County Drug Court attempt, by the least intrusive measure available, to collect such relevant statistical data.

The Knox County Drug Court maintains a list of all persons referred to the Knox County Drug Court. This list notes the source of each referral and the current status of each individual with a specific annotation explaining the reason any person was not accepted for the program or later removed from the program.

Partnerships: The Drug Court values community partnerships. The Knox County Drug Court seeks to partner with treatment providers, faith community, law enforcement, probation supervision, the justice system, local elected officials, and area community leaders. The recruitment of these partners is accomplished in two levels. 1) The Board of Directors educates the community about drug court and its benefits and 2) the Drug Court team looks for new partners willing to partner with drug court.

Primary Treatment and Monitoring Services

- Helen Ross McNabb Center's Sisters of the Rainbow (women's IOP/OP substance abuse TX)
- Helen Ross McNabb Center provides mental health assessments in jails, medical detoxification, residential substance abuse treatment, dual diagnosis treatment and medication monitoring, and inpatient substance abuse TX
- Agape, Inc. (Women's HWH and IOP/OP substance abuse treatment)
- Steps (Men's HWH)
- Great Starts (long-term residential substance abuse treatment for women and women with children)
- Community Alternative to Prison Program (CAPP) for employment placement and anger management
- Workforce Connections for Adult education
- State Probation for Enrichment Classes
- Knox County Health Dept (Indigent Care Program)

- Salvation Army Men's and Women's transitional housing programs
- Peace at Last Men's Half Way House
- E. M. Jellinek for Men's Half Way House and IP/IOP Men's substance abuse treatment using cognitive-behavioral therapy and reality therapy
- Knox County Probation and Pretrial Release Services (supervision)
- Tennessee State Probation (supervision)
- YWCA Women's transitional housing
- Section 8 Housing for housing
- Safe Haven (Domestic Violence Counseling)

Knox County Drug Court Board of Directors: The Knox County Drug Court has a Board of Directors that was established to provide guidance to the Knox County Drug Court. The Board is authorized to develop and implement specific procedures and policies to aid the Knox County Drug Court in performing its functions. The Board is also responsible for ensuring that the policies and procedures use a non-adversarial approach in which prosecution and defense counsel promote public safety while protecting participant's due process rights. The terms of office for members of the Knox County Drug Court Board of Directors are outlined in the bylaws and/or charter. The Board meets quarterly and is composed of at least the following members:

- One person currently serving on the Knoxville City Council, to be selected by the City Council.
- One person currently serving on the Knox County Commission, to be selected by the County Commission.
- One private citizen to be selected by the City Mayor.
- One private citizen to be selected by the County Mayor.
- One representative from the Office of the District Attorney General.
- One representative from the Office of the District Public Defender.
- One private criminal defense attorney, to be selected by the Knoxville Defense Lawyers Association.
- One representative from Helen Ross McNabb Mental Health Center.
- One representative from the Knoxville Homeless Coalition.
- One representative from the University of Tennessee, College of Social Work.
- One representative from the Medical Community, selected by the Knox County Medical Association.
- One graduate of the Knox County Drug Court.
- One representative of the faith community.
- One representative of the Knox County Sheriff's Department.
- One representative of the Knoxville Police Department.

Knox County Drug Court Process Evaluation Findings

Process Evaluation Findings

As previously described, the process evaluation conducted with the Knox County Drug Court included semi-structured interviews conducted with key drug court staff and with drug court participants. Prior to the interviews, an electronic survey was also conducted with drug court staff. The following section provides a summary of major findings from the interviews and survey.

Mission and Goals of the Drug Court Program

Satisfaction with Mission and Goals and Objectives of the Knox County Drug Court¹: Team members were asked to rate their level of satisfaction with components of the Knox County Drug Court program using a five-point agreement scale (1 = *Very Dissatisfied*, 2 = *Dissatisfied*, 3 = *Neutral*, 4 = *Satisfied*, and 5 = *Very Satisfied*). Regarding team member satisfaction with the mission and goals and objectives of the Knox County Drug Court program, team members were mainly either *satisfied* or *very satisfied* with each of these components of the drug court program. The mean satisfaction rating for its mission was 4.3, with 11 of the 14 respondents being *very satisfied* or *satisfied*. The mean satisfaction rating for its goals and objectives was also 4.5, also with 10 team members being *very satisfied* or *satisfied* with this component of their drug court program. No team member was either *dissatisfied* or *very dissatisfied* with the current mission and goals and objectives of the Knox County Drug Court program.

Program Effectiveness

Team members were asked to assess the effectiveness of the Knox County Drug Court program relative to the three standard goals of a drug court program: using a five-point effectiveness scale (1 = *Very Ineffective*, 2 = *Ineffective*, 3 = *So-So*, 4 = *Effective*, and 5 = *Very Effective*). These common goals are (1) achieving the goals of the drug court program, (2) ending participants' substance abuse, and (3) stopping participants' criminal behavior. With a maximum effectiveness rating of 5.0, the mean effectiveness level for achieving the goals of the drug court program was 3.9; for ending participants' substance abuse (3.6); and for stopping participants' criminal activity (3.8).

Program Effectiveness	
Goal	Mean Rating
Effectiveness in achieving the goals of the drug court	3.9
Effectiveness in ending participants' substance abuse	3.6
Effectiveness in stopping participants' criminal activity	3.8
COMPOSITE EFFECTIVENESS RATING	3.8

¹ Fourteen current team members completed an online survey to gather their individual perceptions of the effectiveness of the different components of the drug court program, their satisfaction with various elements of the drug court program, and to obtain their individual recommendations for improving the program. These team members included a substitute drug court judge, the drug court coordinator, two drug court case managers, a treatment case manager, a treatment counselor, five probation officers, the court liaison, and two persons who did not identify themselves on the online survey document. Throughout this section, these nine respondents are collectively referred to as *drug court team members*.

Satisfaction with the Knox County Drug Court Program Model: Team members were asked to rate their level of satisfaction with the Knox County Drug Court program model using a five-point agreement scale (1 = *Very Dissatisfied*, 2 = *Dissatisfied*, 3 = *Neutral*, 4 = *Satisfied*, and 5 = *Very Satisfied*). The mean satisfaction rating for its program model was 4.8, with 1 of the 14 respondents being *very satisfied* with this component, and 11 members being *satisfied*.

Satisfaction with the Target Population Knox County Drug Court Program: Team members were asked to rate their level of satisfaction with the target population using a five-point agreement scale (1 = *Very Dissatisfied*, 2 = *Dissatisfied*, 3 = *Neutral*, 4 = *Satisfied*, and 5 = *Very Satisfied*). The mean satisfaction rating for its target population was 4.8, with 2 of the 14 respondents being *very satisfied* with this component and 12 members being *satisfied*.

Drug Court Team Membership and Effectiveness

Team Effectiveness: Among the survey items, the following items were asked relative to team membership and effectiveness. Questions pertained to both the “work” and the “relationships” of the team, and included:

- Length of time each person has been involved with the Knox County Drug Court.
- Extent to which they agree with their roles and responsibilities that are listed in the Policies and Procedures Manual.
- How supportive each team member is of the drug court.
- The extent to which each team member agrees with statements related to elements of team effectiveness: including (1) ongoing communication; (2) their freedom to make their opinions known to other drug court team members; (3) how team members are fulfilling their roles and responsibilities; (4) how well their Policies and Procedures Manual reflects how the drug court program actually operates; (5) the effectiveness of drug court staffings and drug testing; and (6) the consistency by which written progress reports are submitted to the team.

Duration of Employment in the Drug Court Program: A key issue facing drug courts is the turnover of team members. Staff turnover requires that drug courts provide ongoing training to the team as a whole, as well as role specific training to each of the team members. Further, drug court teams must make special efforts to incorporate new members into the team, including providing a comprehensive orientation to the drug court team and its policies and procedures, and attending to how to monitor team processes to allow for all members to provide input to deliberations. The table below provides information about the duration of employment among survey respondents on the Knox County Drug Court team. More than three-quarters of the team member respondents have been involved with the Knox County Drug Court program for more than two years.

Team Membership

Position	Length of Involvement with Drug Court
Women's A&D treatment case manager	1 year
(Not identified)	(not identified)
CAPP Officer	27 months
Case Manager II	127 months
Case manager I	1yr
Enhanced State probation/treatment team member	9 years
Probation Officer	28 months

Position	Length of Involvement with Drug Court
Probation/Parole Officer, State of Tennessee	36 months
Probation/Parole Officer III, State of Tennessee	7 years
Drug Court Coordinator	138 months
Court liaison	37 months
Substitute Judge	24 months
Counselor	7yrs
(Not identified)	36 months

Agreement with Specific Roles and Responsibilities: Team members were asked to rate their degree of agreement with the roles and responsibilities that were listed for their specific position in the Policies and Procedures Manual. Clearly, the majority of the team members *strongly agrees* or *agrees* with what is listed in the Policies and Procedures Manual. Four team members indicated that he/she did not know what is listed in the Policies and Procedures Manual for his/her position.

Agreement with Roles and Responsibilities

Agreement-Disagreement Scale	Frequency	Percent
Strongly Agree	2	14.3
Agree	8	57.1
So-So	0	0.0
Disagree	0	0.0
Strongly Disagree	0	0.0
Don't Know What is Listed	4	28.6
TOTAL	14	100.0

Supportiveness of Individual Team Members: Team members were also asked to rate their perceived degree of supportiveness of individual team members. The composite team rating was 4.8 on a scale to 5.0.

Support for Drug Court

Position	Mean Rating
Judge	4.6
Drug Court Coordinator	4.5
Drug Court Employees (PMT, CMII, Counselors)	4.5
Partnering Treatment Agencies	4.3
State Probation Officers	4.0
County Probation Officers	3.9
CAAP	4.4
COMPOSITE TEAM RATING	4.3

Elements of Team Effectiveness: Team members were asked the extent of their agreement with the status of key indicators of team effectiveness, using a five-point agreement scale (1 = *Strongly Disagree*, 2 = *Disagree*, 3 = *So-So*, 4 = *Agree*, and 5 = *Strongly Agree*). The team *agreed* or *strongly agreed* with each of these indicators of team and/or judicial review effectiveness. Overall, the team *agreed* that with each of these statements. The lowest ranked indicator of team effectiveness

(consistent submittal of reports prior to staffings) was rated at 3.9 on a scale of 5.0. The composite team rating was 4.1 on a scale to 5.0.

Elements of Team Effectiveness	
Element	Mean Rating
Overall, our drug court team maintains ongoing communication, including frequent exchanges of timely and accurate information about the individual participant's overall progress in our drug court program.	4.2
I feel free to make my opinions known to other members of our drug court team.	4.3
Overall, the various members of our drug court team are fulfilling their agreed upon roles and responsibilities.	4.0
In our drug court, our current Policies and Procedures Manual reflects how we actually operate our drug court program.	4.0
The frequency of court staffing is sufficient for monitoring the progress of participants in our drug court program.	4.2
Our drug testing protocol is effective in verifying each participant's accountability to the drug court program.	4.3
In our drug court written progress reports are consistently submitted prior to all staffing.	3.9
COMPOSITE TEAM RATING	4.1

Satisfaction with Decision-Making Processes for Planning and Operations: Team members were asked to rate their level of satisfaction with decision-making processes used for planning and operating the drug court program using a five-point agreement scale (1 = *Very Dissatisfied*, 2 = *Dissatisfied*, 3 = *Neutral*, 4 = *Satisfied*, and 5 = *Very Satisfied*). The mean satisfaction rating for this component of team operation was 3.5, with 3 of the 2 respondents being *very satisfied* with this component and 5 team members being *satisfied*.

Communication and Coordination among Team Members

In a drug court, the treatment experience begins in the courtroom and continues through the participant's drug court involvement. In short, drug court is a comprehensive therapeutic experience, only part of which takes place in a designated treatment setting. The treatment and criminal justice professionals are members of the therapeutic team.

The therapeutic team (treatment providers, the judge, lawyers, case managers, supervisors and other program staff) should maintain frequent, regular communication to provide timely reporting of a participant's progress and to ensure that responses to compliance and noncompliance are swift and coordinated.

Effectiveness of Communication and Coordination among the Drug Court Team: Members of the drug court team were asked to rate the overall effectiveness of the communication and coordination among team members. Possible responses were *Very Effective* = 5, *Effective* = 4, *So-So* = 3, *Ineffective* = 2, and *Very Ineffective* = 1. One team member reported that the communication and coordination among team members is *very effective* and eleven (11) team members rated this factor as *effective*. Two team members indicated that the effectiveness of communication and coordination among team members was only *so-so*. The mean rating of team members was 3.9 on a scale to 5.0.

Communication Techniques: Team members indicated the following communication techniques used to facilitate communication: weekly staffings, e-mail, phone, face-to-face communication, and occasional team trainings.

Recommendations for Improving Team Communication and Coordination: Team members identified the following recommendations to enhance communication and coordination among team members.

- Increased understanding and appreciation of members' roles and how they contribute to the well being of the participants.
- Increased fellowship opportunities.
- Drug court team members attend meetings at probation office.
- Probation office staff attend treatment team meetings each week.
- Drug court staff attend more agency treatment/staff meetings when agencies are discussion drug court participants.
- Immediate notification of issues when they arise.
- Conduct retreat where drug court team members can discuss and resolve issues.
- Use email more often/consistently in the information-sharing process.
- Drug court staff share ALL information regarding a participant's behavior and sanctions so that better decisions can be made.

Team Meetings

Team members were asked to identify how often the team holds period meetings (not including staffings and hearings) to discuss and resolve any issues that arise in the operation of their drug court program. Typically, the responses reflected that such team meetings occurred whenever needed.

Effectiveness of Periodic Team Meetings: When asked to assess the effectiveness of the period team meetings in enabling the team to resolve any problems, the team members responded in the following manner. Possible responses were *Very Effective* = 5, *Effective* = 4, *So-So* = 3, *Ineffective* = 2, and *Very Ineffective* = 1. (The number in parentheses indicated the number of times each was identified by team members.) The adjusted mean rating was 3.4 on a scale to 5.0.

- Very Effective (1)
- Effective (4)
- So-so (3)
- Ineffective (0)
- Very Ineffective (1)
- Not Sure (3)
- Non Response (2)

Recommendations to Improve Team Problem-Solving: When asked to list their recommendations for improving the ability of the drug court team to resolve operational issues that arise in their drug court, the following recommendations were identified.

- Improve communication among all team members.
- Provide required training to all team members on the goals and philosophy of drug courts.
- Conduct problem solving meetings immediately whenever a problem arises.
- Have full, open discussion at team meetings rather than individual conversations away from other team members.

- Team members adhere to their roles and memorandum of understanding agreements.
- Include all drug court team members in decision making process.
- Conduct team review of roles and responsibilities and required credentials of all team members.

Steering Committee

Because of its unique position in the criminal justice system, a drug court is especially well suited to develop coalitions among private community-based organizations, public criminal justice agencies and drug and alcohol treatment providers. Forming such coalitions expands the continuum of services available to drug court participants and informs the community about drug court concepts. Participation of public and private agencies, as well as community-based organizations, is often formalized through a steering committee. A steering committee can also help in acquiring and distributing resources.

The Knox County Drug Court has a Board of Directors that was established to provide guidance to the Knox County Drug Court. The Board is authorized to develop and implement specific procedures and policies to aid the Knox County Drug Court in performing its functions. The Board is also responsible for ensuring that the policies and procedures use a non-adversarial approach in which prosecution and defense counsel promote public safety while protecting participant's due process rights.

Three of the Knox County Drug Court team members indicated that there is a formal steering committee for the Knox County Drug Court program; one team member indicated that there is not a formal steering committee; and 10 members were not sure. Only two team members indicated for certain the periodicity of steering committee meetings: quarterly.

Satisfaction with Plan for Acquiring Needed Resources and Services: Team members were asked to rate their level of satisfaction with their plan for acquiring needed resources and services using a five-point agreement scale (1 = *Very Dissatisfied*, 2 = *Dissatisfied*, 3 = *Neutral*, 4 = *Satisfied*, and 5 = *Very Satisfied*). The mean satisfaction rating for its resource acquisition plan was 3.8, with 1 of the 14 respondents being *very satisfied*, and 10 team members being *satisfied*. Two team members were *dissatisfied* with their plan for acquiring needed resources.

Satisfaction with the Sustainability Plan for the Knox County Drug Court: Team members were asked to rate their level of satisfaction with the sustainability plan for the drug court program using a five-point agreement scale (1 = *Very Dissatisfied*, 2 = *Dissatisfied*, 3 = *Neutral*, 4 = *Satisfied*, and 5 = *Very Satisfied*). The mean satisfaction rating for its sustainability plan was 3.9, with one team member being *very satisfied* with this component, eight members being *satisfied*, and two team members being *neutral*. Two team members did not respond to this item.

Effectiveness of the Drug Court Program in Meeting Participant Needs

In the online survey, team members were asked to assessment the effectiveness of the Knox County Drug Court program in meeting the needs of the various population subgroups. By and large, this court serves white, non-Hispanic males and females, with a smaller of proportion Black or African-American and just a smattering of Hispanic or Latino participants. Team members perceive that the drug court is equally effective in meeting the needs of white, non-Hispanic participants and Black or African-American participants, as well as female participants.

Effectiveness in Meeting Needs of Sub-Groups

Population Sub-Groups	Adjusted Mean
Caucasian/Non Hispanic	4.1
African-American	4.1
American Indian or Alaskan Native	4.0
Asian	4.2
Native Hawaiian or Other Pacific Islander	4.0
Hispanic or Latino	3.4
Non-English Speaking	3.3
Male	3.9
Female	4.1

When asked on the online survey to identify recommendations to enhance the effectiveness of the Knox County Drug Court program in meeting the specific needs of the various population groups being served, the individual drug court team members provided the following recommendations:

- Having own residential facility for participants to live in.
- Increased team discussion of application of sanctions.
- Work with partnering agencies to find more positive sanctions.
- More consistent judicial decisions.
- Identify opportunities to provide greater individualization in program to meet specific needs of various groups – women, single parents, etc.
- Team building so that team comes together as one.

Reasons for Engagement in the Drug Court Program

On September 1, 2010 twenty-six participants currently active in the Knox County Drug Court program participated in a group interview held during a Wednesday night drug court group session. Each person was provided a questionnaire to complete, after which a free-ranging discussion was held. Participants had been enrolled in the program for a range of one month to more than two years.

Reasons for Participating in the Drug Court Program: In response to the question of why they entered the drug court program, the participants responded with reasons that clustered within two broad categories (1) because they wanted a new way of life and (2) to avoid a jail or prison sentence:

New Way of Living

- To learn how to live life drug and alcohol free. To live an honest life. And to be a better person.
- To change my old behaviors and to learn how to live free of drugs and alcohol.
- Wanting a different way of life, drug and alcohol free!
- To get off of drugs and find a better way to get off drugs.
- To have a new life, free of alcohol and drugs.
- To be a recovering addict instead of an addict only.
- To help get my life back together. Show me how to live clean and sober.
- To change my life to live drug and alcohol [free]
- Yes
- To help me get clean and straight
- I was caught for sale and delivery
- Get another chance at life.
- Because of failing drug screens. Judge recommended it. My only charge is theft in 2006.

Alternative to Jail

- Court order
- Court order
- Court ordered
- Court ordered
- Judge sent me
- Because it was either prison or drug court
- Stay out of prison
- Facing large jail sentence.
- I was court ordered, but also because I need help with my substance abuse.
- To be free of addiction, but initially to get out of prison.
- I knew I had a drug problem and wanted help, but also to avoid going to prison.
- Felony charge of prescription fraud - didn't want to go to prison. Wanted to change my life.
- To stay out of prison.

Reasons for Remaining in the Drug Court Program: Participants were also asked why they remained in the drug court program. They provided the following insights during the group interview:

Threat of Prison/Jail

- The fear of going to prison.
- The long jail sentence that I am facing has caused me to stick it out here instead of giving up.
- The alternative of prison.
- I go to jail if I don't.
- The threat of prison.
- Consequences
- Consequences
- Consequences. Seeing what I can make of myself while not on drugs.
- Staying out of jail for my kids.
- I go to prison if I don't comply and I get discharged for some reason.
- Being forced to - it was either this or prison. No second chance.
- Fear of prison.
- The Knox County Jail

Staff/Participants/Programs/Services

- The people I met. My counselor. They need to give us little more free time and more free choice to make mistakes or not so as to learn.
- My counselor, Gloria.
- They care and court order.

Self/ Family/Children

- Wanting a better life. Wanting to give my children back their mother.
- Determination.
- My strength and God and the drug court staff.
- I want to be clean and of course the legal factor.
- Perseverance and the love of my family.
- Knowing I want to keep my life like it is now - clean and sober. My children.

Other

- Only God
- Being able to accept things and accepting the help from others.
- EM JELLINEK

Staff Responsiveness to Participants' Treatment Needs

Drug court participants were asked how well treatment program counselors and staff responded to their treatment needs. The response choices ranged from 1 (*Poorly*) to 5 (*Extremely Well*). Three of the 26 participants interviewed reported that treatment program counselors and staff responded *extremely well* to their treatment needs. Six of the 26 respondents reported a negative response. Eleven others reported a neutral response. The mean rating was a 3.1 on a 5.0 scale.

The participants gave the following reasons in explaining their ratings:

Positive Reasons:

- Clyde is very good at motivating people and helps them. Gloria is nice to her people. Freda comes across too much of an enforcer.
- Well they have really helped me understand my problem with drugs and opened my eyes.
- Have other requirements as a human being, such as allowing us to go to college and stay at home with family more often.
- Very helpful and thoughtful.
- They respond well in my case but I believe they play favorites somewhat.
- So far very helpful
- They are all very supportive
- They are always willing to listen. If it's good or bad. But they do push consequences to extreme sometimes.

Negative Reasons:

- Basically the program is set up for failure.
- They with the exception of Gloria do not care about our recovery.
- Our needs are not important. Only what the staff wants for us.
- Never answer their phone.
- This drug court is all about control. Several staff want their way or no way. The participant's opinion does not matter.
- I feel that sometimes staff does not hear what our individual needs are. Not everyone's recovery is going to be the same.
- Still will not let me work.
- Everyone has different situations and needs, and we should not all be treated or "helped" the same way.
- They tell you what they think is best and don't really get to know who you are and we're all human. We make mistakes and have to learn.

Neutral Reasons:

- Some are very helpful when it comes to issues I am dealing with and some are very detrimental to them.
- Depends on who they are and what their mood is.
- It depends on what phase you are on. They make it VERY difficult to allow ways for Phase I clients to get to meetings. They discourage "recovery" related things at times. There really isn't any

"recovery" in drug court it is just a much better choice than prison. They are giving you a façade of freedom.

Participant Recommendations to Better Meet their Needs: When asked what the treatment program counselors and other staff could do to better meet their needs, participants provided recommendations that centered around more (1) understanding, more compassion and more time; (2) more services; and (3) nothing or unknown.

Their specific responses were:

Staff

- Have a program with qualified people. They try to emotionally break participants. Make participants for the most part only try to say the right thing - the focus is NOT recovery.
- If they had more staff.
- By attending outside meeting at least once a week.
- There should be a degree of compromise that could be done at the staff level. We all have opinions but they are rarely considered.
- They focus on too many other things other than recovery. They are way to concerned with who's talking to who, who's wearing what, who's driving what - etc. They should be much more focused on recovery. We should be allowed to be open/honest without a jail sanction hanging over our head. They should look at the "whole picture" not just one thing.
- Maybe be more focused on what we are doing good instead of what we are bad.
- Stop getting in peoples business outside of drug court.

More Understanding/Supportive

- Try to listen more instead of reaction.
- Be more understanding about little things.
- Being more patient and understanding.
- Pay more attention and listen better.
- To help us individually based on our situation instead of all the same.
- They could learn when to drop issues and not keep picking at people.
- Listen to us more and not be so judgmental and realize we are going to make mistakes.
- Answer their phone.
- By listening, not being so close minded.
- Be more equal.
- By being more compassionate. Setting examples and not having the persona of do as I say not as I do.

Services/Requirements

- The strain drug screen fees can put on you. Not everyone goes by the same rules.
- By letting me keep my job that I had before I came in.
- Help one on one
- Help with allowing people to have more jobs. Be less picky about jobs.

Nothing/Don't know

- They already do
- Don't know

Barriers to Drug Court Participation

Drug court participants were asked to identify any difficulties in participating in the Knox County Drug Court program, including those related to transportation, the schedule, the location of treatment sites, child care, and housing. Responses are summarized in the table below (explanations are bulleted):

Barriers to Drug Court Program Participation

	Yes	No
Transportation <ul style="list-style-type: none"> It costs at least \$4 a day to ride the bus here and back. In the beginning I was not allowed to drive my car and it made it hard to get a job. Major problem is a car I was having to walk about 10 miles a day to follow drug court schedule before getting a vehicle. Very hard with no car. Bus rides might not be able to do all required course of schedule. Hard time getting places Took car No money for gas Don't have a car. Not having any and so many things to do. From HWH to drug court. Not yet because I'm not out of treatment. 	18	8
Schedule <ul style="list-style-type: none"> Having a 6 o'clock curfew limits where and when you can work, and having felonies already, combined with his curfew makes finding a job very difficult. Having to have a day shift job was difficult Very difficult - too much! Too late when you work full time, have kids, etc. Schedule makes it difficult to obtain a good job. When job searching and doing day program. Drug screen 5:30 - 7:00 - when I get off someone is in the office we should be able to go ahead and get it over and most of the time they aren't doing them on time anyway. DC wants everything scheduled first shift during work hours Could make a less time-consuming schedule Tie up all of our time. No free time. Used to be but not anymore. Not yet because I'm not out of treatment. 	15	11
Location <ul style="list-style-type: none"> Very close to halfway house Good location 	4	22
Child Care <ul style="list-style-type: none"> Classes too late and too often when you have children Watching my kids for things I might have to do. Not able to help wife Not yet because I'm not out of treatment. 	5	21

	Yes	No
Housing <ul style="list-style-type: none"> ▪ They didn't help at all. ▪ Have family at home ▪ I had to move out of my home to go to Salvation Army. 	5	21
Other <ul style="list-style-type: none"> ▪ Ability to voice true feelings without fear of retribution. ▪ They try to make it as difficult as possible. I am ashamed of them. ▪ Drug screen fees ▪ Need to have drug screens done at halfway house. ▪ Just too many things to have to have done in one day. Loosen up schedule. ▪ Financial problems ▪ Communication when cell phones are not allowed in Phase I. 	7	19

Comments Related to Participation Difficulties: When asked how participating in the drug court program has caused them problems or difficulties, the 26 respondents provided the following insights:

Employment/Education

- Difficult for me to see my children who are in another city. Difficult for me to get a good job. Drug court staff is more concerned about keeping me working at McDonalds than encouraging me to better myself by getting gainful employment.
- This program will not bend one bit to let me go back to school.
- Job opportunities because of schedule in the past.
- You can't find a job due to their rules and regulations.
- Looking for first shift job and not being able to accept 2nd shift job.
- Lack of work!
- Because I can't attend to my family the way I'd like to and I could be going through college right now but I'm not allowed.

Self/Family

- I've done more jail time when in drug court for NOT using and NOT breaking the law. Very hard on self esteem. They need to allow patch or spit test or etc for those of us with problems urinating and those who keep getting diluted screens for NO reason.
- My mother and father are having to watch my 7 year old and they are both 70+ so it would be great to do the program from home.
- Very stressful. Makes me want to use sometimes. It's too hard especially when you work a full time job.
- Only when I let their behavior, such as when they called my family to see if I had been over when my dad was being treated for cancer. 2. Being put in an office and told (Clyde and Freda) I was going to prison for 3 days in a row after a false positive on a drug test - I was later proven to be clean after lab results. If I had been weak I would have used or ran then.
- Just the moving out of my home. My family needs me too, to help build back our home as a whole.

Financial

- Bus fare.
- I could be working more hours, a better job, and could have more money put towards other bills if I

didn't have to spend so much time here, and so much money on drug screens.

- We need lower drug test fees. Drug tests taken at halfway house.

Other

- Just stress me out at times due to lack of transportation
- Yes, by staying in jail for a long time just to wait on a treatment bed.

None

- It has not caused me any problems.
- It's not really given me any problems or difficulties. I'm grateful not to be in prison.
- It hasn't.
- It hasn't at all.

Adherence to Program Eligibility Criteria

When asked to what extent the Knox County Drug Court abides by its eligibility criteria, seven of the fourteen drug court team members indicated that the drug court *always* abided by its eligibility criteria while another 3 team members reported that the drug court *often* abided by its eligibility criteria. Four team members indicated that he/she *did not know*. The mean rating was 4.7 on a scale to 5.0.

Adherence to Program Eligibility Criteria

Adherence Rating Factors	Frequency	Percent
Always	7	50.0
Often	3	21.4
So-So	0	0.0
Not Often	0	0.0
Never	0	0.0
Don't Know	4	28.6
TOTAL	9	100.0

Referral and Intake Process

Team members were asked to rate the effectiveness of the referral and screening processes used in the Knox County Drug Court program related to three effectiveness criteria: (1) identifying potentially eligible persons for the drug court program; (2) identifying those persons who should not be in the drug court program; and (3) identifying those persons who should be in the drug court program. Possible responses were *Very Effective* = 5, *Effective* = 4, *So-So* = 3, *Ineffective* = 2, and *Very Ineffective* = 1.

Effectiveness of Referral and Screening Process

Effectiveness Criteria	Adjusted Mean Rating
How effective is the referral process for identifying potentially eligible persons for your drug court?	4.1
How effective is the screening process for identifying those persons who should not be in the drug court?	4.0
How effective is the screening process for identifying those persons who should be in the drug court?	4.3

Effectiveness of Referral Process in Identifying Potential Participants: Three of the 14 team members who were surveyed through the online process indicated that the referral process was *very effective* for identifying potentially eligible persons for the Knox County Drug Court program. Seven team members reported that the process was *effective*. Two team members rated the process as only *so-so*. Two team members reported that they *did not know*. The mean rating of all team members was 4.1 on a scale to 5.0.

Effectiveness of Screening Process in Identifying Persons for Exclusion from the Drug Court Program: Two team members indicated that the screening process was *very effective* for screening out those persons who should not be enrolled in the Knox County Drug Court program. Eight team members reported the process was *effective*. Two respondents reported that they *did not know*. The mean rating of all team members was 4.0 on a scale to 5.0.

Effectiveness of Screening Process in Identifying Persons for Inclusion in the Drug Court Program: Three team members indicated that the screening process was *very effective* for identifying persons who should be enrolled in the drug court program. Nine team member respondents reported the process was *effective*. Again, two members reported that they *did not know*. The mean rating of all team members was 4.3 on a scale to 5.0.

Overall Satisfaction with the Referral and Screening Process: Team members were asked to rate their level of satisfaction with the referral and screening process of the Knox County Drug Court program using a five-point agreement scale (1 = Very Dissatisfied, 2 = Dissatisfied, 3 = Neutral, 4 = Satisfied, and 5 = Very Satisfied.). The mean satisfaction rating for its referral and screening process was 4.2, with 3 of the 14 respondents being *very satisfied* with this component and 10 team members being *satisfied*.

Recommendations for Improving the Referral and Intake Process: Individual team members offered the following recommendations to improve the screening and intake process.

- Revise the target group to include those with less serious crimes.
- Provide information to potential participants when they are taken into custody instead of waiting until court dates and conversation with their attorney.
- Develop more DA buy-in with the drug court concept.

Treatment, Case Management, and Drug Testing Services

Satisfaction with Treatment Services: On the online survey, team members were also asked how satisfied they were with the treatment approach and treatment interventions. Possible responses were *Very Satisfied* = 5, *Satisfied* = 4, *So-So* = 3, *Dissatisfied* = 2, and *Very Dissatisfied* = 1. Two team members indicated that they were *very satisfied* with this component of their drug court program and seven members were *satisfied*. Two team members were *dissatisfied* and one was *very dissatisfied* with the treatment approach and interventions being used in the Knox County Drug Court program. The mean rating of all team members was 3.3 on a scale to 5.0.

Satisfaction with Case Management and Monitoring Responsibilities of the Knox County Drug Court: Team members were asked to rate their level of satisfaction with the case management and monitoring responsibilities in the Knox County Drug Court program using a five-point agreement scale (1 = *Very Dissatisfied*, 2 = *Dissatisfied*, 3 = *Neutral*, 4 = *Satisfied*, and 5 = *Very Satisfied*). The mean satisfaction rating for this component of the drug court program was 4.2, with 3 of the 14 respondents being *very satisfied* with this component and the other 8 members being *satisfied*.

Satisfaction with Drug Testing Frequency and Protocol: On the online survey, team members were also asked how satisfied they are with the drug testing frequency and drug testing protocol. Possible responses were *Very Satisfied* = 5, *Satisfied* = 4, *So-So* = 3, *Dissatisfied* = 2, and *Very Dissatisfied* = 1. Four team members indicated that they were *very satisfied* with their drug testing program. The other ten members indicated that they were *satisfied*. The mean rating of all team members was 4.3 on a scale to 5.0.

Effectiveness of Drug Testing: Drug court participants were asked to rate the effectiveness in supporting their recovery efforts. The response choices were 1 (*Poorly*) to 5 (*Very Well*). Twenty of the 25 participants interviewed reported that the degree to which drug testing was effective in supporting their recovery efforts was *very well*. The mean rating was a 4.3 on a 5.0 scale.

The participants gave the following reasons to explain their ratings:

- If you really want to stay clean you will regardless.
- Recovery is more than just not using.
- Should not have as many drug screens nor pay for them because we definitely aren't asking for them.
- Drug testing is important.
- Knowing you're going to be tested is very helpful.
- Really important to me. Gives me something to be held accountable for.
- At least every other day.
- Because when you know you can't get away with it you're more likely not to try.
- Very. Makes me not want to use so I can't fail one.
- I know that if I fail a test there will be consequences that I am not ready to face.
- It's helping me build a firm foundation knowing there will be consequences.
- It help keeps me sober even more
- This is the only part of this program in Knox County that is being done correctly.
- Knowing that I am going to get tested helps me to keep from getting too comfortable/complacent in my recovery.
- Drug testing does help in the beginning because you need something to keep you from using in early recovery but in the end a drug test won't keep you clean - because by then you are either really working a program and want to stay clean or you're not.
- Knowing that the drug tests are coming helps me remember to stay clean. Although they cost too much. There should be discounts for clean drug screens.
- No one wants to fail. Everyone wants to pass their drug test.
- It's necessary whether I like it or not (should be free).
- It keeps me in check. If I want to live my life free from drugs. It has to start now and be clean consistently through the program of recovery.

Within their responses, the participants also provided the following concerns:

- I don't mind drug screens but I feel having to pay for every drug screen we take is excessive. This drug court is a money pit that the participants have to claw their way out.
- I know I'm going to have drug screens so I'm not going to use but what happens when the day comes that I'm not screened?
- Knowing that the drug tests are coming helps me remember to stay clean. Although they cost too much. There should be discounts for clean drug screens.

Judicial Supervision

Judicial leadership is of vital importance to drug courts, and the judge plays a key role in linking participants to treatment and supervision. Drug courts require that judges move beyond their traditional role and encourage appropriate behavior and discourage and sanction inappropriate behavior. The judge is the leader of the drug court team, linking participants to drug treatment and to the criminal justice system. This active, supervising relationship maintained throughout the program increases the likelihood that a participant will remain in treatment and improves the chances for sobriety and law-abiding behavior. Ongoing judicial supervision also communicates to participants – often for the first time – that someone in authority cares about them and is closely monitoring their behavior and progress.

Judicial Support for Treatment: Drug court participants were also asked to what degree the judge supported their substance abuse treatment. Participants were given a rating scale from 1 (poorly) to 5 (extremely well). The mean rating was 4.0 on a scale of 5.0. The responses indicating the judge's support for substance abuse treatment included the following:

- He is not getting real info - I do not hold him totally at fault for this.
- Aside from his decisions made in court I am not aware of his participation in my treatment.
- It would be better if there was more judging by the judge and less by Freda. She has clapped when people have had sanctions.
- Fair man.
- Wants all of us to be better member of society.
- He seems to be pleased with my progress.
- I feel he just wants the very best for me and my addiction. So I will have a better life.
- He talks to me like he understands where I'm coming from.
- The judge has always been supportive of my recovery and I feel wants me to succeed.
- Judge B supports recovery - by using halfway houses, but requiring 12 step meetings, etc.
- He is a caring judge and I didn't know that in the beginning. He really wants you to succeed and cares.
- He's understanding
- He's behind anyone all the way
- He cares about us.
- Judge B and Cerny are both excellent judges and support this program whole heartedly.
- Judge B really cares about each one of us and wants to see us succeed.
- Not really sure, we do not really get to talk to the judge.

When asked what the judge could do to better meet their needs, respondents provided the following information:

Sanctions/Requirements

- By allowing me work in my profession (barber - 40 years)
- By not throwing people back in jail or prison for not graduating.
- But the whole "drug court process" is difficult on recovery when you are trying to do what is right and go to meetings and learn more - they mess with you and sometimes for no reason or the wrong reason and they make it very hard to work an HONEST program. You should be allowed to make a mistake, learn from it and move on without going to jail.
- To be more willing to work on job opportunities instead of denying people jobs.

More time/Individual time with Judge

- Being able to talk to him privately if you have problems or concerns (without drug court staff).
- I would like to see more one-on-one between the Judge and participants.
- Talk one-on-one
- If he met with us 1 on 1 occasionally.
- I wish participants would have time to privately talk to the judge without Drug Court staff (Freda) involved to tell our concerns.
- Be more involved with participants.
- More one-on-one time
- More individual contact.
- Ask what is going on more often.
- Maybe listen to us on a more personal level.
- By being a full time Drug Court judge only.
- Play a better part in the program other than 30 minutes a week.
- I think he does an awesome job but maybe could attend some of the classes.

Nothing/Don't know/Other

- He really has met my needs as a drug court participant.
- Don't have a clue. I am still not aware of his participation.
- Yes
- NA
- Don't know

Effectiveness of Status Hearings: Drug court participants were asked to rate the effectiveness of routine court appearances in supporting their recovery efforts. The response scale was 1 (*Poorly*) to 5 (*Extremely Well*). The mean rating was 4.1 on a scale to 5.0. Nine of the participants reported that status hearings were extremely important in supporting their recovery efforts. The participants provide the following reasons for their ratings of the effectiveness of status hearings:

- Not been in program long enough to answer.
- If someone is doing what they are supposed to be doing then it is a waste of time; however, if someone has screwed up it is that which may get them back on track.
- Tries to see a change in everyone.
- Too many and too tic tac.
- Going once a week is too much. Once or twice a month is enough.
- It lets you know that they say one thing to you and something different to the judge. They won't confront you with the problem.
- This is good for me to have to answer the judge and to get to speak with him.
- I enjoy seeing Judge B.
- It's nice to be told you're doing well, and also helps to be held accountable for your actions.
- Being told you're doing a good job is helpful.
- This is a good way to be held accountable.
- A double check on my wrongs in front of the judge is sometimes needed. It has given me a reality check.
- The judge needs to know our progress.
- Being accountable.
- They are very effective for me. It's hard to face him when it's bad and there are bad consequences. It is great and good for self esteem when he is proud of your achievements.
- I like hearing from the judge how I'm doing in the program.

- I like to know I'm doing good.
- He is like the granddaddy of Drug Court. Oversees us.
- Lets me know how I'm doing

Satisfaction with Judicial Supervision: Team members were asked to rate their level of satisfaction with the judicial supervision component of the Knox County Drug Court program using a five-point agreement scale (1 = *Very Dissatisfied*, 2 = *Dissatisfied*, 3 = *Neutral*, 4 = *Satisfied*, and 5 = *Very Satisfied*). The mean satisfaction rating for this component was 4.1, with 3 of the 14 respondents being *very satisfied* with this component, and 9 members being *satisfied*.

Incentives and Sanctions

Drug courts provide treatment and supervision for persons with chronic, relapsing addictive disorders. Treatment and supervision approaches are based on behavioral principles and social learning theory, in which abstinence and recovery is predicated upon learning experiences, and in which infractions, relapses, and other sanctionable behaviors provide an opportunity to teach participants something about the recovery process. Incentives and sanctions are key elements of this process, and both positive and negative behaviors are addressed through use of incentives and sanctions.

Drug courts should reward cooperation as well as respond to noncompliance. Small rewards for incremental successes have an important effect on a participant's sense of purpose and accomplishment. Praise from the drug court judge for regular attendance or for a period of clean drug tests, encouragement from the treatment staff or the judge at particularly difficult times, and ceremonies in which tokens of accomplishment are rewarded in open court for completing a particular phase of treatment are all small but very important rewards that bolster confidence and give inspiration to continue.

Prevalence and Effectiveness of Incentives: Drug court team members were asked to indicate how often each incentive is used and the perceived effectiveness of each incentive for encouraging program compliance. The response scale for *prevalence* was Very Often = 5, Often = 4, Sometimes = 3, Seldom = 2, and Hardly Ever = 1. The *effectiveness* response scale was *Very Effective* = 5, *Effective* = 4, *So-So* = 3, *Ineffective* = 2, and *Very Ineffective* = 1. Not Sure and Not Applicable responses were also allowed, but are not included in the adjusted mean calculations. Team members were also asked to list additional incentives used in the program that were not listed in the Policies and Procedures Manual.

Participants were also asked to rate the effectiveness of the each incentive for encouraging program compliance, using the same five-point scale.

Knox County Drug Court Incentives

Incentive	Effectiveness Rating		Frequency Rating (Team)
	Team (1.0-5.0)	Participants (1.0-5.0)	
Encouragement and praise from the bench	4.1	4.0	4.3
Ceremonies and tokens of progress, including advancement to the next phase of treatment	4.4	3.3	3.9
Reduced supervision	3.9	3.7	3.5
Decreased frequency of court appearances	3.9	3.9	3.7
Reduced fees or fines	4.0	3.0	3.8

Dismissal of criminal charges or reduction in the term of probation	3.8	3.1	2.9
Reduced or suspended incarceration	4.2	3.7	3.0
Additional Incentives Used: (Team Members) <ul style="list-style-type: none"> ▪ Participant of the Week (POW). ▪ Milestone celebrations. ▪ Medication books and coins upon phase promotion. ▪ Work with Traffic Count to assist participants to get driver's license restored. ▪ Pro bono attorney assistance on custody matters, etc. ▪ Outings during counseling sessions. ▪ Congratulatory house plant when own housing is obtained. ▪ Reduction of community service. Other Comments: <ul style="list-style-type: none"> ▪ Program is leaning towards being too punitive. ▪ Court discourages other partners from providing their own incentives/rewards. 			

Conclusions Regarding Incentives:

- There is only *some* consistency between how team members and participants rate the effectiveness of individual incentives in helping to maintain compliance with the requirements of the program. For example, both team members and participants rank the effectiveness of *dismissal of criminal charges or reduction in the term of probation* relatively low, compared to other incentives. On the other hand, while team members ranked *ceremonies and tokens of progress and advancement to the next phase* as the most effective incentive, participants ranked in lower than four other incentives.
- Team members indicate there is relative consistency between the perceived effectiveness of an individual incentive and the frequency with which individual incentives are applied.

Knox County Drug Court Sanctions

Sanction	Effectiveness Rating		Frequency Rating (Team)
	Team (1.0-5.0)	Participants (1.0-5.0)	
Warnings and admonishment from the bench in open court	4.1	3.1	4.3
Demotion to earlier program phases	2.7	2.6	2.1
Increased frequency of testing and court appearances	3.8	2.5	3.6
Confinement in the courtroom or jury boxes	2.5	2.3	1.1
Increased monitoring and/or treatment intensity	3.9	2.5	3.5
Fines	2.8	1.9	1.5
Required community service or work programs	3.7	2.5	3.8
Escalating periods of jail confinement	3.7	2.9	3.8
Additional Sanctions Used: (Team Members) <ul style="list-style-type: none"> ▪ Saturday responsibility classes. ▪ Writing papers on selected issues for delivery in court and in treatment sessions. 			

Sanction	Effectiveness Rating		Frequency Rating (Team)
	Team (1.0-5.0)	Participants (1.0-5.0)	
<ul style="list-style-type: none">Delay in program advancement.			

Conclusion Regarding Sanctions:

- With the exception of *demotion to a prior phase of treatment*, both team members and participants are relatively consistent in their rankings of the effectiveness of the various sanctions used by the court. Participants ranked the effectiveness of *demotion to a previous phase of treatment* more highly than did team members. Overall, participants rated sanctions as being less effective than did team members.
- Team members indicated there is relative consistency in the perceived effectiveness and the frequency in which incentives are applied.

Consistency of Application of Incentives and Sanctions

With the exception of one team member, the other team members reported that they either *strongly agreed* or *agreed* that the judge responds consistently to each participant's positive efforts as well as to noncompliant behavior.

Satisfaction with Criteria for and Application of Incentives and Sanctions: Team members were asked to rate their level of satisfaction with the criteria for and application of sanctions using a five-point agreement scale (1 = Very Dissatisfied, 2 = Dissatisfied, 3 = Neutral, 4 = Satisfied, and 5 = Very Satisfied.). The mean satisfaction rating for its incentives and sanctions criteria was 3.2, with 1 of the 14 respondents being *very satisfied* with this component, 6 members being *satisfied*, and one member being *neutral*. Four members were *dissatisfied* with the criteria for and application of incentives and sanctions, and one team member was *very dissatisfied*.

Team Member Recommendations for Improving the Use of Incentives and Sanctions:

- Be more consistent.
- Develop more incentives.
- Be more creative in the use of sanctions.
- Take participants into custody at court, rather than letting them serve jail time at their convenience.
- Work with the Drug Court treatment team to work through possibilities.
- Allow individual team members (partners) to implement a rewards program.

Graduation from the Drug Court Program

Difficulties Related to Graduation: Drug court team members were asked if there have been difficulties in graduating participants from the program. Seven of the fourteen team members reported there *have been* difficulties in graduating participants from the program. Drug court team members made the following comments regarding any difficulties related to graduating participants from the program:

Relapse and Other Non-Compliant Behavior

- Participants absconding, Relapses, Revocations

Lack of Team Work

- Another is probation officers often enable participants or refer them to services without communicating it to Drug Court. When the probation officer enables the participant this sets up a triangulation situation with the Officer and Drug Court staff. Then some of the probation officers do

not communicate well with Drug Court regarding situations in which they have dealt with the participant and do not inform Drug Court, some of which included giving the participant permission to be outside the county and the participant missing drug screens and counseling. Some probation officers will go to the Judge after the team made a decision regarding a participant and ask the Judge to change the team decision instead of bring it up at the next drug court team meeting. This situation creates distrust and the participant sees this. While Drug Court staff is trying to work out the situation with the probation officer the immediate problem with the participant is put on hold because Drug Court is unsure of what is going on. The participants often talk with each other and relate to each other how to get situations like this going to take the focus off themselves. The participant will often tell the drug court staff they are going to their probation officer to fix whatever situation they have gotten themselves into or to use the officer to get out of something drug court staff has asked them to do. It appears to me that it really is a power/control issue with some probation officers.

Financial and Time Issues

- Typically financial issues are tough to overcome: drug screen fees, probation fees, etc. Time management is an issue; Drug Court participants are usually living at a Halfway House (attending house meetings), reporting to a Probation Office, attending Drug Court classes, attending weekly 3 AA/NA meetings, completing regular community service, and are expected to keep a full time job. On top of all this, they are dealing with the stresses of staying clean and learning a new way to live. Many participants struggle to meet this schedule, especially in the first several weeks. Very often, the participants get overwhelmed, and they relapse.
- Drug court budgeting makes Drug Court fees a priority. Very little consideration is given to the victims and the restitution.

Lack of Progress in Program:

- It seems as though a lot of people get to Phase II and their progress stalls out. Some participants have been held up by financial responsibilities, although Drug Court seems to be working with offenders more on monies owed. There is a higher cost associated with Drug Court than regular probation offenders are paying. Some offenders become overwhelmed with their schedule when they graduate from a halfway house and are hit with the regular drug court schedule.
- Participants get so far in the program, then regress (sometimes significantly) in Phases II & III.
- Participants being overwhelmed w/requirements, schedule and cost of the program.
- There is time when a participant stays in the program two years and that's too much time in Drug Court if you do what you got to do and not get into any problems.

Recommendations for Improving the Graduation Rate: Team members provided the following specific recommendations to improve the graduation rate from their drug court program:

- Having own residential facility for participants to live in.
- Team building with probation officers.
- Additional training for probation officers regarding goals of drug court and how they can support treatment/recovery better.
- More consistency in application of sanctions and requirements.
- Make drug court program more positive and less punitive.
- Follow the model and keep participants moving up in phase.
- Team sticking to their roles and more consistency in team decision making.
- Increased attention to showing participants how to have fun without drugs.
- Development of additional incentives. "Being out of jail" is not incentive enough.

- Develop aftercare program and have them come back and socialize with active participants.

Satisfaction with Graduation and Termination Criteria: Team members were asked to rate their level of satisfaction with its graduation and termination criteria using a five-point agreement scale (1 = *Very Dissatisfied*, 2 = *Dissatisfied*, 3 = *Neutral*, 4 = *Satisfied*, and 5 = *Very Satisfied*). The mean satisfaction rating for its target population was 4.0 on a scale to 5.0, with 2 of the 14 respondents being *very satisfied* with this component, and 10 members being *satisfied*.

Program Evaluation and Monitoring

Fundamental to the effective operation of drug courts are coordinated management, monitoring, and evaluation systems. Management and monitoring systems provide timely and accurate information about program operations to the drug court's managers, enabling them to keep the program on course, identify developing problems, and make appropriate procedural changes. Program management provides the information needed for day-to-day operations and for planning, monitoring, and evaluation. Program monitoring provides oversight and periodic measurements of the program's performance against its stated goals and objectives.

Team members were asked to rate their level of satisfaction with the drug court program's evaluation and monitoring plan using a five-point agreement scale (1 = *Very Dissatisfied*, 2 = *Dissatisfied*, 3 = *Neutral*, 4 = *Satisfied*, and 5 = *Very Satisfied*). The mean satisfaction rating for its program evaluation and monitoring plan was 3.9 on a scale to 5.0, with 3 of the 14 respondents being *very satisfied* and 4 team members being *satisfied*.

Staff Training

Periodic education and training ensures that the drug court's goals and objectives, as well as policies and procedures, are understood not only by the drug court leaders and senior managers, but also by those indirectly involved in the program. Education and training programs also help maintain a high level of professionalism, provide a forum for solidifying relationships among criminal justice and drug treatment personnel, and promote a spirit of commitment and collaboration. All drug court staff should be involved in education and training. Interdisciplinary education exposes criminal justice officials to treatment issues, and treatment staff to criminal justice issues. It also develops shared understandings of the values, goals, and operating procedures of both the treatment and the justice systems. Judges and court personnel typically need to learn about the nature of alcohol and drug problems, and the theories and practices supporting specific treatment approaches. Treatment providers typically need to become familiar with criminal justice accountability issues and court operations. All need to understand and comply with drug testing standards and procedures.

Drug court team members were asked to identify from a list of training topics those topics for which they have received training since becoming a member of the drug court team. They were also asked to indicate topics for which they or other members of the drug court team needed additional training. As the table below clearly indicates, members of the team have received substantial training since becoming members of the team. However, given the turnover of team members and the demands of work outside the drug court team, no drug court team member received training on all the topics listed.

Training Received: Individual drug court team members indicated that they had received training on the topics described in the table below, since joining the Knox County Drug Court team.

Training Received

Training Topic	Yes	No	Not Sure No Response
Goals and philosophy of drug courts			
Nature of AOD abuse, its treatment and terminology	9	4	1
Dynamics of abstinence and techniques for preventing relapse	10	4	0
Responses to relapse and to non-compliance with program requirements	9	5	0
Basic legal requirements of the drug court program and an overview of local CJS policies, procedures, and terminology	10	4	0
Drug testing standards and procedures	7	5	2
Sensitivity to racial, gender, ethnic, and sexual orientation as they affect operations of the drug court	9	3	2
Interrelationships of co-occurring conditions such as AOD abuse and mental illness	8	6	0
Federal, state, and local confidentiality requirements	10	4	0
Effective use of incentives and sanctions	9	3	2
Effective strategies for sustaining your drug court program	9	5	0
Utilization of performance data	9	5	0
<i>Additional Training Attended Since Joining the Knox County Drug Court Team: (Five respondents)</i> <ul style="list-style-type: none"> ▪ Several ▪ Computer training; Addiction Severity Index; Inward Healing-Using affirmation and visualization to treat addictive diseases; Reflections on the Physiology of trauma and vicarious trauma; Hepatitis C; Methamphetamine Drug Awareness; Issues that impact drug courts & other criminal justice based treatment services; Healing the trauma that binds; Balancing the needs of the child and family reunification; The process of addiction and recovery; Ending discrimination against people with alcohol and drug problems; Effective use of the media; PharmChem Drug of abuse patch training; Matrix Model; Healing an Angry Heart; Suboxone Treatment; Eating disorders-chemical issues in 12-Step Recovery treatment; From conflict to cooperation; Collaborating Systems; Neurobiology of addiction; Understanding the effects of trauma; The role of law enforcement; Listening beyond the words; Consultation; Basic Drug Court training; Motivating policy makers to increase their investments in drug courts; HIV. ▪ SASSI ▪ My answers above reflect training given by our drug court. I was allowed to go to the 2008 Drug Court Conference and received some training there. However, last year (2009) I was denied the opportunity to attend the Drug Court Conference. It is my understanding that I'll be allowed to attend this year. Every other year seems fair. ▪ I was able to go to the drug court conference in 2007 and have not been given the opportunity to attend since that time. 			

Training Needs: Drug court team members also identified several specific training needs, as indicated in the table below. Clearly, drug court team members perceive the need for additional training related to

the nature of substance abuse, its treatment and terminology, dynamics of abstinence and techniques for preventing relapse, responses to relapse and to non-compliance with program requirements, the interrelationships of co-occurring conditions such as substance abuse and mental illness, and effective use of incentives and sanctions.

Additional Training Needed

Training Topic	Yes	No	Not Sure
Goals and philosophy of drug courts	6	1	5
Nature of AOD abuse, its treatment and terminology	4	4	5
Dynamics of abstinence and techniques for preventing relapse	5	3	3
Responses to relapse and to non-compliance with program requirements	6	2	4
Basic legal requirements of the drug court program and an overview of local CJS policies, procedures, and terminology	6	2	4
Drug testing standards and procedures	3	5	4
Sensitivity to racial, gender, ethnic, and sexual orientation as they affect operations of the drug court	6	2	4
Interrelationships of co-occurring conditions such as AOD abuse and mental illness	6	1	5
Federal, state, and local confidentiality requirements	4	3	5
Effective use of incentives and sanctions	7	2	4
Effective strategies for sustaining your drug court program	6	3	3
Utilization of performance data	6	3	3
Additional Training Needs: <ul style="list-style-type: none"> ▪ Team building; the importance of communication, enabling. ▪ Copy of the policy/procedures manual. ▪ How the drug court was designed to operate. ▪ Grant writing ▪ Roles, responsibilities and job requirements for drug court staff. 			

Overall Assessment of the Drug Court Program

Implementation of the 10 Key Components of Drug Courts: Team members were asked to assess the extent to which the Knox County Drug Court has been effective in implementing the 10 key components established by the National Association of Drug Court Professionals, and as published by the U.S. Department of Justice (1997). The number of team members (out of 6 total) who rated the Knox County Drug Court's implementation of each of the 10 key components as "very effective" is described in the table below as well as mean ratings for the team members. Collectively, the team members rated effectiveness of implementation of *none* of the Key Components as being *very effective*. The lowest rating provided was for Key Component #9 (continuing interdisciplinary training).

Assessment of Key Components of Effective Drug Courts

Drug Court Component	Very Effective Ratings	Mean Rating
Component 1: Integrating alcohol and other drug treatment services with justice system case processing.	3	4.3

Drug Court Component	Very Effective Ratings	Mean Rating
Component 2: Using a nonadversarial approach, in which prosecution and defense counsel promote public safety while protecting participants' due process rights.	3	4.1
Component 3: Identifying eligible participants early and promptly placing them in the drug court program.	2	3.8
Component 4: Providing access to a continuum of alcohol, drug, and other related treatment and rehabilitation services.	3	4.2
Component 5: Monitoring abstinence by frequent alcohol and other drug testing.	4	4.3
Component 6: Using a coordinated strategy to govern drug court responses to participants' compliance.	1	3.8
Component 7: Providing essential ongoing judicial interaction to each drug court participant.	6	4.5
Component 8: Monitoring and evaluating the achievement of program goals to gauge effectiveness.	2	3.8
Component 9: Continuing interdisciplinary education which promotes effective drug court planning, implementation, and operations.	2	3.6
Component 10: Forging partnerships among drug courts, public agencies, and community-based organizations which generates local support and enhances drug court effectiveness.	2	3.7

Effectiveness of the Drug Court Program in Meeting Recovery Needs: Drug court participants were asked to provide an overall rating of the effectiveness of the drug court program in meeting their recovery needs. The response choices were 1 (Poorly) to 5 (Extremely Well). Twenty-three of the 25 participants indicated the drug court program met their recovery needs *extremely well*. The mean response was 2.8 on a 5.0 scale.

Participants provided the following explanations for their ratings:

Positive Comments:

- I know what I need to do and if I want to stay clean I'm going to.
- Always wanting recovery before anything else.
- They give us tools we need.
- It has helped me gain trust with family, faced issues during my addiction. Helped me to be honest in my affairs.

Negative Comments:

- There is no recovery here. Too much time is spent repeating the same stuff over and over again.
- Once a class is graduated, it should not be attended for another 6 months or longer.
- My halfway house provides a much better service for my recovery needs.
- We do the same handouts over and over. There is no change in two years. I've done the same handout over 50 times.

- I get much more recovery at STEPS. You cannot be honest about your feelings because this is not about recovery.
- Too many rules that are based only on client needs.
- I'm told to go to meetings. I already know that and I'm not sure what the one on one is all about. It's a waste of time. I went and got my own therapist.
- Because it seems like they like to have authority over your whole life.
- I don't feel like they realize that being here 5 nights a week can be very tiring. Being too tired is not good either.
- I'm at Jellinek and get most of my recovery needs met there.
- They need to get new material. Same old stuff for last two years...
- Cannot meet my bills with working part time.
- They need more RECOVERY and less prying into personal lives. Focus more on teaching how to live a life of recovery.
- After being in the program for almost 2 years and doing the same literature the whole time I don't think there is anything new to help in my recovery; that's why I go to meetings.
- They help but it takes us all.

Neutral Comments:

- Didn't rate because I get my treatment at Jellinek, but I believe they do a good job.

Life Improvements Related to Drug Court Participation: Drug court participants were asked in what ways has participating in the Knox County Drug Court program improved their life. In addition to becoming drug-free, responses clustered into the following categories: (1) enhanced personal gains; and (2) reduction in jail time.

Specifically, the participants identified the following ways in which the program has improved their life.

Sobriety

- It has given me another chance at being "free" and living a healthy and happy life.
- I am not using drugs today.
- Forced me to come to terms with my addiction.
- The consequences of drug use have helped keep me clean.
- In all ways....Drug Court gave me my life back!!
- It has changed my life completely for the better.
- Kept me clean and sober
- I'm clean and finding out about myself.
- In many ways. The Drug Court program and Judge B have saved my life.
- Just by staying clean.
- I've learned how to live life clean and sober, how to have fun in recovery, relapse prevention, my spiritual connection grows stronger every day, how to treat myself better - physically, my self esteem is a lot better, I've been employed for a year and a half - learning how to be independent.
- Helped me stay clean.
- It has taught me how to stay sober.

Personal Gains

- In every way. A more manageable life. Less stress. More tools to face life's challenges. Respect. Credibility. Responsibility. Love. Perseverance. Integrity. Hope, above all.
- Anger management classes and mental health provider referral

- Emotional, spiritual, monetary. I've grown up. I'm not a kid anymore; I'm an adult.
- Brought trust with wife back because she knows I want to do right.
- I have an apartment now and vehicle. I have been clean 9 months.

Not in Jail

- It has helped me get back on my feet and kept me out of prison.
- Kept me out of jail.

Recommending the Drug Court Program to Others: Ten of the participants indicated they would recommend the Knox County Drug Court program to others, citing the following explanations:

- Yes, if they are "truly ready to make the effort required to change their life then this would be a good program.
- Yes, it can help if you let and want to.
- Yes, it does work if you truly want to change.
- Yes, It has changed my life and it has changed me for the better.
- Yes, I know it helped me and I want to tell others.
- Yes, because if you have a problem you need to learn more about it to stay clean.
- Yes, if they want to change and are willing to be told what to do it will look good for them to complete.
- Yes, I have recommended it already. I would not wish drugs on anyone.
- Yes, I have to a housemate going through CAP.
- Yes, if it was their last resort.

Fifteen participants reported that they would not recommend the program to others, citing the following reasons.

- No. It sets you up for failure if they would communicate and let us know what's going on instead of being sneaky. It's just not beneficial. People graduate and relapse.
- No. It's not about recovery.
- No. They set you up for failure.
- No. It's too much it feels like a setup sometimes.
- No. Too hard on some things that tend to cause relapse.
- No. Because it is very difficult to succeed in the program.
- No. For the amount of money I have spent of drug screens I could have gone to inpatient treatment.
- No. Fees for drug screens are too high. Jobs are too picky. They want to nit-pick about jobs.
- No. Program is too long, takes up too much time and is almost impossible.

Overall Participant Ratings of Drug Court Program Effectiveness: Participants were asked to rate the overall effectiveness of the Knox County Drug Court program using a scale of 1 (Poorly) to 5 = Extremely Well. Their mean rating was 3.2 on a scale to 5.0. When asked to explain their ratings, participants provided the following responses:

Positive Comments:

- If you want to stay clean you are doing to. They teach you nothing about recovery.
- The Drug Court program can be effective but the participants deserve more respect that they are given.
- Helping get life back in order.
- I have it.
- If people are doing what they are supposed to do, then the program will work.

- The drug tests help me more than anything.
- It works for me. I can't speak for other people.
- Do it or jail.
- For me very effective. For others, it depends on them.
- For me personally.
- It works you have to want it.
- I've stayed clean and started working.

Negative Comments:

- 90% of grads relapse one week later.
- Money would be much better spent building more rehab centers and halfway houses.
- This is not about recovery.
- I get more recovery out of EM Jellinek which should be a good enough requirement instead of doing Drug Court.
- Program longer than my sentence.

Neutral Comments:

- Undecided.

Summary Participant Ratings: Drug court participants who were interviewed during the process evaluation rated the effectiveness of the drug court program quite highly, across six different key indicators. A summary of their ratings is provided below.

Participant Ratings of the Knox County Drug Court Program

Participant Ratings	Mean Max = 5.0
To what degree does the judge support your substance abuse treatment?	4.0
How well do the other Drug Court staff (attorney, drug court coordinator, case manager, treatment staff, probation officer, drug tester, etc.) respond to your needs.	3.1
How effective is drug testing in supporting your recovery?	4.3
How effective are routine status calls with the judge in supporting your recovery?	4.1
How effective is the program in meeting your recovery needs?	2.8
What is the overall effectiveness of the Drug Court program?	3.2

Strengths of the Drug Court Program: Drug court team members identified a number of strengths related to their drug court program, especially the strength of team members and the partnering agencies, including the following:

- Knowledge of the Disease of Addiction and the Legal system
- Concern and diligence
- Always looking for ways to improve the program. Always seeking new resources for participants. Try to talk through problems within treatment team. Willing to learn.
- Employees are about their work. They have a solid understanding of issues related to substance abuse. The Knox County Drug Court has great communication with other agencies involved in a participant's supervision and treatment.
- The treatment is very intense, particularly given each participant reports to a halfway house, a

probation agency, and Knox County Drug Court. Some participants report to additional treatment agencies.

- Communication during emergencies
- Some staff members are devoted to the program. There is immense support from the Judge.
- Strong core Team very open to talk/discuss issues
- Partnering agencies willing to work together
- The communication from some drug court staff members in keeping team members informed has certainly been a strength in recent months. The participation by the Judge and his concern for the participants. The team members support for the program participants.
- The treatment team meets on a regular basis and the Judge is very involved.
- Caring about the well being of the participant.

Drug court participants also identified a number of strengths related to the program, including drug testing, program design and services, and positive results experienced by participants. Specific comments included the following:

Program Design/Services

- The accountability that drug court requires.
- Consequences for your behaviors.
- Making us go to outside meetings (NA).
- Meetings
- Doing step work. Women's group (they need to not put men/women together 5 nights a week and then tell us we can't be friends). Support group. The lighter schedule with higher phases.
- The classes.
- The classes
- Spirituality and one-on-one participation.
- Opportunity
- Probably keeping people scared because they know if they mess up that their going back to jail or prison.
- They send everyone to jail for discipline.
- Staying out of jail.
- 48 hr

Sobriety

- That I am clean and sober today and have found a new way to live.
- Keeping us clean.
- Keeping clean.
- Being given the tools to learn how to live an honest, clean and sober life.

Drug Testing

- Drug tests
- Drug screens weekly
- Drug screens
- Staying on drug screens.

Staff

- Court and Judge B. Gloria, and Freda can be an asset when she will just listen and does not have to be right (they need to have less of their own opinion).

Other

- That you are here looking at this program.

Recommendations for Improving the Drug Court Program

Drug court team members identified the following recommendations to improve the drug court program.

- Reduce intensive and requirements of the drug court program to make it more attractive to those charged with less serious offenses.
- Ongoing training with all service providers as a team.
- Increase number of Drug Court staff.
- Increase fellowship among team members.
- Increase communication among team members.
- Provide ongoing training to all team members.
- Provide team building activities/training for team.
- Obtain funding for Drug Court funded housing for participants others won't serve.
- Identify employers in the community who will hire drug court participants.
- Enhance mental health assessment and treatment services for participants who need such services.
- The drug court program is very intensive. Reframe the whole program in a way that enhances the sense of pride and accomplishment.
- Whenever sanctions are applied, from them in terms of the team (all team members) caring about their success in the program, help participants connect the sanction with their behavior.
- Be consistent in the application of sanctions and incentives.
- As team members, don't take disagreements personally.
- Consider what impact consequences on one person may have on all participants.
- Don't seek recommendations outside of treatment team.
- Develop more incentives.
- Consider opinions of all team members, not just "treatment" staff.
- Model "sober fun". Provide opportunities for participants to get together for fun activities.
- Educate the public on the role and value of the program.
- Open a residential program.
- Develop a work locator/job finder/skills development program.
- Mentor new residential/halfway homes.
- Members know and abide by their roles on the team.
- Recognize that it is more therapeutic to discharge persons not responding to the drug court program.
- Recognize that the team derives strength from its diversity. Develop ways to resolve conflict constructively.
- Refrain from discounting other team members' opinions.

Drug court participants provided the following recommendations for improving the drug court program:

- More accountable and professional staff.
- Provide more educational materials for participants – handouts, books, etc.
- Revise program to allow more outside meetings rather than evening sessions at the drug court treatment site.
- Cancel/improve day program.
- Provide more family interaction/treatment.
- Allow one-on-one time with the judge.
- Make the program less intensive and less structured. Be more flexible about certain requirements.

- Eliminate cost of drug screens.
- Be more caring about people with jobs.
- Be more flexible about the types of jobs participants can accept.
- Be consistent in the application of incentives and sanctions. Have the same rules for everyone.
- Solicit and listen to our opinions about how to improve/enhance the program.

Consensus Improvement Recommendations

During interviews with drug court team members, aggregate results of the online survey were presented, and team members were also asked to rate each recommendation offered in the online survey (including theirs and other staff members' recommendations). The purpose of these additional activities was to reach a consensus rating of each recommendation.

A consensus rating was developed for each of the improvement recommendations provided. The highest rating possible for each recommendation was 5.0 (strong agreement by all team members with the recommendation). Fourteen team members provided their ratings. The highest rated recommendations included the following:

- 4.8: Develop a work locator/job finder/skills development program.
- 4.7: Educate the public on the role and the value of the program.
- 4.7: Develop more DA buy-in with the drug court concept.
- 4.6: Refrain from discounting other team members' opinions.
- 4.6: Waive some fees, especially drug testing fees.
- 4.5: Make the drug court program more positive and less punitive.
- 4.5: Team sticking to their roles and more consistency in team decision making.
- 4.5: Increased attention to showing participants how to have fun without drugs.
- 4.5: Recognize that the team derives strength from its diversity. Develop ways to resolve conflict constructively.
- 4.4: Work with partnering agencies to find more positive sanctions.
- 4.4: Team building so that the team comes together as one.
- 4.4: Follow the model and keep participants moving up in phase.
- 4.4: Development of additional incentives. "Being out of jail" is not incentive enough.
- 4.4: Be more creative in the use of sanctions.
- 4.4: Increase understanding and appreciation of members' roles and how they contribute to the well being of the participants.
- 4.4: Increase fellowship opportunities.
- 4.4: Include all drug court team members in decision making process.
- 4.4: Provide ongoing training to all team members.
- 4.4: Identify employers in the community who will hire drug court participants.
- 4.4: Whenever sanctions are applied, frame them in terms of the team (all team members) caring about their success in the program, and help participants connect the sanction with them behavior.
- 4.4: As team members, don't take disagreements personally.
- 4.4: Model "sober fun". Provide opportunities for participants to get together for fun activities.

These 23 recommendations received strong agreement from all team members. As can be seen, very few of these recommendations will require substantial funding to achieve. The Knox County Drug Court team should review these improvement recommendations on a priority basis to develop a plan to improve or enhance their drug court program.

Summary Conclusions and Recommendations

Summary of Process Evaluation Findings

The goals of the process evaluation were to: (1) determine whether the Knox County Drug Court program has met goals and objectives related to implementation of services; (2) describe the specific benefits of the drug court program to participants, to the community, and to the criminal justice system; (3) identify perceived strengths and weakness of the drug court program from the perspectives of staff and participants; (4) describe the major components of the drug court program, their effectiveness, and changes that have occurred over time; (5) examine the degree of coordination between agencies involved in the drug court program, and the support for the program from these agencies; and (6) identify recommendations by staff and participants for improving the drug court program. The process evaluation included observation of drug court activities, review of documents related to program implementation, services, and policies and procedures; interview of drug court team members and current and former participants, an electronic survey of drug court staff, and review of case files and information from the program's management information system.

Overall, results from the process evaluation indicate that the Knox County Drug Court program is operating in substantial compliance with the its goals and objectives, its policy and procedures manual, and the 10 key components of effective adult drug court programs.

Identified Strengths of the Knox County Drug Court Program

A number of significant strengths were identified within the Knox County Drug Court program, including the following:

Strength of the Drug Court Team: The members of the drug court team are caring and talented individuals who support the goals and processes of the Knox County Drug Court program. A key issue facing drug courts is the turnover of team members. Staff turnover requires that drug courts provide ongoing training to the team as a whole, as well as role specific training to each of the team members. Drug court teams must make special efforts to incorporate new members into the team, including a comprehensive orientation to the drug court team and its policies and procedures, and attention to how to monitor team processes to allow for all members to provide input to deliberations. Most have been associated with this program for at least two years; however at least two have been members of the team for less time.

Strengths of the Drug Court Program: Drug court team members identified a number of strengths related to their drug court program, especially the strength of team members and the partnering agencies, including the following:

- Knowledge of the Disease of Addiction and the Legal system
- Concern and diligence
- Always looking for ways to improve the program. Always seeking new resources for participants. Try to talk through problems within treatment team. Willing to learn.
- Employees are about their work. They have a solid understanding of issues related to substance abuse. The Knox County Drug Court has great communication with other agencies involved in a participant's supervision and treatment.
- Communication during emergencies
- Some staff members are devoted to the program. There is immense support from the Judge.
- Strong core Team very open to talk/discuss issues
- Partnering agencies willing to work together
- The communication from some drug court staff members in keeping team members informed has certainly been a strength in recent months. The participation by the Judge and his concern for the

- participants. The team members support for the program participants.
- The treatment team meets on a regular basis and the Judge is very involved.
 - Caring about the well being of the participant.

Supportiveness of Individual Team Members: Team members were also asked to rate their perceived degree of supportiveness of individual team members. The composite team rating was 4.3 on a scale to 5.0.

Satisfaction with the Key Components of their Drug Court Program: Drug court team members were asked to rate their level of satisfaction with sixteen components of a drug court program. These components included:

- Mission
- Goals and objectives
- Decision-making processes
- Roles and responsibilities of team members
- Criteria for target population
- Program model (pre- or post-adjudication)
- Judicial supervision
- Screening and referral process
- Plan for acquiring needed resources and services
- Treatment approach and treatment interventions
- Drug testing frequency and protocol
- Case management and monitoring responsibilities
- Incentives and sanctions criteria
- Graduation and termination criteria
- Program evaluation and monitoring plan
- Sustainability plan

Knox County team members reported that they were *very satisfied* or *satisfied* with 11 of these 16 components. The only components which were rated lower than unanimous satisfaction were (1) their plan for acquiring needed resources and services, (2) their treatment approach and treatment interventions, (3) their incentives and sanctions criteria, (4) their program evaluation and monitoring plan, and (5) their sustainability plan. These areas of less than universal satisfaction should be considered when developing the task plan envisioned in Recommendation #1 below.

Effectiveness of Referral and Intake Process: Drug court team members were asked to rate the level of effectiveness with three measures of their referral and intake process: (1) effectiveness in identifying potentially eligible persons, (2) effectiveness in screening out non-appropriate persons, and (3) effectiveness in screening in appropriate persons. Knox County team members reported that their referral and screening process was *effective* in meeting all three of these measures. Overall, team members reported that they were satisfied with their referral and intake process.

Adherence with Eligibility Criteria: When asked to what extent the Knox County Drug Court abides by its eligibility criteria, seven of the fourteen drug court team members indicated that the drug court *always* abided by its eligibility criteria while another 3 team members reported that the drug court *often* abided by its eligibility criteria. Four team members indicated that he/she *did not know*. The mean rating was 4.7 on a scale to 5.0.

Effectiveness of Team/Judicial Review Process: Drug court team members were asked to rate their level of agreement with seven indicators of team effectiveness: (1) the drug court team maintains ongoing communication, (2) team members felt free to make their opinions known to other members, (3) team members fulfill their roles and responsibilities, (4) the team operates by the latest policy and procedures manual, (5) the frequency of court staffings is sufficient, (6) their drug testing protocol is effective, and (7) written progress reports are submitted consistently. The Knox County Drug Court team members reported *agreement* with each of these indicators of team effectiveness, with the exception of the consistency with which written reports are submitted.

Consistency in Applying Incentives and Sanctions: Each team member reported that they either *strongly agreed* or *agreed* that the judge responds consistently to each participant's positive efforts as well as to noncompliant behavior. The mean rating was 4.2 on a scale to 5.0.

Effectiveness of Drug Testing process in Supporting Participants' Recovery Efforts: Participants were asked to rate the effectiveness of drug testing in supporting their recovery efforts. Participants in the Knox County Drug Court program reported that their program's drug testing was *effective* to *very effective* in supporting their recovery efforts.

Program Monitoring and Management Information System: Fundamental to the effective operation of drug courts are coordinated management, monitoring, and evaluation systems. The design and operation of an effective drug court program results from thorough initial planning, clearly defined program goals, and inherent flexibility to make modifications as necessary. Management and monitoring systems provide timely and accurate information about program operations to the drug court's managers, enabling them to keep the program on course, identify developing problems, and make appropriate procedural changes.

The Knox County Drug Court maintains a database holding information of drug court participants and candidates. The database has a multi-level security system built into it to help ensure participants confidentiality. This database is used to track participants through the program, ensure that participants are meeting certain requirements, ensure the drug court is providing services at a frequency and timeliness to help participants, to collect data as required by the Office of Criminal Justice Programs, and for quality improvement. Included in the data maintained is: drug screens and results, treatment participation, court costs/fees/fines/restitution and payments toward those. The database is also used to store data on:

- Numbers and general demographics of individuals screened for eligibility,
- Extent and nature of AOD problems among those assessed for possible participation in the program,
- Attendance records for those accepted into the program,
- Progress reports for those accepted into the program,
- Drug test results for those accepted into the program,
- Incidence of criminality for those accepted into the program.

All drug court team members have access to the Drug Court MIS system through the MIS-generated Drug Court Docket. The MIS compiles data on participant progress for a particular reporting period to make the weekly Drug Court Docket. The information on this report includes participant's full name, IDN, admission date, current Phase, living environment, treatment provider, last step of the 12-step program formally completed in treatment, individual treatment rating for that reporting period, group treatment rating for that reporting period, number of self help support group meetings attended during that reporting period, total drug screens conducted during that reporting period, and if any were

positive results. Each Drug Court Team member receives a copy of this drug court docket at the beginning of the Drug Court Team Meeting. Additionally, throughout the week, counselors, case managers, probation officers and others serving the participant are in communication identifying compliance/non-compliance and beginning to formulate recommendations at the Drug Court Team Meeting.

The Drug Court MIS provides statistically valid data on caseload levels, recidivism rates, drug test results, case management (and other participant records), as well as management and financial records. Members of the drug court team input the information into the MIS through ACCESS. This information may also be used to aid the evaluation of the Drug Court Program.

However, team members were asked to rate their level of satisfaction with the drug court program's evaluation and monitoring plan using a five-point agreement scale (1 = *Very Dissatisfied*, 2 = *Dissatisfied*, 3 = *Neutral*, 4 = *Satisfied*, and 5 = *Very Satisfied*). The mean satisfaction rating for its program evaluation and monitoring plan was 3.8 on a scale to 5.0.

Knox County Drug Court Board of Directors: The Knox County Drug Court has a Board of Directors that was established to provide guidance to the Knox County Drug Court. The Board is authorized to develop and implement specific procedures and policies to aid the Knox County Drug Court in performing its functions. The Board is also responsible for ensuring that the policies and procedures use a non-adversarial approach in which prosecution and defense counsel promote public safety while protecting participant's due process rights.

Identified Issues of Concern

The process evaluation identified a number of significant issues that may have a potentially negative impact on the performance of the Knox County Drug Court program. These issues are related to the following domains and key components of drug courts, as identified by the U.S. Department of Justice (1997): (1) roles and responsibilities of team members and how team members interact with each other (key component # 1), (2) program monitoring and evaluation (key component # 8), and (3) staff training (key component #9).

Effectiveness of the Drug Court Program as Perceived by Team Members: Team members were asked to assess the effectiveness of the Knox County Drug Court program relative to the three standard goals of a drug court program: using a five-point effectiveness scale (1 = *Very Ineffective*, 2 = *Ineffective*, 3 = *So-So*, 4 = *Effective*, and 5 = *Very Effective*). These common goals are (1) achieving the goals of the drug court program, (2) ending participants' substance abuse, and (3) stopping participants' criminal behavior. With a maximum effectiveness rating of 5.0, the mean effectiveness level for achieving the goals of the drug court program was 3.9; for ending participants' substance abuse (3.6); and for stopping participants' criminal activity (3.8).

Effectiveness of the Drug Court Program as Perceived by Participants: Participants reported that the Knox County Drug Court program is less than effective in (1) supporting their treatment, (2) meeting their recovery needs, and (3) that the drug court program is less than effective overall.

Elements of Team Effectiveness: Team members indicated that the Knox County Drug Court team adhered to certain indicators of team effectiveness: (1) the drug court team maintains ongoing communication, (2) team members felt free to make their opinions known to other members, (3) team

members fulfill their roles and responsibilities, (4) the team operates by the latest policy and procedures manual, (5) the frequency of court staffings is sufficient, (6) and their drug testing protocol is effective.

However, there are other aspects of team effectiveness in which the members indicated needed improvement. These are aspects of team effectiveness are:

Effectiveness of Team Communication and Coordination: Team members in Greene County reported that communication and coordination among all team members is slightly less than effective.

Effectiveness of Periodic Team Meetings: When asked to assess the effectiveness of the period team meetings in enabling the team to resolve any problems, the team members responded in the following manner. Possible responses were *Very Effective* = 5, *Effective* = 4, *So-So* = 3, *Ineffective* = 2, and *Very Ineffective* = 1. (The number in parentheses indicated the number of times each was identified by team members.) The adjusted mean rating was 3.4 on a scale to 5.0.

Interdisciplinary Training: Continuing education is a hallmark of professionalism and a value that is clearly embraced by the drug court team members. Members of the drug court team use these educational opportunities to reassess program activities, and use information gathered from the experiences of others to modify and improve the drug court program. Drug court team members were asked to identify from a list of training topics those topics for which they have received training since becoming a member of the drug court team. They were also asked to indicate topics for which they or other members of the drug court team needed additional training. As the table below clearly indicates, members of the team have received substantial training since becoming members of the team. However, given the turnover of team members and the demands of work outside the drug court team, no drug court team member received training on all the topics listed.

Drug court team members also identified several specific training needs, as indicated in the table below. Clearly, drug court team members perceive the need for additional training related to the nature of substance abuse, its treatment and terminology, dynamics of abstinence and techniques for preventing relapse, responses to relapse and to non-compliance with program requirements, the interrelationships of co-occurring conditions such as substance abuse and mental illness, and effective use of incentives and sanctions.

Effectiveness in Implementing the Key Components of Adult Drug Courts: Team members were asked to assess the effectiveness of their drug court in implementing the 10 key components of adult drug courts. These components were identified by the National Association of Drug Court Professionals and include:

- Integrating drug and alcohol treatment with justice system case processing.
- Using a nonadversarial approach to promote public safety while protecting due process rights.
- Early identification and treatment.
- Providing access to a continuum of alcohol, drug and other related treatment and rehabilitative services.
- Drug testing.
- Use of incentives and sanctions.
- Judicial monitoring.
- Program monitoring and evaluation.
- Continuing interdisciplinary training.
- Forging partnerships for local support.

The Knox County Drug Court team indicated that they were *effective* to *very effective* in implementing each of these key components, with the exception of (1) early identification and treatment, (2) use of incentives and sanctions, (3) continuing interdisciplinary training, and (4) forging partnerships for local support.

Recommendations

Recommendation #1: Consensus Improvement Recommendations: During interviews with drug court team members, aggregate results of the online survey were presented, and team members were also asked to rate each recommendation offered in the online survey (including theirs and other staff members' recommendations). The purpose of these additional activities was to reach a consensus rating of each recommendation.

A consensus rating was developed for each of the improvement recommendations provided. The highest rating possible for each recommendation was 5.0 (strong agreement by all team members with the recommendation). Fourteen team members provided their ratings. The highest rated recommendations included the following:

- 4.8: Develop a work locator/job finder/skills development program.
- 4.7: Educate the public on the role and the value of the program.
- 4.7: Develop more DA buy-in with the drug court concept.
- 4.6: Refrain from discounting other team members' opinions.
- 4.6: Waive some fees, especially drug testing fees.
- 4.5: Make the drug court program more positive and less punitive.
- 4.5: Team sticking to their roles and more consistency in team decision making.
- 4.5: Increased attention to showing participants how to have fun without drugs.
- 4.5: Recognize that the team derives strength from its diversity. Develop ways to resolve conflict constructively.
- 4.4: Work with partnering agencies to find more positive sanctions.
- 4.4: Team building so that the team comes together as one.
- 4.4: Follow the model and keep participants moving up in phase.
- 4.4: Development of additional incentives. "Being out of jail" is not incentive enough.
- 4.4: Be more creative in the use of sanctions.
- 4.4: Increase understanding and appreciation of members' roles and how they contribute to the well being of the participants.
- 4.4: Increase fellowship opportunities.
- 4.4: Include all drug court team members in decision making process.
- 4.4: Provide ongoing training to all team members.
- 4.4: Identify employers in the community who will hire drug court participants.
- 4.4: Whenever sanctions are applied, frame them in terms of the team (all team members) caring about their success in the program, and help participants connect the sanction with them behavior.
- 4.4: As team members, don't take disagreements personally.
- 4.4: Model "sober fun". Provide opportunities for participants to get together for fun activities.

These 23 recommendations received strong agreement from all team members. As can be seen, very few of these recommendations will require substantial funding to achieve. The Knox County Drug Court team should review these improvement recommendations on a priority basis to develop a plan to improve or enhance their drug court program.

The Knox County Drug Court should meet to review the many recommendations found in this report, especially those for which there is consensus among team members. Recommendations should be prioritized and action steps should be identified that include responsibility for key tasks, timelines, targeted outcomes, etc. Clearly, it may not be feasible to implement all recommendations contained in this chapter, and it will be useful to consider what can be accomplished in the short-term and long-term, give available resources.

Recommendation #2: Other Weaknesses: The Knox County Drug Court team should also review perceived weaknesses in the manner in which the team operates. These include communication and cooperation among team members and the effectiveness of periodic team meetings. The team should develop a strategy to improve these two important aspects of team operation. The team should also review the low degree of drug court effectiveness as perceived by both team members and participants as part of their improvement planning process.

Recommendation #3: Implement a Team Training Plan: The Knox County Drug Court should develop and implement an interdisciplinary team training plan, including a way to orient new members to the drug court team. The Bureau of Justice Assistance currently funds the Drug Court Planning Initiative (DCPI), which is a training program administered by the National Drug Court Institute for jurisdictions which are planning drug courts. An on-line DCPI training curriculum can be accessed free of charge through NDCI's website (www.ndci.org). Members of the Knox County Drug Court team can access this curriculum (www.ndci.org/training-0) to review foundational principles of drug court operations, including implementation approaches, operational elements (e.g., use of sanctions and incentives), and the conceptual framework and principles underlying drug court treatment.

Recommendation #4: Review Ratings of Effectiveness in Implementing the 10 Key Components of Drug Courts: The Knox County Drug Court team may benefit from a review of its ratings described in this report related to the implementation of the "10 Key Components", to determine if there is a need to make program enhancements in any of the component areas, and accordingly, to modify the program description and/or policy and procedural documents.

Knox County Drug Court Outcome Evaluation

This outcome evaluation was designed to determine the effectiveness of the Knox County Drug Court program at reducing recidivism and reducing substance use among its participants. To complete this evaluation, a group of participants and a comparison group of persons referred to the drug court but were not admitted to the drug court were studied. Four significant questions were addressed:

1. Does participation in the drug court program reduce the risk of recidivism when compared to a comparison group of persons who were eligible for the drug court program but did not participate in the program?
2. Are participants who graduate from the drug court program less likely to recidivate than are non-graduates?
3. Does the drug court program reduce substance use as evidenced by the number and proportion of positive drug tests among drug court participants?
4. What demographic and/or program characteristics predict success from the drug court program?

Recidivism

Definition of Recidivism: There are many definitions of recidivism. According to the National Institute for Justice glossary, “recidivism refers to reoffending or repeated criminal behavior and may be measured as self-reported offenses, arrests, and/or convictions.” Recidivism in this evaluation is defined as any arrest, whether it be a felony, misdemeanor, or technical violation. Arrests do not including traffic violations.

Types of arrests are categorized in eight areas consistent with TBI offense groups: crimes against persons, property crimes, drug crimes, crimes against society, DUIs, driving violations, other (group B) offenses, and technical violations.

Sources of Data

Program Management Information: One primary source of information for this evaluation was the Knox County Drug Court program’s management information system. Prior to selecting sites for this evaluation, drug courts were asked if they tracked a certain set of data elements and how diligent they were with capturing the data, either in an automated database or manually. Drug courts were selected, in part, on their ability to provide the necessary information required for this evaluation.

Specifically, the data elements sought from the program management information system were:

- Age, race/ethnicity, gender, marital status, highest level of education, employment status, probation, status, living situation, extent and nature of drug and/or alcohol problem, probation type;
- Date of referral, admission date, phase advancement dates, discharge dates and discharge reason from the drug court program for program participants;
- Name, date of referral to and refusal of the drug court program for comparison group individuals;
- Services, contacts, urinalysis testing and results, sanctions and incentives;
- Fines, fees, payments; and
- Familial, social and educational gains made during participation in the program.

The extent to which data is captured by the program is reflected in the following analysis.

The Knox County drug court utilizes a comprehensive, Access-based database to manage its program. Demographic characteristics of those referred to the drug court program are documented, as well as the dates of referral to the program and reasons for non-admission to the program. For persons who are admitted to the program, more complete demographic and historical information is recorded, to include substance use information, diagnoses and prior treatments, arrest history to some extent, and case management information. As participants progress through the program, phase advancement, services, AA/NA meetings, contacts, urinalysis testing and results, sanctions, incentives, and payments made during the program are documented. Multiple staff from the drug court office enter data into the database. Staff have assigned fields in which they are responsible for entering and updating data.

Tennessee Criminal History Database: Criminal history information was provided by the Statistical Analysis Center (SAC) at Tennessee Bureau of Investigation (TBI), under contract with OCJP. TBI built a query to interface with the Tennessee Criminal History database in order to provide criminal history reports on participants and comparison group individuals. The intent of the development of the interface with the Tennessee Criminal History database was to lay the groundwork for future use by drug courts so that they might more easily access criminal history information on their participants (and perhaps comparison group individuals) for ongoing program management and evaluation. Information in the Criminal History database is based on fingerprint card submissions made by local and state law enforcement agencies. Fingerprinting is part of the standard booking procedure for an arrest in Tennessee. Fingerprint cards are processed using the Automated Fingerprint Information System (AFIS) to determine identification and to create the criminal records in the repository. Fingerprint cards are either submitted in paper form (mailed in) or submitted electronically through the use of live-scan equipment². Arrests are only added in the repository if a person is formally charged.

The criminal history reports were accessed using the person's state identification number. This is a unique number assigned to an individual based on their fingerprints at the time of first arrest. None of the drug court programs evaluated routinely collect the state identification number. The state identification numbers for Knox County Drug Court participants were obtained through the JIMS, a justice information system operated at the county level. The state identification number for participants in the Sumner County Drug Court were obtained from NCIC records maintained in the drug court files or in the State Attorney's office. The Greene County Treatment Court state identification numbers were obtained through paper records located in the Greene County Jail.

The criminal history report contains information on each arrest submitted with a fingerprint card, including the arrest date, the arresting agency, the subject's name, and the charge(s)³. The report also contains demographic information such as name, aliases, state identification number, FBI number (optional), social security number, race, sex, height, weight, date of birth, and information on the subject's current and/or past residences. For some arrest events, disposition is available through the Criminal History database. However, according to the staff and consultants at the SAC and substantiated by our subsequent review of the criminal history reports, the disposition information is not consistently available and therefore was not included in this evaluation.

² Discussions with the consultants at the SAC informed that nearly 120 agencies are now using live scan devices in Tennessee.

³ Consultants at the SAC asserted that felony arrests are submitted on a consistent basis, but not all misdemeanor arrests are submitted to TBI as not all local police departments have live scan equipment. For this evaluation, unless otherwise noted, arrest is defined as a person arrested and a fingerprint card subsequently submitted to TBI. Otherwise the arrest would not be in the state Criminal History database.

Specifically, the data elements obtained from the criminal history reports were:

- Number of arrests in 1 and 2 years prior to start of drug court program, or referral to the drug court program for the comparison group;
- Number and types of offenses charged in 1 and 2 years prior to the start of drug court program, or referral to the drug court program for the comparison group;
- Date and charge of last arrest prior to referral to the drug court program;
- Number of arrests during participation in the drug court program;
- Number of arrests in 1 and 2 years after start of drug court program, or referral to the drug court program for the comparison group;
- Number and types of offenses charged in 1 and 2 after start of drug court program, or referral to the drug court program for the comparison group;
- Date and charge of first arrest after admission to drug court program, or referral to drug court program for the comparison group;
- Number and types of charges related to arrests during participation in the drug court program;
- Number of arrests in 1 and 2 years after release from the drug court program
- Number and types of offenses charged in 1 and 2 after release from the drug court program;
- Date and charge of first arrest after release from the drug court program.

JIMS: The JIMS, Justice Information Management System, contains information on arrests made in Knox County. Information in JIMS is updated by the Clerk of Courts office. The General Sessions Court, Criminal Division handles misdemeanor, DUI and felony charges. There are various levels of access to the JIMS system, which is established through a username and password. The web-based JIMS version provides access to basic information on arrest dates and charges, a narrative description of the arrest event, and disposition. Some arrest events have sentencing data. Access to a more detailed, PC-based JIMS version provides for information on all court processing events, including court actions, dispositions and sentencing.

Data Analysis

Data from the above mentioned data sources was compiled and analyzed using Microsoft Access, Microsoft Excel, and Statistical Package for the Social Sciences (SPSS). Multiple techniques were used to address the outcome questions. Frequency values were analyzed in Access and Excel; SPSS was utilized to run Chi-square and correlation analysis, odds ratios and bivariate regression analysis. Non-parametric statistics, such as Mann-Whitney and Kruskal-Wallis used to correct for small sample size, were used to determine if two bivariate variables were statistically different. Significance is determined by a p value, generally determined to be $p < .05$. Once found to be significant, odds ratio analysis was performed to determine the odds, not probability, that something was likely to occur. Non-parametric regression analysis was used to on continuous variables to determine significance and correlation. A correlation exists when it is determined that one variable can predict another. Significance is again determined by the p value ($< .05$) and means that the observation did not occur by chance. At $p = .05$, it can be asserted that with 95% certainty there is a true difference or correlation and that it did not happen by chance. At $p = .10$, there is a 90% certainty that there is a true difference or correlation; at $p = .01$, there is a 99% change that there is a true difference or correlation.

Drug Court Participant Group versus Comparison Group

Drug Court Participant Cohort: The participant cohort selection process was driven by two factors: (1) the most recent group of individuals to participate in the program was desired so that the processes and procedures documented in the process evaluation were the environment in which these persons were served; and (2) the participant group was to have been released from the program for a period of at

least two years at the time the criminal history data was provided by TBI. The contract for this evaluation began in March 2009, but site selections were not finalized until October of 2009. Coordination with TBI concluded that data would be submitted to TBI in the fall of 2010. Therefore, the most recent group of participants that would allow for a two-year follow-up period would be participants released no later than the fall of 2008. As the Tennessee drug court fiscal and reporting cycle runs July – June, the participant cohort for this evaluation was decided to be all releases from the drug court program from July 1, 2007 – June 30, 2008.

Comparison Group Cohort: In order to demonstrate the extent to which involvement in the drug court program reduced recidivism, a quasi-experimental design was employed that compared the re-arrest rates of the drug court participants who were released from July 1, 2007 – June 30, 2008, to a population of persons who did not receive drug court services.

A contemporaneous comparison group was used for this evaluation. Defendants who were screened for drug court and determined eligible, but who chose not to participate in the drug court program or who were unable to participate due to logistical reasons were used as the comparison group. The drug court participants and the comparison group members were compared on the basis of arrest history and types of charges one and two years prior to the date of admission to the drug court program for participants, or the date of referral to the drug court program for the comparison group. Arrest history and types of charges were also studied one and two years after the specified dates. These dates are referred to as the start date in this analysis. This start date signifies when the participant population was diverted to a voluntary, judicially supervised, therapeutic rehabilitation program, while the comparison group continued with traditional court processing. The date of refusal of the drug court program would have been more exact, but this information was not readily available. Therefore, the date of referral to the program was used instead for the comparison group.

The participant cohort for the Knox County Drug Court program consisted of fifty-one (51) releases from July 1, 2007 – June 30, 2008. The comparison group cohort for the Knox County Drug Court program consisted of 51 persons who were referred to the drug court program but who did not receive drug court services.

Characteristics of Drug Court Participants

The participant cohort for the Knox County Drug Court program consisted of fifty-one (51) releases from July 1, 2007 – June 30, 2008. Fourteen participants graduated from the program (27.4%); thirty-seven (37) did not complete the drug court program (72.5%). Seventeen participants were terminated; twenty were administratively withdrawn. In 2007-08, guidance on the Tennessee Annual Drug Court Reporting form defined termination as “participants that have been removed as a result of non-compliance”. Administrative withdrawals were defined as “participants that are no longer receiving drug court services as well as the number of participants that have been removed from the program for some unforeseeable reason (i.e., absconders, those served with a warrant and waiting in jail for a hearing for termination, transferred to another court or jurisdiction, moved out of a jurisdiction, terminated for medical reasons, discovery of a violent charge after the fact, “aged-out” or parents move in juvenile courts). This does not include those terminated for non-compliance.” The definition of administrative withdrawal has since been revised to include “participants that are no longer receiving drug court services due to forces outside the drug court's control (death, incarceration on an unrelated offense prior to entry into drug court, transfer from one court to another jurisdiction, release for medical reasons, “aged-out” or parents move in juvenile courts). This does not include those terminated for non-compliance.”

In reviewing the release reasons for the thirty-seven non-graduates, three of the seventeen terminations were for continued drug use or possession, eight were for lack of progress or violations of program rules (either the drug court or partner treatment agencies), five absconded from treatment, and one hired an attorney and withdrew from drug court. Nine of the twenty participants administratively withdrawn were documented as being released for absconding from treatment; seven had documentation that they “left the program ‘AMA’ (against medical advice); one person was withdrawn because their probation term had expired after being in the program over 2 years, another hired an attorney and was referred back to Criminal Court, one person was referred back to state enhanced probation after a failed drug test, and one was let out by a judge prior to completion on the grounds that he had completed 30% of his sentence. All these persons were included in the evaluation.

This graduation rate of 27.4% is on the low end when compared to completion rates cited in other studies. For example, the Governmental Accountability Office published a report in 2005 reviewing 27 evaluations of 39 adult drug courts and found completion rates between 27% and 66%. Based on the 2007-2008 Annual Drug Court Report, the average graduation rate for in 2007-08 for the 53 drug courts that reported data was 47.5%. The inception-to-date graduation rate for these 53 courts was 53.2%.

Age: As can be seen below, slightly less than one-third of all the participants released from July 1, 2007 – June 30, 2008 were 26 to 35 years old (31.4%). One-third of all releases were 25 years and younger. Thirty-five percent about of all releases were 36 years of age or older. The average age of the participants was 32.5 years of age, ranging from 19.5 years of age to 58.7 years of age. The average age of graduates was 36.8 years of age, ranging from 19.5 – 52.6 years, while the average age of those who failed to graduate from the program was 30.9 years of age, ranging from 19.9 – 58.7 years of age. Although not found as significant as in some of the other programs, the likelihood of graduation increased with age ($p=.076$).

Age

Age	Frequency	Percent
20 and under	4	7.8%
21-25	13	25.5%
26-30	11	21.6%
31-35	5	9.8%
36-40	8	15.7%
41-50	6	11.8%
51 or older	4	7.8%
TOTAL	51	100.0%

Race/Ethnicity: Eighty-two percent of the 2007-2008 releases were white; nearly eighteen percent were African-American.

Race/Ethnicity

Race/Ethnicity	Frequency	Percent
Caucasian	42	82.4%
African-American	9	17.6%
Asian	0	0.0%
Hispanic/Latino	0	0.0%
Other	0	0.0%
Unknown	0	0.0%

Race/Ethnicity	Frequency	Percent
TOTAL	51	100.0%

Gender: Two-thirds of all participant releases from the drug court from July 1, 2007 – June 30, 2008 were male; one-third of all participants were female. Twelve graduates were male; three were female. Twenty-three non-graduates were male; fourteen were female. Gender was not found to be significant with regard to program graduation or recidivism.

Gender

Gender	Frequency	Percent
Female	17	33.3%
Male	34	66.7%
Total	51	100.0%

Drug of Choice: The primary drug of choice for participants released from the drug court from July 1, 2007 – June 30, 2008 was cocaine/crack (35.3%). The second most prevalent substance of choice was opioids. Primary drug of choice was not found to be significant with regard to program graduation or recidivism.

Drug of Choice

Drug	Frequency	Percent
Alcohol	8	15.7%
Marijuana	6	11.8%
Cocaine/Crack	18	35.3%
Opioids	15	29.4%
Methamphetamine	3	5.9%
Polysubstance	1	2.0%
TOTAL	51	100.0%

Education: Data on the highest level of education completed was found on only 35 of the 51 participants. Of those 35 participants, nearly two-thirds had completed a high school education, GED equivalent, or higher education at the time of admission into the court. Slightly more than one-third had not completed a high school education or equivalent.

Education

Education level	Frequency	Percent
Less than High school completion	12	34.3%
High school completion or GED	15	42.9%
College	6	17.1%
Technical/Vocational school	2	5.7%
Missing data	16	-
TOTAL	35	100.0%

Employment at Admission: Almost fifty-nine percent of all releases from the drug court program from July 1, 2007 – June 30, 2008 were unemployed at the time of admission. Nearly forty percent were

employed full-time or part-time. One person was not in the work force, but not looking for work. Employment at admission did not prove to be a significant indicator of program success or recidivism.

Employment

Employment at Admission	Frequency	Percent
Full-time	19	37.3%
Part-time	1	2.0%
Disabled/Not in work force	1	2.0%
Not employed	30	58.8%
TOTAL	51	100.0%

Marital Status: Fifty of the fifty-one participant releases had their marital status documented in the program database. Over half of all participant releases from July 1, 2007 – June 30, 2008 were single. Just over one-quarter were married. Twenty percent were separated or divorced and one release was widowed. Marital status did not prove to be a significant indicator of program success or recidivism.

Marital Status

Marital Status	Frequency	Percent
Single, never been married	26	52.0%
Married	13	26.0%
Separated or Divorced	10	20.0%
Widowed	1	2.0%
Missing data	1	--
TOTAL	50	100.0%

Living Situation: Slight more than sixty percent of all participant releases were living in a home-based setting, such as with parents, with spouses or partners, with children, with friends, or alone. Slightly less than forty percent were living in community-based settings, such as Agape, Jellinek, Serenity Shelter, Steps HWH, YWCA, etc.).

Living Situation

Living Arrangement	Frequency	Percent
Home-based living	32	62.7%
Community-based living	19	37.3%
No stable living arrangement	0	0.0%
Total	51	100.0%

Probation Status: Supervision data was documented on fifty of the fifty-one participant releases. Sixty-four percent of all participant releases from July 1, 2007 – June 30, 2008 were on state enhanced probation; eighteen percent were on regular state probation; twelve percent were supervision by county probation, and six percent were under CAAP supervision. In fact, participants under regular state probation were more likely to graduate ($p=.004$).

Probation

Probation	Frequency	Percent
Regular State	9	18.0%
State Enhanced	32	64.0%
County	6	12.0%
CAAP	3	6.0%
Missing data	1	-
TOTAL	50	100.0%

Treatment Provider: Multiple treatment providers work with participants in the drug court program. While treatment providers can change during the course of treatment, it was documented that eighty-six percent of all participant releases from 2007-08 had as their last treatment provider of record as drug court personnel. Fourteen percent were served by partner treatment agencies. Participants were more likely to graduate if they had drug court staff as their last treatment provider ($p < .01$).

Treatment Provider

Treatment Provider	Frequency	Percent
Drug Court	44	86.3%
Agape	2	3.9%
Jellinek	4	7.8%
Great Starts	1	2.0%
Missing data	0	-
TOTAL	51	100.0%

Frequency of Services: The 2007-2008 releases from the drug court received a variety of services as required by the specific program design of the drug court program. These services range from intake and orientation sessions, individual case management, individual, group and family treatment, urinalysis, 12 step AA/NA education and meetings, probation supervision, community service, and incentives and sanctions. Some of these services are provided by the drug court staff; others are provided by drug court team members and partner organizations; others are provided by community organizations. All services are recorded in the drug court program database.

Services

Services	Graduates		Non-Graduates	
Services	Grads Who Received Service	Average Hrs	Non Grads Who Received Service	Average Hrs
Court Appearances	14	47.6	36	22.5
UAs Administered	14	163.9	35	67.6
UAs Positive	4	1.5	21	2.4
Incentives	13	3.8	15	3.4
Sanctions	6	2.5	22	2.9
Drug Court Orientation Group	9	9.0	16	5.3
Matrix				
Early Recovery	12	29.6	33	15.2

Services	Graduates		Non-Graduates	
Services	Grads Who Received Service	Average Hrs	Non Grads Who Received Service	Average Hrs
<i>Relapse Prevention</i>	12	77.1	33	31.4
<i>Social Support Group</i>	10	27.8	5	34.2
<i>Group Family Counseling</i>	13	23.5	31	18.5
<i>Individual Family Session</i>	10	2.0	10	2.4
Mentoring	4	140.8	14	69.5
Drug Court Education Group	1	1.0	1	10.5
12 Step Group (AA/NA)	14	178.3	35	70.2
12 Step Education Group	14	139.1	36	44.6
Drug Court Individual Counseling	13	15.2	25	7.2
Case Manager Individual Session	14	4.7	28	2.3
Home Visit	2	1.0	9	1.2
Other Tx Provider Group	7	174.9	12	274.5
Other Tx Provider Individual	8	39.3	25	19.2
Community Service	14	98.0	27	51.9

Types of Services: Data from the Knox County program database on services received by releases from the program from July 1, 2007 – June 30, 2008, proved that certain services were statistically significant with regard to program graduation as well as post program recidivism. Graduates were more likely to have attended more court sessions ($p < .01$) and graduates were more likely to have had more urinalysis tests ($p < .01$). Graduates were more likely to have more documented AA/NA hours ($p < .01$) and more documented community service hours ($p < .01$). The MATRIX curriculum also proved to be statistically significant to graduation ($p = .045$). The more hours a participant received of the following individual MATRIX services, the more likely they were to graduate (Early Recovery, $p = .046$, Relapse Prevention, $p = .006$, Social Support, $p = .032$, and Family Group, $p = .032$). The number of Drug Court Education hours received and the number of 12 Step Education hours received were also significant toward graduation ($p < .01$). Graduates were also more likely to have a greater number of incentives documented ($p < .01$).

The data also suggests that many of these same services are significant to post program recidivism. Participants who attended fewer court sessions ($p = .035$), participants who received fewer urinalysis tests ($p = .045$), participants who received fewer Drug Court Education hours ($p = .047$), and participants who received fewer 12 Step Education hours ($p = .039$) were more likely to be re-arrested at one year post program release. Likewise, participants who documented fewer 12 Step AA/NA hours were more likely to be re-arrested at one year post program release ($p = .029$). Participants who had fewer MATRIX Early Recovery hours documented were more likely to be re-arrested in the two years post program release ($p = .039$).

Treatment Engagement: How quickly therapeutic services were initialized after admission to the program and for how long the therapeutic services were provided in relation to the participants' length of time in the program was evaluated. Therapeutic services are those services offered by the drug court that involve counseling and education, as opposed to case management, probation and urinalysis services. All are important to the drug court program. The fifty-one participants averaged 7.8 days from

admission to the first therapeutic contact. The number of days ranged from 0 days to 98 days until a therapeutic contact was documented. Further, the number of days participants received therapeutic contacts, as calculated by subtracting the date of the first therapeutic contact from the date of the last therapeutic contact documented, ranged from 0 days to 855 days. These numbers were compared to the length of stay range for these participants of 16 days to 856 days. The ratio of days in which participants received treatment compared to their documented length of stay in the program ranged from 0% - 99.9%, with an average ratio of 92.4%. This ratio of treatment days to the length of stay actually proved to be significant to successful program graduation ($p > .01$), in that the more days that treatment services were received during participation in the program, the greater the likelihood of program graduation. Moreover, the lower the ration of days that treatment services were received compared to days spend in the program was correlated to post program recidivism ($p = .027$).

Average Length of Stay: The Knox County Drug Court program is designed to be a 15 month-long program. The program can be completed in as few of 9 months, depending on the participants' progress. The average length of stay in the program for the 2007-08 participant releases was 322.4 days, roughly 72% of the designed length of stay. The graduates, on average, participated in the program for 550.9 days. The thirty-seven participants who failed to graduate participated in the program for 235.9 days, on average. Participants who were terminated averaged 269.1 days, while participants who were documented as administrative withdrawals remained in the program for 207.7 days, on average. As one might expect, increased length of stay is a highly correlated with graduation ($p < .01$).

Average Length of Stay

Release Status	Frequency	Average LOS
Graduate	14	550.9
Non-Graduate	37	235.9
<i>Termination</i>	<i>17</i>	<i>269.1</i>
<i>Administrative Withdrawal</i>	<i>20</i>	<i>207.7</i>
TOTAL	51	322.4

Non Matriculation: While the average length of stay in the program for all participant releases from 2007-2008 was 322.4 days, 88% of the expected length of stay, over half of the releases were released out of Phase 1. Almost twelve percent were released out of Phase 2. Six percent were released out of Phase 3. None of the participant releases from 2007-08 were released from Phase 4.

Phase at Release

Phase at Release	Frequency	Percent
Phase 1	28	54.9%
Phase 2	6	11.8%
Phase 3	3	5.9%
Phase 4	0	0.0%
Graduate	14	27.5%
TOTAL	51	100.0%

Characteristics of Comparison Group

The comparison group cohort for the Knox County Drug Court program consisted of 51 persons who were referred to the drug court program but who did not receive drug court services.

Age: As can be seen below, slightly less than one-third of all the participants released from July 1, 2007 – June 30, 2008 were 26 to 35 years old (31.4%). Thirty-one percent of the comparison group was in that age range. One-third of all participants were 25 years and younger. Almost forty percent of the comparison group was 25 years and younger. Thirty-five percent about of all releases were 36 years of age or older, while nearly fourteen percent of the comparison group was 36 years of age or older. The average age of the participants was 32.5 years of age, ranging from 19.5 years of age to 58.7 years of age. The average age of the comparison group was 32.4 years of age, ranging from 18.8 – 67.2 years.

Age

Age	Participant		Comparison	
	Frequency	Percent	Frequency	Percent
20 and under	4	7.8%	6	11.8%
21-25	13	25.5%	14	27.5%
26-30	11	21.6%	9	17.6%
31-35	5	9.8%	7	13.7%
36-40	8	15.7%	4	7.8%
41-50	6	11.8%	3	5.9%
51 or older	4	7.8%	8	15.7%
TOTAL	51	100.0%	51	100.0%

Race/Ethnicity: Eighty-two percent of the participant group was white; nearly eighteen percent was African-American. Seventy-eight percent of the comparison group was white; nearly twenty-two percent was African-American.

Race/Ethnicity

Race/Ethnicity	Participant		Comparison	
	Frequency	Percent	Frequency	Percent
Caucasian	42	82.4%	40	78.4%
African-American	9	17.6%	11	21.6%
Asian	0	0.0%	0	0.0%
Hispanic/Latino	0	0.0%	0	0.0%
Other	0	0.0%	0	0.0%
Unknown	0	0.0%	0	0.0%
TOTAL	51	100.0%	51	100.0%

Gender: Almost sixty-seven of the participant group was male; thirty-three percent of the participant group was female. Almost sixty-three of the participant group was male; thirty-seven percent of the participant group was female.

Gender

Gender	Participant		Comparison	
	Frequency	Percent	Frequency	Percent
Female	17	33.3%	19	37.3%
Male	34	66.7%	32	62.7%

	Participant		Comparison	
Total	51	100.0%	51	100.0%

The participant group and the comparison group had no statistical differences to account for.

Impact on Criminal Activity

Participants versus Comparison Group

This evaluation sought to examine the extent to which involvement in the drug court program reduced recidivism as evidenced by re-arrests of the participant population and the comparison group population after the start date in which the participants were processed into the drug court and the comparison group continued with traditional court processing. Arrest rates were analyzed one and two years prior to that date and one and two years after the initiation of participation in the drug court program or refusal of the program. As noted above, recidivism in this evaluation is defined as any arrest, whether it be a felony, misdemeanor, or technical violation. Arrests do not including traffic violations.

While the participant population included 51 releases from July 1, 2007 – June 30, 2008, criminal history reports could not be found for two individuals, one graduate and one non-graduate. Identification information was supplied to both TBI and the JIMS system, but no data was found. Therefore these two participants were removed from the recidivism study. The participant population for recidivism analysis included forty-nine persons, while the comparison group population consisted of fifty-one individuals.

Prior Criminal History: Forty-two of the 49 drug court participants were arrested in the twelve months preceding the start date according to the criminal history reports provided by TBI (86%). Forty-seven of the 51 participants in the drug court program were arrested in the two years prior to the start date (96%). Forty-two of the 51 comparison group individuals were arrested in the twelve months preceding the start date (82%). Forty-eight of the 51 of the comparison group individuals were arrested in the two years prior to the start date (94%). While a greater percentage of the participant group had arrests in the one and two years prior to the start date, the comparison group experiences slightly more arrests in those time periods.

Prior Arrest History

	One Year Prior		Two Years Prior	
Release Status	# Arrested	Average # of Arrests	# Arrested	Average # of Arrests
Total Participant (n=49)	42	2.2	47	3.1
Comparison Group (n=51)	42	2.3	48	3.2

Days from Last Arrest to Start: As described above, forty-seven of the forty-nine releases from the drug court program were arrested in the two years prior to the start date. Two participants were not arrested in the two years prior to the start date (953 and 1330 2450 days between the last arrest and start date). Forty-eight of the 51 comparison group individuals were arrested in the two years prior to the start date. Three individuals in the comparison group were last arrested 733, 759, and 761 days prior to the start date. On average, the duration from last arrest to the start date for participants was 215 days. On average, the duration from last arrest to the start date for the comparison group was 192 days.

Days from Last Arrest to Start Date

Release Status	Frequency	Days
Total Participants	49	215.0
Comparison	51	192.2

Type of Offense Prior: As can be seen below, nearly more than 45% of graduates were arrested for a substance related charge (drug/DUI) as the last arrest prior to the start date, while only 31% of the comparison group individuals were arrested for a substance related charge (drug/DUI) as the last arrest prior to the start date. Arrest rates for property offenses and 'other' offenses are relatively comparable (37% for property, 8% for 'other' offenses). The comparison group has more offenders arrested for crimes against persons (4%) and technical violations (8%).

Type of Offense Prior

Offense Type	Total Participants		Comparison Group	
	Frequency	Percent	Frequency	Percent
Person	0	0.0%	2	3.9%
Property	18	36.7%	19	37.3%
Drug	21	42.9%	13	25.5%
Society	0	0.0%	0	0.0%
DUI	1	2.0%	3	5.9%
Driving	5	10.2%	6	11.8%
Other	4	8.2%	4	7.8%
Technical Violation	0	0.0%	4	7.8%
Total	49	100.0%	51	100.0%

Although slight differences existed between the numbers of arrest events, the time between the arrest events and the types of arrests, no statistically significant differences between the participant and comparison groups were found that might account for post program recidivism differences.

Post Recidivism: Slightly more than twenty-six percent of participants had been arrested within the first year after the start date. Fifty-nine percent of the comparison group recidivated within 12 months. By two years, 45% of the participant population had recidivated, while 78% of the comparison group had been rearrested. In fact, participants were less likely to be re-arrested at two years ($p=.064$) than were comparison group persons. Moreover, the comparison group averaged more arrests than the participant group at both one year and two years.

Subsequent Arrests

Release Status	One Year Post			Two Years Post	
	# Rearrested	Average # of Arrests		# Rearrested	Average # of Arrests
Total Participants	13/49 = 26.5%	1.0		22/49 = 44.9%	1.9
Comparison Group	30/51 = 58.8%	1.5		40/51 = 78.4%	2.1

Days to First Arrest: Twenty-eight of the forty-nine participants had recidivated at the time of this report writing (57%), six having been first rearrested outside the 2 year follow-up period. Two graduates were first re-arrested at 1419 and 1484 days post. Four non-graduates were first re-arrested at 806, 845, 896, and 1359 days post. Twenty-one participants had not been rearrested at the time of this report writing (43%). The average number of days until re-arrest for the participant population was 495 days. Forty -five individuals in the comparison group had recidivated at the time of this report writing (88%); five individuals were rearrested outside the 2 year follow-up period (777, 826, 959, 1002 and 1010 days). Six comparison individuals had not been re-arrested at the time of this report writing (12%). The average number of days until re-arrest for the comparison population was 303 days. Participants were more likely to have a longer time to first arrest at a statistical significance ($p<.01$). Moreover, the difference between the days to first arrest between the two populations is significant ($p=.035$).

Days to First Arrest

Release Status	Frequency	Duration
Total Participants	28	495.0
Comparison	45	303.2

Type of Offense: Interestingly, just over 32% of the first re-arrests included a substance related charge (drug/DUI) for the participant population. Only 24% of the first re-arrests included a substance related charge (drug/DUI) in the comparison group population. However, the comparison group was actually more likely to be arrested for drug and drug/DUI charges in the two years after the start date (both at $p<.01$).

Type of Offense Post

Offense Type	Total Participants		Comparison Group	
	Frequency	Percent	Frequency	Percent
Person	3	10.7%	1	2.2%
Property	9	32.1%	9	20.0%
Drug	7	25.0%	9	20.0%
Society	0	0.0%	1	2.2%
DUI	2	7.1%	2	4.4%
Driving	5	17.9%	7	15.6%
Other	1	3.6%	10	22.2%
Technical Violation	1	3.6%	6	13.3%
Total	28	100.0%	45	100.0%

Participant versus Comparison Group Recidivism Summary: The following table summarizes the recidivism findings:

Participant versus Comparison Group Summary Findings

Indicator	Participant Group	Comparison Group	Significance
Percent re-arrested	57%	88%	
Average number of days to first re-arrest	495	303.2	$p<.01$
Percent re-arrested within 1 year post	27%	59%	

Indicator	Participant Group	Comparison Group	Significance
Percent re-arrested within 2 years post	45%	78%	p=.064
Average number of re-arrests at one year post	1.0	1.5	
Average number of re-arrests at two years post	1.9	2.1	
Percent re-arrested for DUI/drug charge	32%	24%	p<0.1

Analysis: Knox County Drug Court participants were *less likely* to be re-arrested within one year of admission to the drug court program than were comparison group members from referral to the program. This trend continued at the two-year mark at a significant level.

Drug court participants were also *more likely* to have a longer time to re-arrest than comparison group members at a significant level, and to be re-arrested *less often* within one year and two years of admission to the program than were comparison group members from date of referral.

While drug court participants were arrested for DUI/drug charges on the first arrest post admission more than the comparison group, drug court participants were actually *less likely* to be re-arrested for drug charges in the two years after the start date than were comparison group members at a significant level.

Conclusion: The Knox County Drug Court program is effective in reducing the criminal offenses of drug court participants, compared to comparison group members, and is effective in reducing drug offenses compared to the same group.

Drug Court Graduates versus Non-Graduates

This evaluation sought to examine the extent to which involvement in the drug court program reduced recidivism by arrests after admission to and release from the drug court program, comparing graduates and non-graduates. Arrest rates were analyzed one and two years prior to admission to the drug court program, during participation in the drug court program, and one and two years after release from the drug court program. As noted above, recidivism in this evaluation is defined as any arrest, whether it be a felony, misdemeanor, or technical violation. Arrests do not including traffic violations.

While the participant population included 51 releases from July 1, 2007 – June 30, 2008, criminal history reports could not be found for two individuals, one graduate and one non-graduate. Identification information was supplied to both TBI and the JIMS system, but no data was found. These two participants were removed from the recidivism study. Therefore, the participant population for recidivism analysis included forty-nine persons, 13 graduates, and 36 non-graduates.

Prior Criminal History: Ten of the 13 graduates from the drug court were arrested in the twelve months preceding their admission into the program according to the criminal history reports provided by TBI. All thirteen graduates were arrested in the two years prior to admission to the program. The number of arrests for graduates ranged from one to six in the two years prior to admission. The average number of arrests in the one year prior to admission was 2.1; the average number of arrests in the two years prior to admission rose to 3.0 arrests for graduates.

Thirty-three of the 36 non-graduates from the drug court were arrested in the twelve months preceding their admission into the program according to the criminal history reports provided by TBI. Thirty-five of the thirty-six non-graduates were arrested in the two years prior to admission to the program. The

number of arrests for non-graduates ranged from one to seven in the two years prior to admission. One non-graduate was last arrested 1330 days prior to admission to the program, over three and one half years according to the criminal history report provided by TBI. The average number of arrests in the one year prior to admission was 2.2; the average number of arrests in the two years prior to admission rose to 3.1 arrests for non-graduates. The differences between the number of prior arrests between the graduates and the non-graduates did not prove to be significant.

Prior Arrest History

	One Year Prior		Two Years Prior	
Release Status	# Arrested	Average # of Arrests	# Arrested	Average # of Arrests
Graduate	10	2.1	13	3.0
Non-Graduate	33	2.2	35	3.1
TOTAL	43	2.2	48	3.1

Days from Last Arrest to Admission: The thirteen graduate releases averaged 233 days from their last arrest prior to referral to the program and admission, ranging from 53 to 535 days. Non-graduates averaged 208 days from their last arrest prior to referral to the program and admission, ranging from 24-1330 days. The difference between the days from last arrest prior to admission for the graduate and non-graduate populations was not significant.

Days from Last Arrest to Admission

Release Status	Frequency	Days
Graduate	13	233
Non-Graduate	36	208.4
TOTAL	49	215

Type of Offense: As can be seen below, almost 70% of graduates were arrested for a substance related charge (drug/DUI) immediately preceding their referral to the drug court⁴. Only 36% of the non-graduates were arrested for a drug or DUI charge immediately preceding their referral to the drug court.

Type of Offense Prior

	Graduates		Non-Graduates	
Offense Type	Frequency	Percent	Frequency	Percent
Person	0	0.00%	0	0.00%
Property	1	7.69%	17	47.22%
Drug	9	69.23%	12	33.33%
Society	0	0.00%	0	0.00%
DUI	0	0.00%	1	2.78%
Driving	2	15.38%	3	8.33%
Other	1	7.69%	3	8.33%

⁴ Types of arrests were grouped according to guidelines set forth from TBI. When multiple offenses were charged during an arrest, one primary offense was noted as the arrest type. However, all other offenses were documented as well. Offenses were prioritized as follows: Drug, DUI, Person, Property, Society, Driving, Other, and Technical Violation. Appendix 11 lists all offenses in each category.

	Graduates		Non-Graduates	
Offense Type	Frequency	Percent	Frequency	Percent
Technical Violation	0	0.00%	0	0.00%
Total	13	100.00%	36	100.0%

In-Program Recidivism: In-program recidivism describes arrests that occur while participants are receiving services in the drug court program. As can be seen below, only one of the thirteen graduates were arrested while participating in the drug court program (7.7%). Six of the thirty-six persons who failed to graduate from the program were arrested while in the program (16.7%). Both populations only averaged one arrest while in the program.

In-Program Arrests

Release Status	# Rearrested	Average # of Arrests
Graduate	1 (7.7%)	1.0
Non-Graduate	6 (16.7%)	1.0
TOTAL	7 (14.3%)	1.0

Type of In-Program Offenses: The one graduate arrested while in the program was arrested for a drug offense (100%). Only one of the six non-graduates was arrested for a drug offense while in the program. (17%) Two non-graduates were arrested for property offense, one was arrested for an 'other' offense and three were arrested for technical violations.

Type of Offense In-Program

	Graduates		Non Graduates	
Offense Type	Frequency	Percent	Frequency	Percent
Person	0	0.00%	0	0.00%
Property	0	0.00%	2	33.33%
Drug	1	100.00%	1	16.67%
Society	0	0.00%	0	0.00%
DUI	0	0.00%	0	0.00%
Driving	0	0.00%	0	0.00%
Other	0	0.00%	1	16.67%
Technical Violation	0	0.00%	2	33.33%
Total	1	100.00%	6	100.0%

Post Program Recidivism: Only one of the thirteen graduates was arrested in the twelve months following their release from the program (7.7%). Nineteen of the thirty-six non-graduates were re-arrested in the year following their release (52.8%). Only two of the thirteen graduates of the drug court program were arrested in the two years following their release from the program (15.4%). At two

years post release, twenty-three of the thirty-six non-graduates had been re-arrested (63.9%). The difference in the re-arrest rates at two years post program release were statistically significant ($p < .01$). Furthermore, non-graduates were thirteen times more likely to be rearrested in the 12 months following release ($p = .018$). Non-graduates were nine times more likely to be rearrested with the 24 months following their release ($p = .066$). Non-graduates also averaged more number of arrests at both one and two years post release.

Subsequent Arrests

	One Year Post		Two Years Post		
Release Status	# Rearrested	Average # of Arrests	# Rearrested	Average # of Arrests	# of
Graduate	1/13 (7.7%)	1.0	2/13 (15.4%)	1.0	
Non-Graduate	19/36 (52.8%)	1.1	23/36 (63.9%)	2.2	
TOTAL	20/49 (40.8%)	1.1	25/49 (51.0%)	2.1	

Days from Release to First Arrest: Nine of the thirteen graduates from the drug court had not been re-arrested at the time of this evaluation (69.2%). Four of the thirteen graduates had been re-arrested at the time of this evaluation (30.8%). Two graduates were first arrested outside the two year follow-up period (766 days and 1013 days). Twenty-three non-graduates had been rearrested at the time of this report writing: nineteen within twelve months of release; twenty-three within 24 months of release. The average duration from release to re-arrest for the graduates from the drug court program was 590.8 days. Time to re-arrest for graduates ranged from 116 to 1013 days. The average duration from release to re-arrest for the non-graduates from the drug court program was 248.7 days. Time to re-arrest for non-graduates ranged from seven days to 988 days (over 2 ½ years).

Days from Release to First Arrest

Release Status	Frequency	Days
Graduate	4	590.8
Non-Graduate	23	248.7
TOTAL	27	299.4

Type of Post-Program Offenses: Only 25% of the first re-arrests post program release for the graduates and 22% of the first re-arrests post program release for the non-graduates included a substance related charge (drug/DUI). One graduate was first arrested for a crime against a person (25%) and two were first arrested for driving offenses (50%). 48% of the first re-arrests post program release for non-graduates were for property crimes, 13% were for driving offenses, nearly 9% were for crimes against persons, and slightly less than 9% were for technical violations. This intimates non-graduates continued to be part of a wider range of criminal activity than did persons who graduated from the program.

Type of Offense Post-Program

	Graduates		Non Graduates	
Offense Type	Frequency	Percent	Frequency	Percent
Person	1	25.00%	2	8.70%

	Graduates		Non Graduates	
Property	0	0.00%	11	47.83%
Drug	1	25.00%	3	13.04%
Society	0	0.00%	0	0.00%
DUI	0	0.00%	2	8.70%
Driving	2	50.00%	3	13.04%
Other	0	0.00%	0	0.00%
Technical Violation	0	0.00%	2	8.70%
Total	4	100.00%	23	100.0%

Graduates versus Non Graduates Recidivism Summary: The following table summarizes the recidivism findings:

Graduates versus Non Graduates Recidivism Summary

Indicator	Graduates	Non-Graduates	Significance
Percent re-arrested in-program	7.7%	16.7%	
Average number of re-arrests in-program	1.0	1.0	
Percent re-arrested for DUI/drug in-program	100%	16.7%	
Percent re-arrested post	30.8%	63.9%	
Average number of days to first re-arrest post	590.8	248.7	
Percent re-arrested within 1 year post	7.7%	52.8%	p=.018
Percent re-arrested within 2 years post	15.4%	63.9%	p=.066
Average number of re-arrests at one year post	1.0	1.1	
Average number of re-arrests at two years post	1.0	2.2	
Percent re-arrested for DUI/drug charge post	25%	21.8%	

Analysis: Knox County Drug Court graduates were *less likely* to be arrested while in the program, and *less likely* to be re-arrested within one year of release from the drug court program than were persons who failed to graduate from the program at a significant level. This trend continued through the two year follow-up period at a significant level.

Drug court graduates were also *more likely* to experience a longer time to re-arrest than were non-graduates, and to be re-arrested *less often* within one year and two years of from the program than were non-graduates.

The data shows that drug court graduates were arrested for DUI/drug charges on the first arrest post admission more than non-graduates, but the 25% only represents one graduate.

Conclusion: The Knox County Drug Court program is effective in reducing the criminal offenses of drug court participants for those participants who complete the drug court program.

Impact on Substance Use among Participants

This evaluation sought to examine the extent to which involvement in the drug court program reduced substance use as evidenced by the number of positive drug tests among drug court participants. Urinalysis data was extracted from the Knox County Drug Court management information system. All

the urinalysis data was obtained while the participants were actively receiving services in the drug court program.

Drug Testing: Over 4,686 urinalysis screens were scheduled for the participants released from the drug court program from July 1, 2007 – June 30, 2008. This number does not include screens that were scheduled but for which participants were excused from providing a sample. Of those scheduled screens, 4,651 screens were administered to the participant cohort (99%). Thirty-five screens were not administered due to participants not providing a urine sample and not being excused from providing a sample. Unexcused missed urinalysis screens are treated as a positive drug screen in the Knox County Drug Court program.

Positive Urinalysis: As can be seen below, nearly three-quarters of all positive or unexcused drug screens occur while participants are in the first phase of the program. As the participants progressed through the program, the number of drug screens that are positive or unexcused decreased over time.

Positive Urinalysis by Phase

Phase	Positive	No Show	Percent
Phase 1	42	26	74.7%
Phase 2	7	6	14.3%
Phase 3	7	3	11.0%
TOTAL	56	35	100.0%

This data is supported by the data presented in the 2007-2008 Annual Drug Court Report. Data from the 53 reporting courts also showed that the number of positive drug screens decreased over time. Positive drug screens in Phase 1 for all drug courts combined was .80 percent of all drug screens; for Phase 2 -- .30 percent; for Phase 3 -- .20 percent; and for Phase 4 -- .11 percent. Six drug courts reported a positive drug screen rate of .11 percent in Phase 5, while three drug courts reported a positive drug screen rate of .49 percent in Phase 6.

Impact on Life Circumstances

Another measure of the effectiveness of drug courts is the change in life circumstances of participants. While often hard to evaluate over longer period of time, the following data on changed life circumstances was extracted from the Knox County management information system on the status of the 2007-08 drug court participants at the time of their release.

Education Gains: Data on the highest level of education completed was found on only 35 of the 51 participants. 12 of those 35 participants were reported to have less than a high school education at admission. Fifteen had completed a high school education or an equivalent. Six were in college or had completed college and two had technical or vocational school training. At completion, only eight participants were reported to have attained educational gains (reported as 'Yes, there were gains'); 43 reported no gains (reported as 'No gains'). Of the eight who had gains reported, only three of those were of the twelve that had less than a high school completion at admission. Four were of the fifteen who reported having a high school education or equivalent. One of the participants on which educational gains were reported was at the college level at admission.

Educational level at Admission

Education level	Frequency	Percent
Less than High school completion	12	34.3%
High school completion or GED	15	42.9%
College	6	17.1%
Technical/Vocational school	2	5.7%
Missing data	16	-
TOTAL	35	100.0%

Employment Gains: Significant employment gains were noted by the participants who were released from the Knox County Drug Court program from July 1, 2007 – June 30, 2008. At admission, almost fifty-nine percent were unemployed at the time of admission. That number was reduced by nearly half, as only 31% of the participant group was unemployed at the time of release. Nearly forty percent were employed full-time or part-time at admission, while almost 63% were employed full-time or part-time at release. The biggest employment gains were seen in the number persons who had full-time employment at the time of release. The employment status at the time of release proved to be a significant indicator of program success. Participants who had full-time or part-time employment as their most recent employment status were more likely to graduate ($p < .01$).

Change in Employment Status

Employment	At Admission		At Release	
	Frequency	Percent	Frequency	Percent
Full-time	19	37.3%	32	62.7%
Part-time	1	2.0%	2	3.9%
Disabled/Not in work force	1	2.0%	1	2.0%
Not employed	30	58.8%	16	31.4%
TOTAL	51	100.0%	51	100.0%

Living Situation: The living situation at the time of release showed little change from the time of admission for the participants released from the program from July 1, 2007 – June 30, 2008. In fact, one person moved from a home-based living situation and two persons moved from community-based living situations to have no stable living arrangement at all. The living situation at the time of release proved to be a significant indicator of program success. Participants living in home-based environments as their most recent living situation were more likely to graduate ($p < .01$).

Change in Living Situation

Living Arrangement	At Admission		At Release	
	Frequency	Percent	Frequency	Percent
Home-based living	32	62.7%	31	60.8%
Community-based living	19	37.3%	17	33.3%
No stable living arrangement	0	0.0%	3	5.9%
Total	51	100.0%	51	100.0%

Drug-Free Babies: There was one participant released from the Knox County Drug Court program during 2007-2008 that was reported to have had a drug-free baby. Estimates on the cost of treating a drug-exposed or drug-addicted baby in the first year of life can total up to \$250,000, with additional medical and related costs accruing in subsequent years to be as high as \$750,000 per child by age 18⁵.

Other Life Improvements Related to Drug Court Participation: Drug court participants were asked in what ways has participating in the Knox County Drug Court program improved their life. In addition to becoming drug-free, responses clustered into the following categories: (1) enhanced personal gains; and (2) reduction in jail time.

Specifically, the participants identified the following ways in which the program has improved their life.

Sobriety

- It has given me another chance at being "free" and living a healthy and happy life.
- I am not using drugs today.
- Forced me to come to terms with my addiction.
- The consequences of drug use have helped keep me clean.
- In all ways....Drug Court gave me my life back!!
- It has changed my life completely for the better.
- Kept me clean and sober
- I'm clean and finding out about myself.
- In many ways. The Drug Court program and Judge B have saved my life.
- Just by staying clean.
- I've learned how to live life clean and sober, how to have fun in recovery, relapse prevention, my spiritual connection grows stronger every day, how to treat myself better - physically, my self esteem is a lot better, I've been employed for a year and a half - learning how to be independent.
- Helped me stay clean.
- It has taught me how to stay sober.

Personal Gains

- In every way. A more manageable life. Less stress. More tools to face life's challenges. Respect. Credibility. Responsibility. Love. Perseverance. Integrity. Hope, above all.
- Anger management classes and mental health provider referral
- Emotional, spiritual, monetary. I've grown up. I'm not a kid anymore; I'm an adult.
- Brought trust with wife back because she knows I want to do right.
- I have an apartment now and vehicle. I have been clean 9 months.

Not in Jail

- It has helped me get back on my feet and kept me out of prison.
- Kept me out of jail.

Predictors of Program Success

The data from Knox County Drug Court program suggested there are several characteristics that might predict program graduation and reductions in criminal activity.

⁵ See *Information Relevant To Female Participants In Drug Courts: Summary Overview*. BJA Drug Court Clearinghouse Project, February 14, 2004.

Participant Characteristics

Age: Consistent with other drug court studies, age was significantly linked to program graduation. The likelihood of graduation increases with age at admission ($p=.076$).

Living Environment: Participants who lived in home-based settings, such as with spouses, with partners, with children, with parents, with friends or alone were more likely to graduate ($p<.01$).

Employment: Participants who were employed full-time or part-time were more likely to graduate ($p<.01$).

Probation Status: Participants who were on regular state probation were more likely to graduate ($p<.01$).

Graduation: Graduation was an indicator of long-term success. Participants who failed to graduate were 13 times more likely to be arrested in the year following program release ($p=.018$) and almost ten times more likely to be arrested in the two years following release ($p=.066$) than graduates.

Program Characteristics

Drug Court Counselors: Participants who received their primary treatment from a drug court counselor were more likely to graduate ($p<.01$).

Length of Stay: As one might expect, increased length of stay is a highly correlated with graduation ($p<.01$).

Services: Participants who attended more court sessions ($p<.01$), had more urinalysis tests ($p<.01$), had more documented AA/NA hours ($p<.01$), more documented community service hours ($p<.01$) were more likely to graduate. Participants who had more documented MATRIX hours also proved more likely to graduate ($p=.045$). Specifically, the more hours a participant received of Early Recovery, $p=.046$, Relapse Prevention, $p=.006$, Social Support, $p=.032$, and Family Group, $p=.032$, the more likely they were to graduate. Participants who received more Drug Court Education hours and 12 Step Education hours were also more likely to graduate (both at $p<.01$). Graduates were also more likely to have a greater number of incentives documented ($p<.01$).

Many of these same services are significant to reduced recidivism after release from the program. Participants who attended fewer court sessions ($p=.035$), participants who received fewer urinalysis tests ($p=.045$), participants who received fewer Drug Court Education hours ($p=.047$), and participants who received fewer 12 Step Education hours ($p=.039$) were more likely to be re-arrested at one year post program release. Likewise, participants who documented fewer 12 Step AA/NA hours were more likely to be re-arrested at one year post program release ($p=.029$). Participants who had fewer MATRIX Early Recovery hours documented were more likely to be re-arrested in the two years post program release ($p=.039$).

Treatment Engagement: Participants who had therapeutic services initiated sooner after admission and received those services longer during their participation in the program were more likely to graduate ($p<.01$). Participants who received treatment services for less time compared to their length of stay in the program were more likely to recidivate ($p=.027$).

Participation in the program: Participants were more likely to have a longer time until first arrest compared to the comparison group ($p<.01$). Participants were less likely to be re-arrested in the two year follow-up period than the comparison group ($p=.064$) and were even less likely to have an arrest for a drug charge, or any substance abuse charge, in the two year follow-up period compared to the comparison group (both at $p<.01$).

Limitations

Several methodological concerns and limitations should be considered in interpreting results from this evaluation. An important consideration is that this evaluation involved a small number of drug court participants released from the program from July 1, 2007 – June 30, 2008 ($n=23$). A small sample size restricts limits being able to generalize the evaluation findings. As the sample size of the participant population was small, so was the sample size of the comparison group population ($n=19$).

Differences between the participant and comparison groups can also threaten the findings of an evaluation. The comparison group was older than the drug court participants ($p<.01$), but this should not negatively affect outcomes, as older persons tend to fare better in treatment environments. However, due to the fact that persons in the comparison group were referred to the drug court program but did not participate in the program, their lack of motivation could account for differences in recidivism. There are no adequate statistical controls for motivation.

The evaluation was also limited by the data available. As indicated above, the criminal history data provided from TBI includes statewide arrest data, as long as it was submitted to TBI for fingerprint analysis and inclusion in the statewide criminal history database. The consultants at Statistical Analysis Center did not have confidence that misdemeanor arrests were routinely submitted to TBI by all jurisdictions. Furthermore, not all participants were able to be matched to a state identification number. In the absence of a statewide criminal history report, a local criminal history report was used. When local arrest data could not be accessed, the participant was removed from the recidivism analysis. Finally, all re-offending activity cannot be measured by arrests as not all criminal acts result in arrest. For all these reasons, the recidivism statistics in this evaluation could be underestimated. Equally, since arrest was used to determine arrest and not conviction, recidivism statistics could be overestimated since not all arrests lead to conviction. However, arrests databases are more readily available, and contain more timely information (due to case processing implications) and arrest is a widely accepted indicator of recidivism.

Finally, due to the time and resource constraints of the evaluation, no follow-up was done with drug court participants to determine if long-term outcomes such as reduced substance use, improved education and employment, use of health and mental health services, improved familial and other societal outcomes were maintained.

Chapter 7

Statewide Implications

Overview

Drug court programs balance the community's interest in public safety interests with the rehabilitative needs of offenders through collaborative partnerships between the criminal justice and treatment systems, and several other community service providers. Drug courts are designed to reduce crime by placing drug-involved offenders in ongoing treatment that is supervised and monitored by the courts. Compared to regular criminal courts, drug courts represent a significant departure from traditional adversarial proceedings and operations. Drug court hearings are non-adversarial in nature, and provide an emphasis on accountability and use of incentives and sanctions to encourage participant progress. Participation in drug courts is voluntary, although individuals face significant consequences if they do not successfully follow program guidelines. A multidisciplinary team coordinates ongoing supervision by the drug court judge and leveraged involvement in treatment.

Typical Drug Court Services: Most drug court programs provide a comprehensive range of treatment and ancillary services, and use a phased treatment approach. The initial phase provides intensive outpatient treatment, often for several months, followed by less intensive outpatient treatment in later stages of the program. In addition to regular involvement in treatment, drug court participants attend regular court hearings, receive individual and group counseling, case management services, drug testing, peer support groups (e.g., AA, NA), mental health services, and a range of other ancillary services.

Known Effectiveness of Drug Courts: Several recent literature reviews and meta-analyses summarize findings from drug court outcome studies (Belenko, 2001; Cissner & Rempel, 2005; General Accounting Office, 2005; Latimer, Morton-Bourgon, & Chretien, 2006; Wilson et al., 2006). A meta-analytic review of 50 drug court outcome evaluations found consistent support for the effectiveness of drug court programs (Wilson, et al., 2006). In reviewing outcomes among drug courts and comparison groups, drug courts were found to have an average of 26% less criminal recidivism than comparison samples. Drug courts also have higher retention/graduation rates in contrast to other offender treatment programs in the community (Belenko, 2001; Cissner & Rempel, 2005). Research indicates that drug court participants have lower rates of substance abuse than offenders who are placed under community supervision (Belenko, 1998, 2001; Rempel & Green, 2009), and drug court graduates have higher rates of employment than non-graduates or groups of untreated offenders (Belenko, 1998, 2001; Marlowe, 2010).

Framework of the Statewide Drug Court Evaluation

There were three specific goals to be accomplished in this Statewide Drug Court Evaluation and Training Project.

Goal 1: The completion of a process and outcome evaluation of three selected drug courts in Tennessee that will describe each of the programs and the outcomes being achieved by these three drug court programs, as well as a set of recommendations for improving each of the three drug courts.

Goal 2: The development of a cost-benefit tool and template that can be used by Tennessee drug court programs for developing their own cost-benefit analyses.

Goal 3: The provision of training to state drug court administrators and drug court programs on the (1) key findings and improvement recommendations identified in the process and outcome evaluations and (2) the use of the cost-benefit tool and template.

Specifically, the purposes of this Statewide Drug Court Evaluation and Training Project were to:

- Determine whether the selected drug court programs have met their goals and objectives related to the implementation of services.
- Describe the specific benefits of each drug court program to participants, the community, and the criminal justice system.
- Identify perceived strengths and weaknesses of each selected drug court program from the perspectives of staff, participants and the evaluation team.
- Describe the major components of each drug court program, their effectiveness, and any changes that have occurred in the program over time.
- Examine the degree of coordination between agencies involved in each selected drug court program, and the support for the program from these agencies.
- Identify recommendations from staff and participants for improving each drug court program.
- Examine key drug court outcomes related to criminal recidivism, substance abuse, and other selected outcomes such as employment status.
- Compare outcomes for program participants and a similar group of untreated offenders.
- Determine the cost and benefits of each of the selected drug court programs.

This statewide evaluation of drug courts in Tennessee focused on both "process" measures (e.g. program implementation) and program outcomes (e.g. criminal recidivism) in three selected drug court programs, and included collection of both qualitative and quantitative data. Additionally, budget data was compiled from each of the selected drug courts to be used in the development and testing of the cost-benefit tool and template. The three selected drug court programs actively participated in evaluation efforts, and provided available data (e.g., program completion rates, participant satisfaction, drug test results, change in supervision status, budget, etc.) to support an impact evaluation of the program.

Selection Criteria for Eligibility to Participate in the Statewide Drug Court Evaluation and Training Project

The Tennessee Office of Criminal Justice Programs selected the three drug court programs to participate in the Statewide Drug Court Evaluation and Training Project using the following criteria:

- Being representative of the type, size and location of drug courts the Advisory Committee wants included;
- Having sufficient program experience (e.g., having at least five years' operation would allow the project to follow up for two years a cohort that has had a year's treatment, given two years of pre-treatment data plus one year of treatment);
- Having achieved certification status, so that the evaluation can provide feedback on the certification process by validating compliance with the "10 Key Components".
- Being willing to participate in the drug court program.

- Having an automated MIS that is capable of providing the data needed to complete the process and outcome phases of the evaluation. This assessment will be made based on the results of an online survey to be completed by each of the certified drug court programs in Tennessee.
- Having a list of offenders determined to be eligible for the drug court program but who otherwise opted out of the program.
- Ability to develop a list of offenders to be used as the comparison group for the outcome evaluation.
- History of submitting timely and accurate annual drug court reports.

Three Selected Courts

In October 2009, OCJP selected the Greene County Treatment Court, the Knox County Drug Court and the Sumner County Drug Court to be studied as part of this project. Population movement for these three courts in FY 2007-08, as reported in their annual report, is found in the table below.

Population Movement 2007-08

Indicators	Greene County	Knox County	Sumner County
Funded Capacity	35	80	100
Admitted/Enrolled	40	52	25
Graduated	5	14	15
Terminated	18	18	10
Administratively Withdrawn	0	22	12
Ending Population 6-30-08	33	37	30

Diversity of the Three Selected Courts

The three courts selected to participant in this evaluation represent the diversity of the various drug courts in Tennessee. This diversity includes, among a great deal of other differences, (1) size and racial diversity of the community served, (2) location within the court system, (3) treatment program, and (4) specialized resources. For example:

Size and Racial Diversity of Community Served:

Greene County: In 2005-2009, Greene County had a total population of 66,000 - 34,000 (51 percent) females and 32,000 (49 percent) males. The median age was 40.9 years. Twenty-two percent of the population was under 18 years and 16 percent was 65 years and older.

For people reporting one race alone, 96 percent was White; 2 percent was Black or African American; less than 0.5 percent was American Indian and Alaska Native; less than 0.5 percent was Asian; less than 0.5 percent was Native Hawaiian and Other Pacific Islander, and 1 percent was some other race. One percent reported two or more races. Two percent of the people in Greene County were Hispanic. Ninety-four percent of the people in Greene County were White non-Hispanic. People of Hispanic origin may be of any race.

In 2005-2009, 19 percent of people were in poverty. Twenty-four percent of related children under 18 were below the poverty level, compared with 15 percent of people 65 years old and over. Fifteen percent of all families and 38 percent of families with a female householder and no husband present had incomes below the poverty level.

Knox County: According to U. S. Census data (American Community Survey, 2005-2009), in 2005-2009 Knox County had a total population of 424,000 - 218,000 (51 percent) females and 206,000 (49 percent) males. The median age was 37 years. Twenty-two percent of the population was under 18 years and 13 percent was 65 years and older.

For people reporting one race alone, 87 percent was White; 9 percent was Black or African American; less than 0.5 percent was American Indian and Alaska Native; 2 percent was Asian; less than 0.5 percent was Native Hawaiian and Other Pacific Islander and 1 percent was some other race. Two percent reported two or more races. Two percent of the people in Knox County were Hispanic. Eighty-six percent of the people in Knox County were White non-Hispanic. People of Hispanic origin may be of any race.

In 2005-2009, 15 percent of people were in poverty. Seventeen percent of related children under 18 were below the poverty level, compared with 9 percent of people 65 years old and over. Ten percent of all families and 37 percent of families with a female householder and no husband present had incomes below the poverty level.

Sumner County: According to U.S. Census data, in 2005-2009 Sumner County had a total population of 152,000 - 77,000 (51 percent) females and 75,000 (49 percent) males. The median age was 37.8 years. Twenty-six percent of the population was under 18 years and 12 percent was 65 years and older.

For people reporting one race alone, 90 percent was White; 7 percent was Black or African American; less than 0.5 percent was American Indian and Alaska Native; 1 percent was Asian; less than 0.5 percent was Native Hawaiian and Other Pacific Islander, and 1 percent was some other race. One percent reported two or more races. Three percent of the people in Sumner County were Hispanic. Eighty-eight percent of the people in Sumner County were White non-Hispanic. People of Hispanic origin may be of any race.

In 2005-2009, 10 percent of people were in poverty. Thirteen percent of related children under 18 were below the poverty level, compared with 9 percent of people 65 years old and over. Seven percent of all families and 25 percent of families with a female householder and no husband present had incomes below the poverty level.

Location within the Court System: The Knox County Drug Court program is a special docket within the Criminal Court. The Greene County Treatment Court is a special docket within the General Sessions Court. The Sumner County Drug Court has two special dockets – one in the General Sessions Court and one in the Criminal Court.

Treatment Program:

Greene County: Virtually all persons who enroll in the Greene County Treatment Court program are required to attend a 28-day residential program. Typically, the participants are involved in AA/NA meetings, drug relapse prevention classes, job readiness training, and individual counseling while in the residential program. Once the residential treatment is completed, the participant begins Phase 1 activities. The Greene County Treatment Court treatment program has adopted the *Living in Balance* curriculum developed by the Hazelden Foundation. This curriculum was developed through a National

Institute of Drug Abuse (NIDA) grant and combines experiential, cognitive-behavioral, and 12-Step elements. The curriculum is a comprehensive, group-oriented treatment framework that can be used in outpatient, short-term, or –long-term residential settings. Outpatient treatment is provided by two employees of Comprehensive Community Services, Inc.

Knox County: The majority of the Knox County Drug Court participants receive substance abuse treatment through the Knox County Drug Court staff. These staff members include counselors and case managers. In 2004 the Knox County Drug Court adopted the Matrix model as its core treatment modality. The Matrix Model is a multi-element package of therapeutic strategies that complement each other and combine to produce an integrated outpatient treatment experience for the participant. It is a set of evidence-based practices that are delivered in a clinically coordinated manner. Many of the treatment strategies within the Matrix Model are derived from clinical research literature, including cognitive behavioral therapy, research on relapse prevention, motivational interviewing strategies, psycho-educational information and 12-Step program involvement.

Treatment is delivered in a 16-week intensive outpatient program primarily in structured group sessions targeting the skills needed in early recovery and for relapse prevention. There is also a 12-week family and participant education group series and induction into an ongoing weekly social support group for continuing care. Social support groups (12-step) meetings are an important supplement to intensive treatment and a continuing source of positive emotional and social support.

However, a number of the participants need even more intensive treatment such as residential treatment. A crucial component of the Knox County Drug Court program is the successful referral of the participants to treatment programs/modalities best suited to deal with their problems. While in these residential treatment programs the Knox County Drug Court Team monitors the progress of each participant. The team makes the decisions regarding the participant's admission into the appropriate treatment level of the program. Direct service providers are licensed where required and/or have education, training, and ongoing clinical supervision provided to treatment staff. Outpatient treatment is, therefore, provided by staff of the Knox County Drug court and by staff of other treatment providers.

Sumner County: As with the Greene County Treatment Court, virtually all persons who enroll in the Sumner County Drug Court program are required to attend a 28-day residential program. Typically, the participants are involved in AA/NA meetings, drug relapse prevention classes, job readiness training, and individual counseling while in the residential program. Once the residential treatment is completed, the participant begins Phase 1 activities. If the clinical assessment does not indicate a need for residential treatment, then participants begin the Phase 1 activities immediately.

In the Sumner County Drug Court program, alcohol and drug education classes are an integral part of all four phases. Group counseling is the primary method of treatment intervention used by the Sumner County Drug Court program. Group therapy uses psychotherapy with the primary focus on interpersonal relationships, expression of feelings and development of effective coping skills without the use of mood-altering drugs. In these group sessions, the 12-step process is supported through the use of “How to Escape your Prison”, that forms the basis of the Monday evening sessions. “Coping with Anger” is another resource that is used in the Monday and Wednesday evening education sessions. Among the topics taught are the following; the disease concept, the 12 steps, powerlessness, recovery tools, anger management, parenting, bereavement, self-esteem, improving interpersonal relationships, expression

of feelings, chemical dependency, the family disease, relapse prevention and effective, healthy coping skills. Outpatient treatment is provided by staff of the drug court office.

The Sumner County Drug Court program has recently implemented Moral Reconciliation Therapy (MRT) as the core evidence-based curriculum for the program. Three Drug Court Office staff have been trained and certified in the MRT curriculum. MRT is typically taught during the Friday sessions. Moral Reconciliation Therapy (MRT) is a systematic treatment strategy that seeks to decrease recidivism among juvenile and adult criminal and substance abuse offenders by increasing moral reasoning. Its cognitive-behavioral approach combines elements from a variety of psychological traditions to progressively address ego, social, moral, and positive behavioral growth. Traditionally, Moral Reconciliation Therapy takes the form of group and individual counseling using structured group exercises and prescribed homework assignments. The Moral Reconciliation Therapy workbook is structured around 16 objectively defined steps (units) focusing on seven basic treatment issues: confrontation of beliefs, attitudes, and behaviors; assessment of current relationships; reinforcement of positive behavior and habits; positive identity formation; enhancement of self-concept; decrease in hedonism and development of frustration tolerance; and development of higher stages of moral reasoning. Under normal outpatient Moral Reconciliation Therapy, participants meet in groups once or twice weekly and can complete all steps of the MRT program in a minimum of 3 to 6 months.

Dedicated Drug Court Resources:

Greene County: The Greene County Treatment Court has the smallest staff among the three selected drug courts. The drug court coordinator also serves as the probation officer for drug court participants and for a large caseload of other county probationers. Even though a 28-day residential treatment program is part of the first phase of the Greene County Treatment Court, this program has no specific allocation to fund these services.

Knox County: The Knox County Drug Court has a full-time drug court coordinator, as well as full-time treatment counselors and case managers. Probation supervision is provided by four different probation officers, each with a non-drug court caseload also. The Knox County Drug Court also receives a state allocation to fund residential treatment services.

Sumner County: The Sumner County Drug Court has four full-time drug court staff. Two of these staff members are funded through the ARRA grant program and will disappear on June 30, 2011. The drug court director is a full-time drug court staff member, but she also serves as the probation officer for participants in the Criminal Court section of this drug court program. She also serves as the case manager for participants in the program. A 28-day residential treatment program is the first part of Phase I for this drug court, but funding for these services are not a part of the Sumner County Drug Court program budget.

Caveat: For these and other reasons it is not appropriate to rate drug courts against each other. The best one can do is to describe each drug court and to identify the outcomes achieved by each of them. Individual drug court teams can be informed by the results of their process and outcome analyses and take actions that are appropriate for themselves.

Process Evaluation Methods and Procedures

The process evaluation consisted of a series of ongoing activities and reviews of selected program implementation issues. The ongoing process evaluation activities helped to define key characteristics of the selected drug court programs, program services, and the history of their program development and implementation. Review of the implementation issues provided an intensive examination of functional program areas (e.g., screening and assessment, treatment of special populations, etc.) The process evaluation activities enabled the evaluation to provide actionable information that addresses program improvement recommendations, adherence to the “10 Key Components,” program process issues, data collection and other areas that were found needing improvement that might be helpful to all drug court programs in Tennessee. This information helped inform the training toward the end of the evaluation period.

Six Major Activities: Six major activities were conducted as part of the process evaluation: (1) online survey of drug court team, (2) interviews, (3) observation of drug court and treatment activities, (4) examination of program databases, forms, and other written materials, (5) description of the minimum data set of key program variables as described in Tennessee’s annual reporting and certification processes, and (6) review of selected drug court program implementation issues that are identified as priorities by selected drug court staff. Each is described below:

Online Survey: Early on in the evaluation, all team members were invited to complete an online survey to assess their perceptions of the effectiveness of the different components of their drug court program and to offer recommendations for improving their program. Items on the survey corresponded with standards and indicators identified in *Defining Drug Courts: The Key Components*, published by the Bureau of Justice Assistance in collaboration with the National Association of Drug Court Professionals (also referred to as the *ten key components of effective drug courts*).

Interviews: Semi-structured interviews were conducted to examine the perceived effectiveness of the different components of the selected drug court programs, and to obtain team and participant satisfaction with recommendations for improving the selected drug court programs from the perspectives of various different staff and program participants. Interviews were conducted with the presiding drug court judges, drug court coordinators, prosecutors, defense attorneys, probation officers, treatment coordinators and program staff, and active program participants.

Observation: Observation of key drug court activities were conducted to examine the quality and comprehensiveness of various program services, and to identify potential areas for improvement. Key program activities observed included drug court status hearings, drug court team staffings, treatment groups within each phase of the selected programs, individual counseling sessions, and intake/assessment interviews, and other primary treatment activities and ancillary services provided by each selected program.

Review of Program Materials: Our evaluation also included an ongoing review of key program materials and records, including clinical and supervision records, status hearing reports, MIS database information, and written materials describing the selected drug court programs. These activities helped to identify the type of information routinely compiled for drug court participants and used by the individual drug court programs in monitoring and evaluation reports. Written materials were reviewed including the histories of the selected programs, listing of sanctions, drug testing protocols, therapy

topics, schedule, education topics/schedules, case management and ancillary services, residential treatment services, description of MIS software and systems, program graduate surveys, intake forms, and minutes from any advisory board/committee meetings.

Examination of Program Elements and Implementation Issues

Elements of each of the three selected drug court programs were examined through interviews, observation, and/or review of program materials. These included the following:

- The target population of the drug court program, including demographic and criminal justice characteristics, and admission and exclusion criteria;
- Screening and assessment approaches, including instruments, staffing, and screening procedures;
- Drug testing procedures;
- Program phases and structure;
- Treatment services and resources;
- Ancillary services, including mental health treatment, medical care, housing, vocational and financial services, parenting classes, and other services;
- Judicial supervision, including the frequency of status hearings, and procedures for status hearings;
- Sanctions and incentives used by the drug court;
- Management information system (MIS) and data coordination activities among drug court staff;
- Termination/expulsion criteria, and consequences for unsuccessful termination;
- Graduation procedures;
- Composition of the drug court team and program coordination, including roles and responsibilities of key team members, affiliated agencies linked with the drug court, and the management and organizational structure; and
- Key program components were also assessed to determine whether these components were implemented as intended, to identify key changes, whether the program is achieving stated goals and objectives, any problems identified during implementation, and potential strategies to address these problems.

Outcome Evaluation Methods and Procedures

The outcome evaluation examined the extent to which involvement in the selected drug court programs reduces recidivism, amount of time spent in jail, and substance use; whether program participants are adequately retained in treatment; and the relative benefits and costs of operating each of the selected programs.

Data compiled for the evaluation included demographic and background information (age, race/ethnicity, gender, marital status, education level, employment status, prior arrests). program/program outcome information (legal status at admission, dates of admission and discharge, drug test results, program phase level at time of discharge, date and type of new arrests while in the drug court program, and discharge status).

The following key questions were addressed by the outcome evaluation to the extent that data were available either in the MIS of the individual drug court program or through coordination with the Tennessee Bureau of Investigation:

- What proportion of drug court participants were arrested prior to graduation from the selected programs, during which phases of the programs, and one and two years after discharge from the selected programs?

- How did arrest rates for program participants compare to arrest rates for a similar group of untreated offenders (the comparison group for each selected program)?
- What were the types of offenses for which drug court participants and comparison group participants were arrested during the one and two-year follow-up periods?
- How did the arrest rates and types of arrest compare with the arrest profiles for the participant groups and comparison groups in the two years prior to admission to the drug court programs?
- What was the time to first arrest for the drug court participants and the comparison groups?
- What numbers and types of technical violations were received by program participants?
- What proportion and number of participants successfully completed each drug court program?
- What proportion of drug court participants remained employed, utilized aftercare services, and experienced reunification with their families?
- Were the costs of the selected drug court programs comparable to those of traditional court processing? Were additional costs, if any, justified by the cost savings offsets related to criminal processing, and other areas?
- What program and/or demographic factors contribute to successful outcomes, such as graduation from the program?

Rigorous procedures were followed to protect the confidentiality of drug court participants who were examined in the study. Project staff carefully adhered to federal confidentiality laws and regulations and other applicable laws and regulations governing the confidentiality of information obtained from research subjects (DHHS 42 C.F.R. Part 2).

Summary Process Evaluation Findings

The goals of the process evaluation were to: (1) determine whether the selected drug court programs have met goals and objectives related to implementation of services; (2) describe the specific benefits of the drug court program to participants, to the community, and to the criminal justice system; (3) identify perceived strengths and weakness of the drug court program from the perspectives of staff and participants; (4) describe the major components of the drug court program, their effectiveness, and changes that have occurred over time; (5) examine the degree of coordination between agencies involved in the drug court program, and the support for the program from these agencies; and (6) identify recommendations by staff and participants for improving the drug court program. The process evaluation included observation of drug court activities, review of documents related to program implementation, services, and policies and procedures; interview of drug court team members and current and former participants, an electronic survey of drug court staff, and review of case files and information from the program's management information system.

Greene County Treatment Court Program

Overall, results from the process evaluation indicate that the Greene County Treatment Court program is operating in substantial compliance with the its goals and objectives, its policy and procedures manual, and the 10 key components of effective adult drug court programs.

Identified Strengths of the Greene County Treatment Court Program

A number of significant strengths were identified within the Greene County Treatment Court program, including the following:

Strength of the Drug Court Team: The members of the drug court team are caring and talented individuals who support the goals and processes of the Greene County Treatment Court program. A key issue facing drug courts is the turnover of team members. Staff turnover requires that drug courts provide ongoing training to the team as a whole, as well as role specific training to each of the team members. Drug court teams must make special efforts to incorporate new members into the team, including a comprehensive orientation to the drug court team and its policies and procedures, and attention to how to monitor team processes to allow for all members to provide input to deliberations. All have been associated with this program for at least two years.

Drug court team members identified a number of strengths related to team members and their relationships, including the following:

- Good counselors involved with participants. Strong bonds develop.
- Trusting relationships built between counselor, judge, and clients.
- The team members and the desire we have to continue the program.
- Communication, strong willed people, and willingness to help.
- How well the different agencies work together.

Drug court participants also identified a number of strengths related to the program, including treatment staff and program, team and support system and positive results experienced by participants.

Supportiveness of Individual Team Members: Team members were also asked to rate their perceived degree of supportiveness of individual team members. The composite team rating was 4.7 on a scale to 5.0.

Satisfaction with the Key Components of their Drug Court Program: Drug court team members were asked to rate their level of satisfaction with sixteen components of a drug court program. These components included:

- Mission
- Goals and objectives
- Decision-making processes
- Roles and responsibilities of team members
- Criteria for target population
- Program model (pre- or post-adjudication)
- Judicial supervision
- Screening and referral process
- Plan for acquiring needed resources and services
- Treatment approach and treatment interventions
- Drug testing frequency and protocol
- Case management and monitoring responsibilities
- Incentives and sanctions criteria
- Graduation and termination criteria
- Program evaluation and monitoring plan
- Sustainability plan

Greene County team members reported that they were *very satisfied* or *satisfied* with 11 of these 16 components. The only components which were rated lower than unanimous satisfaction were (1) the criteria for their target criteria, (2) their plan for acquiring needed resources and services, (3) their incentives and sanctions criteria, (4) their program evaluation and monitoring plan, and (5) their sustainability plan. These areas of less than universal satisfaction should be considered when developing the task plan envisioned in Recommendation #1 below.

Effectiveness of Referral and Intake Process: Drug court team members were asked to rate the level of effectiveness with three measures of their referral and intake process: (1) effectiveness in identifying potentially eligible persons, (2) effectiveness in screening out non-appropriate persons, and (3) effectiveness in screening in appropriate persons. Greene County team members reported that their referral and screening process was *effective* in meeting all three of these measures. Overall, team members reported that they were satisfied with their referral and intake process.

Effectiveness of Team/Judicial Review Process: Drug court team members were asked to rate their level of agreement with seven indicators of team effectiveness: (1) the drug court team maintains ongoing communication, (2) team members felt free to make their opinions known to other members, (3) team members fulfill their roles and responsibilities, (4) the team operates by the latest policy and procedures manual, (5) the frequency of court staffings is sufficient, (6) their drug testing protocol is effective, and (7) written progress reports are submitted consistently. The Greene County Treatment Court team members reported *agreement* with each of these indicators of team effectiveness, with the exception of the team operating by their latest policy and procedures manual.

Effectiveness of Team Communication and Coordination: Team members in Greene County reported that communication and coordination among all team members is *effective* to *very effective*.

Consistency in Applying Incentives and Sanctions: Each team member reported that they either *strongly agreed* or *agreed* that the judge responds consistently to each participant's positive efforts as well as to noncompliant behavior.

Effectiveness of Drug Testing Process in Supporting Participants' Recovery Efforts: Participants were asked to rate the effectiveness of drug testing in supporting their recovery efforts. Participants in the Greene County Treatment Court program reported that their program's drug testing was *effective* to *very effective* in supporting their recovery efforts.

Effectiveness in Implementing the Key Components of Adult Drug Courts: Team members were asked to assess the effectiveness of their drug court in implementing the 10 key components of adult drug courts. These components were identified by the National Association of Drug Court Professionals and include:

- Integrating drug and alcohol treatment with justice system case processing.
- Using a nonadversarial approach to promote public safety while protecting due process rights.
- Early identification and treatment.
- Providing access to a continuum of alcohol, drug and other related treatment and rehabilitative services.
- Drug testing.
- Use of incentives and sanctions.

- Judicial monitoring.
- Program monitoring and evaluation.
- Continuing interdisciplinary training.
- Forging partnerships for local support.

The Greene County Treatment Court team indicated that they were *effective* to *very effective* in implementing each of these key components, with the exception of forging partnerships for local support.

Effectiveness of the Drug Court Program: Participants reported that the Greene County Treatment Court program is (1) *effective* in meeting their recovery needs and (2) that the drug court program is *effective* overall.

Identified Issues of Concern

The process evaluation identified a number of significant issues that may have a potentially negative impact on the performance of the Greene County Treatment Court program. These issues are related to the following domains and key components of drug courts, as identified by the U.S. Department of Justice (1997): (1) screening and eligibility (key component #3), (2) management information system (key component # 8), and (3) staff training (key component #9).

Degree to Which the Drug Court Acts in Accordance with its Eligibility Criteria: Overall, team members in Greene County were *slightly less than satisfied* with the target population criteria. Moreover, team members also reported that their drug court did not always abide with its eligibility criteria.

Program Monitoring and Management Information System: Fundamental to the effective operation of drug courts are coordinated management, monitoring, and evaluation systems. The design and operation of an effective drug court program results from thorough initial planning, clearly defined program goals, and inherent flexibility to make modifications as necessary. Management and monitoring systems provide timely and accurate information about program operations to the drug court's managers, enabling them to keep the program on course, identify developing problems, and make appropriate procedural changes.

In Greene County, Comprehensive Community Services, Inc. (CCS) is the treatment provider and employees the Drug Court Coordinator. CCS is also a contracted probation services agency and provides probation supervision to participants in the Greene County Treatment Court through the drug court coordinator. CCS also maintains a database to track its probationers. CCS did not provide access to any management information system, automated or otherwise. Although during the selection process CCS specified that the drug court "always" collects the required information, this information was not made available during the course of this evaluation effort. Dockets were provided that contained some basic information on the participants, but often basic information was missing. Through coordinated efforts with the drug court coordinator participant names, dates of birth, dates of admission and release, and discharge reasons were elicited. The same effort was required to generate information on the list of persons who were referred to the drug court but did not enter, per weekly the drug court dockets. A request for an export of data on drug court participants from a custom-built database used for managing the parent company's probation clients, which include the drug court participants, was denied. From our review of that database, demographic as well as service information

was tracked through that system. Closed files were also reviewed in an attempt to document basic information such as the nature and extent of the substance abuse issue, phase advancement, urinalysis testing and results, and services provided. The closed files reviewed did not contain adequate information to use in this report. The files for four participants were not provided by the treatment.

Team members were asked to rate their level of satisfaction with the drug court program's evaluation and monitoring plan using a five-point agreement scale (1 = *Very Dissatisfied*, 2 = *Dissatisfied*, 3 = *Neutral*, 4 = *Satisfied*, and 5 = *Very Satisfied*). The mean satisfaction rating for its program evaluation and monitoring plan was 3.8 on a scale to 5.0, with one of the 6 respondents being *very satisfied*, three team members being *satisfied*, one team member being *neutral*, and one team member being *dissatisfied*.

Interdisciplinary Training: Continuing education is a hallmark of professionalism and a value that is clearly embraced by the drug court team members. Members of the drug court team use these educational opportunities to reassess program activities, and use information gathered from the experiences of others to modify and improve the drug court program. Drug court team members have received substantial training since becoming members of the team. However, given the turnover of team members and the demands of work outside the drug court team, no drug court team member received training on all the topics listed. For example, 5 out of 6 of the current drug court team members reported that they have received training on the goals and philosophy of drug courts; drug testing standards and procedures; effective use of incentives and sanctions; and effective strategies for sustaining drug courts. Four members reported that they have received training on the nature of AOD abuse, its treatment and terminology; dynamics of abstinence and techniques for preventing relapse; responses to relapse and to non-compliance with program requirements; and utilization of performance data.

Even though many drug court team members indicated they had received drug court-specific training during their involvement in the program, some team members have not received all elements of training considered to be essential for drug court practitioners. For example, less than half of drug court team members indicated that they had received training related to substance abuse treatment, sensitivity to racial, gender, ethnic, and sexual orientation, and utilization of performance data for improving the drug court program.

Drug court team members also identified several specific training needs. Clearly, drug court team members perceive the need for additional training related to the nature of substance abuse, its treatment and terminology, dynamics of abstinence and techniques for preventing relapse, responses to relapse and to non-compliance with program requirements, the interrelationships of co-occurring conditions such as substance abuse and mental illness, effective use of incentives and sanctions.

Recommendations

Recommendation #1: Consensus Improvement Recommendations: During interviews with drug court team members, aggregate results of the online survey were presented, and team members were also asked to rate each recommendation offered in the online survey (including theirs and other staff members' recommendations). The purpose of these additional activities was to reach a consensus rating of each recommendation. A consensus rating was developed for each of the improvement recommendations provided. The highest rating possible for each recommendation was 5.0 (strong

agreement with the recommendation). Seven team members provided their ratings. The highest rated recommendations included the following:

- 4.7: Additional long-term treatment options.
- 4.6: Additional counseling.
- 4.6: To not let people in just because you feel sorry for them.
- 4.6: More staff with a coordinator to help with drug court requirements.
- 4.4: Greater support and cooperation with the support system of AA/NA.
- 4.4: More partnerships with private business for “incentives”.
- 4.4: Develop a brochure for distribution to prospective participants.
- 4.4: Encourage more community support.
- 4.4: Develop an alumni group.

These nine improvement recommendations received strong agreement from all team members. As can be seen, the tasks that will be required to implement most of these improvement recommendations fall within the role and responsibility typically assigned to the position of a drug court coordinator. In the Greene County Treatment Court program, the drug court coordinator also serves as the probation officer and the case manager. This position was also responsible for providing probation supervision another 400-450 persons not in the Greene County Treatment Court program.

The Greene County Treatment Court should meet to review the many recommendations found in this report, especially those for which there is consensus among team members. Recommendations should be prioritized and action steps should be identified that include responsibility for key tasks, timelines, targeted outcomes, etc. Clearly, it may not be feasible to implement all recommendations contained in this chapter, and it will be useful to consider what can be accomplished in the short-term and long-term, give available resources.

It should be noted that the Greene County Treatment Court understands that these improvements can only be made if more time is available to the drug court coordinator. The Greene County Treatment Court team clearly sees this relationship, given one of their second highest rated recommendations – more staff with a coordinator to help with drug court requirements. To that end, the Greene County Treatment Court Judge has decided to terminate the agreement in which the current drug court coordinator is an employee of Comprehensive Community Services, Inc. As of July 1, 2011, the current drug court coordinator will become an employee of another comprehensive community services agency and will be able to spend full-time as the coordinator of the Greene County Treatment Court.

Recommendation #2: Other Weaknesses: The Greene County Treatment Court team should also review perceived weaknesses in the manner in which the team operates. These include communication and cooperation among team members and the effectiveness of periodic team meetings. The team should develop a strategy to improve these two important aspects of team operation. The team should also review the low degree of drug court effectiveness as perceived by both team members and participants as part of their improvement planning process.

Recommendation #3: Full-time Drug Court Coordinator: It is essential that a plan be developed to identify funding to support a full-time Drug Court Coordinator for the Greene County Treatment Court program. Only when such an accomplishment is achieved will the Greene County Treatment Court be in

a position to accomplish many of its other consensus improvement recommendations. *Note: At the time this study was being completed, the Greene County Treatment Court Judge made a decision to contract with another comprehensive community services agency to provide the position of a full-time Drug Court Coordinator. This agency, First Tennessee, has agreed to hire the current coordinator and allow that person to work full-time as the Drug Court Coordinator. At this time a decision is still pending on how treatment services will be provided to participants in the Greene County Treatment Court.*

Recommendation #4: Develop/Acquire and Drug Court-Specific MIS System: Fundamental to the effective operation of drug courts are coordinated management, monitoring, and evaluation systems. Management and monitoring systems provide timely and accurate information about program operations to the drug court's managers, enabling them to keep the program on course, identify developing problems, and make appropriate procedural changes. Program management provides the information needed for day-to-day operations and for planning, monitoring, and evaluation. Program monitoring provides oversight and periodic measurements of the program's performance against its stated goals and objectives.

The Greene County Treatment Court should assess its capability to capture data against the data elements suggested in key documents and BJA documents including the following:

- Criminal history including charge bring person to drug court
- Date of arrest.
- Date of referral to drug court.
- State ID number.
- Date admitted/not admitted to drug court.
- Reasons referred persons do not enter the drug court.
- Alternative sentence if not coming into drug court.
- Date services begin if different from admissions date
- Level of care assessment upon admission and upon discharge.
- Number of days in residential treatment.
- Types and units of service received while in drug court.
- Type of termination and reason for termination.
- Sentence received upon termination.
- Data needed to compile annual report.

Recommendation #5: Implement a Team Training Plan: The Greene County Treatment Court should develop and implement an interdisciplinary team training plan, including a way to orient new members to the drug court team. The Bureau of Justice Assistance currently funds the Drug Court Planning Initiative (DCPI), which is a training program administered by the National Drug Court Institute for jurisdictions which are planning drug courts. An on-line DCPI training curriculum can be accessed free of charge through NDCI's website (www.ndci.org). Members of the Greene County Treatment Court team can access this curriculum (www.ndci.org/training-0) to review foundational principles of drug court operations, including implementation approaches, operational elements (e.g., use of sanctions and incentives), and the conceptual framework and principles underlying drug court treatment.

Recommendation #6: Revise the Policies and Procedures Manual and Participant Handbook: The Greene County Treatment court should revise its policies and procedures manual and participant handbook to reflect new organization of the drug court program. Much of the current information is

still valid, but the description of the various roles and responsibilities of team members needs to be revised. For example:

- While the Greene County Treatment Court Policy and Procedures Manual mentions a Treatment Court Program Director, the position is not available in Greene County and the majority of the tasks listed for this person are also the responsibility of the Treatment Court Coordinator/Probation Officer. The Policy and Procedures Manual is also silent on the law enforcement office and the treatment counselors who serve on the team.
- The Policy and Procedures Manual indicates that there 50 treatment slots; the Tennessee Drug Court Annual Report for 2007-08 indicates a funded capacity of 35 slots. The annual report for 2009-10 indicates a funded capacity of 40.

Recommendation #7: Job Description and Task Plan for the Drug Court Coordinator Position: The Greene County Treatment Court should develop a job description and a task plan for the Drug Court Coordinator that is realistic based on time and resources, but still meets the priority needs of the Greene County Treatment Court program. Priority tasks might include (1) the development/acquisition of a comprehensive MIS, (2) revisions to the policies and procedures manual and participant handbook, and (3) the development a short-term resource development plan, and (4) the development of a longer-term sustainability plan.

Recommendation #8: Review Ratings of Effectiveness in Implementing the 10 Key Components of Drug Courts: The Greene County Treatment Court team may benefit from a review of its ratings described in this report related to the implementation of the “10 Key Components”, to determine if there is a need to make program enhancements in any of the component areas, and accordingly, to modify the program description and/or policy and procedural documents. This is an opportune to do this with the changes being made to have a full-time coordinator and another key partner in the drug court program, and other findings in this process evaluation report. For example:

- Overall, team members in Greene County were *slightly less than satisfied* with the target population criteria. Moreover, team members also reported that their drug court did not always abide with its eligibility criteria.
- The overall rating by team members of Component 10 of the 10 Key Components (Forging partnerships among drug courts, public agencies, and community-based organizations which generates local support and enhances drug court effectiveness.) was only 3.4 on a scale of 1.0 to 5.0. This rating indicates that team members perceive that the Greene County Treatment Court is only *so-so* in implementing this key component.

Knox County Drug Court Program

Overall, results from the process evaluation indicate that the Knox County Drug Court program is operating in substantial compliance with the its goals and objectives, its policy and procedures manual, and the 10 key components of effective adult drug court programs.

Identified Strengths of the Knox County Drug Court Program

A number of significant strengths were identified within the Knox County Drug Court program, including the following:

Strength of the Drug Court Team: The members of the drug court team are caring and talented individuals who support the goals and processes of the Knox County Drug Court program. A key issue facing drug courts is the turnover of team members. Staff turnover requires that drug courts provide ongoing training to the team as a whole, as well as role specific training to each of the team members. Drug court teams must make special efforts to incorporate new members into the team, including a comprehensive orientation to the drug court team and its policies and procedures, and attention to how to monitor team processes to allow for all members to provide input to deliberations. Most have been associated with this program for at least two years; however at least two have been members of the team for less time.

Strengths of the Drug Court Program: Drug court team members identified a number of strengths related to their drug court program, especially the strength of team members and the partnering agencies, including the following:

- Knowledge of the Disease of Addiction and the Legal system
- Concern and diligence
- Always looking for ways to improve the program. Always seeking new resources for participants. Try to talk through problems within treatment team. Willing to learn.
- Employees are about their work. They have a solid understanding of issues related to substance abuse. The Knox County Drug Court has great communication with other agencies involved in a participant's supervision and treatment.
- Communication during emergencies
- Some staff members are devoted to the program. There is immense support from the Judge.
- Strong core Team very open to talk/discuss issues
- Partnering agencies willing to work together
- The communication from some drug court staff members in keeping team members informed has certainly been a strength in recent months. The participation by the Judge and his concern for the participants. The team members support for the program participants.
- The treatment team meets on a regular basis and the Judge is very involved.
- Caring about the well being of the participant.

Supportiveness of Individual Team Members: Team members were also asked to rate their perceived degree of supportiveness of individual team members. The composite team rating was 4.3 on a scale to 5.0.

Satisfaction with the Key Components of their Drug Court Program: Drug court team members were asked to rate their level of satisfaction with sixteen components of a drug court program. These components included:

- Mission
- Goals and objectives
- Decision-making processes
- Roles and responsibilities of team members
- Criteria for target population
- Program model (pre- or post-adjudication)
- Judicial supervision
- Screening and referral process
- Plan for acquiring needed resources and services

- Treatment approach and treatment interventions
- Drug testing frequency and protocol
- Case management and monitoring responsibilities
- Incentives and sanctions criteria
- Graduation and termination criteria
- Program evaluation and monitoring plan
- Sustainability plan

Knox County team members reported that they were *very satisfied* or *satisfied* with 11 of these 16 components. The only components which were rated lower than unanimous satisfaction were (1) their plan for acquiring needed resources and services, (2) their treatment approach and treatment interventions, (3) their incentives and sanctions criteria, (4) their program evaluation and monitoring plan, and (5) their sustainability plan. These areas of less than universal satisfaction should be considered when developing the task plan envisioned in Recommendation #1 below.

Effectiveness of Referral and Intake Process: Drug court team members were asked to rate the level of effectiveness with three measures of their referral and intake process: (1) effectiveness in identifying potentially eligible persons, (2) effectiveness in screening out non-appropriate persons, and (3) effectiveness in screening in appropriate persons. Knox County team members reported that their referral and screening process was *effective* in meeting all three of these measures. Overall, team members reported that they were satisfied with their referral and intake process.

Adherence with Eligibility Criteria: When asked to what extent the Knox County Drug Court abides by its eligibility criteria, seven of the fourteen drug court team members indicated that the drug court *always* abided by its eligibility criteria while another 3 team members reported that the drug court *often* abided by its eligibility criteria. Four team members indicated that he/she *did not know*.

Effectiveness of Team/Judicial Review Process: Drug court team members were asked to rate their level of agreement with seven indicators of team effectiveness: (1) the drug court team maintains ongoing communication, (2) team members felt free to make their opinions known to other members, (3) team members fulfill their roles and responsibilities, (4) the team operates by the latest policy and procedures manual, (5) the frequency of court staffings is sufficient, (6) their drug testing protocol is effective, and (7) written progress reports are submitted consistently. The Knox County Drug Court team members reported *agreement* with each of these indicators of team effectiveness, with the exception of the consistency with which written reports are submitted.

Consistency in Applying Incentives and Sanctions: Each team member reported that they either *strongly agreed* or *agreed* that the judge responds consistently to each participant's positive efforts as well as to noncompliant behavior. The mean rating was 4.2 on a scale to 5.0.

Effectiveness of Drug Testing process in Supporting Participants' Recovery Efforts: Participants were asked to rate the effectiveness of drug testing in supporting their recovery efforts. Participants in the Knox County Drug Court program reported that their program's drug testing was *effective* to *very effective* in supporting their recovery efforts.

Program Monitoring and Management Information System: Fundamental to the effective operation of drug courts are coordinated management, monitoring, and evaluation systems. The design and operation of an effective drug court program results from thorough initial planning, clearly defined program goals, and inherent flexibility to make modifications as necessary. Management and monitoring systems provide timely and accurate information about program operations to the drug court's managers, enabling them to keep the program on course, identify developing problems, and make appropriate procedural changes.

The Knox County Drug Court maintains a database holding information of drug court participants and candidates. The database has a multi-level security system built into it to help ensure participants confidentiality. This database is used to track participants through the program, ensure that participants are meeting certain requirements, ensure the drug court is providing services at a frequency and timeliness to help participants, to collect data as required by the Office of Criminal Justice Programs, and for quality improvement. Included in the data maintained is: drug screens and results, treatment participation, court costs/fees/fines/restitution and payments toward those. The database is also used to store data on:

- Numbers and general demographics of individuals screened for eligibility,
- Extent and nature of AOD problems among those assessed for possible participation in the program,
- Attendance records for those accepted into the program,
- Progress reports for those accepted into the program,
- Drug test results for those accepted into the program,
- Incidence of criminality for those accepted into the program.

All drug court team members have access to the Drug Court MIS data through the MIS-generated Drug Court Docket. The MIS compiles data on participant progress for a particular reporting period to make the weekly Drug Court Docket. The information on this report includes participant's full name, IDN, admission date, current Phase, living environment, treatment provider, last step of the 12-step program formally completed in treatment, individual treatment rating for that reporting period, group treatment rating for that reporting period, number of self help support group meetings attended during that reporting period, total drug screens conducted during that reporting period, and if any were positive results. Each Drug Court Team member receives a copy of this drug court docket at the beginning of the Drug Court Team Meeting. Additionally, throughout the week, counselors, case managers, probation officers and others serving the participant are in communication identifying compliance/non-compliance and beginning to formulate recommendations at the Drug Court Team Meeting.

The Drug Court MIS provides statistically valid data on caseload levels, recidivism rates, drug test results, case management (and other participant records), as well as management and financial records. Members of the drug court team input the information into the MIS through ACCESS. This information may also be used to aid the evaluation of the Drug Court Program.

However, team members were asked to rate their level of satisfaction with the drug court program's evaluation and monitoring plan using a five-point agreement scale (1 = *Very Dissatisfied*, 2 = *Dissatisfied*, 3 = *Neutral*, 4 = *Satisfied*, and 5 = *Very Satisfied*). The mean satisfaction rating for its program evaluation and monitoring plan was 3.8 on a scale to 5.0.

Knox County Drug Court Board of Directors: The Knox County Drug Court has a Board of Directors that was established to provide guidance to the Knox County Drug Court. The Board is authorized to develop and implement specific procedures and policies to aid the Knox County Drug Court in performing its functions. The Board is also responsible for ensuring that the policies and procedures use a non-adversarial approach in which prosecution and defense counsel promote public safety while protecting participant's due process rights.

Identified Issues of Concern

The process evaluation identified a number of significant issues that may have a potentially negative impact on the performance of the Knox County Drug Court program. These issues are related to the following domains and key components of drug courts, as identified by the U.S. Department of Justice (1997): (1) roles and responsibilities of team members and how team members interact with each other (key component # 1), (2) program monitoring and evaluation (key component # 8), and (3) staff training (key component #9).

Team Member Perception of the Knox County Drug Court Program Effectiveness: Team members were asked to assess the effectiveness of the Knox County Drug Court program relative to the three standard goals of a drug court program: using a five-point effectiveness scale (1 = *Very Ineffective*, 2 = *Ineffective*, 3 = *So-So*, 4 = *Effective*, and 5 = *Very Effective*). These common goals are (1) achieving the goals of the drug court program, (2) ending participants' substance abuse, and (3) stopping participants' criminal behavior. With a maximum effectiveness rating of 5.0, the mean effectiveness level for achieving the goals of the drug court program was 3.9; for ending participants' substance abuse (3.6); and for stopping participants' criminal activity (3.8).

Effectiveness of the Drug Court Program as Perceived by Participants: Participants reported that the Knox County Drug Court program is less than effective in (1) supporting their treatment, (2) meeting their recovery needs, and (3) that the drug court program is less than effective overall.

Elements of Team Effectiveness: Team members indicated that the Knox County Drug Court team adhered to certain indicators of team effectiveness: (1) the drug court team maintains ongoing communication, (2) team members felt free to make their opinions known to other members, (3) team members fulfill their roles and responsibilities, (4) the team operates by the latest policy and procedures manual, (5) the frequency of court staffings is sufficient, (6) and their drug testing protocol is effective.

However, there are other aspects of team effectiveness in which the members indicated needed improvement. These are aspects of team effectiveness are:

Effectiveness of Team Communication and Coordination: Team members in Knox County reported that communication and coordination among all team members is slightly less than effective.

Effectiveness of Periodic Team Meetings: When asked to assess the effectiveness of the periodic team meetings in enabling the team to resolve any problems, the team members responded in the following manner. Possible responses were *Very Effective* = 5, *Effective* = 4, *So-So* = 3, *Ineffective* = 2, and *Very Ineffective* = 1. (The number in parentheses indicated the number of times each was identified by team members.) The adjusted mean rating was 3.4 on a scale to 5.0.

Interdisciplinary Training: Continuing education is a hallmark of professionalism and a value that is clearly embraced by the drug court team members. Members of the drug court team use these educational opportunities to reassess program activities, and use information gathered from the experiences of others to modify and improve the drug court program. Drug court team members were asked to identify from a list of training topics those topics for which they have received training since becoming a member of the drug court team. They were also asked to indicate topics for which they or other members of the drug court team needed additional training. As the table below clearly indicates, members of the team have received substantial training since becoming members of the team. However, given the turnover of team members and the demands of work outside the drug court team, no drug court team member received training on all the topics listed.

Drug court team members also identified several specific training needs, as indicated in the table below. Clearly, drug court team members perceive the need for additional training related to the nature of substance abuse, its treatment and terminology, dynamics of abstinence and techniques for preventing relapse, responses to relapse and to non-compliance with program requirements, the interrelationships of co-occurring conditions such as substance abuse and mental illness, and effective use of incentives and sanctions.

Effectiveness in Implementing the Key Components of Adult Drug Courts: Team members were asked to assess the effectiveness of their drug court in implementing the 10 key components of adult drug courts. These components were identified by the National Association of Drug Court Professionals and include:

- Integrating drug and alcohol treatment with justice system case processing.
- Using a nonadversarial approach to promote public safety while protecting due process rights.
- Early identification and treatment.
- Providing access to a continuum of alcohol, drug and other related treatment and rehabilitative services.
- Drug testing.
- Use of incentives and sanctions.
- Judicial monitoring.
- Program monitoring and evaluation.
- Continuing interdisciplinary training.
- Forging partnerships for local support.

The Knox County Drug Court team indicated that they were *effective* to *very effective* in implementing each of these key components, with the exception of (1) early identification and treatment, (2) use of incentives and sanctions, (3) continuing interdisciplinary training, and (4) forging partnerships for local support.

Recommendations

Recommendation #1: Consensus Improvement Recommendations: During interviews with drug court team members, aggregate results of the online survey were presented, and team members were also asked to rate each recommendation offered in the online survey (including theirs and other staff members' recommendations). The purpose of these additional activities was to reach a consensus rating of each recommendation.

A consensus rating was developed for each of the improvement recommendations provided. The highest rating possible for each recommendation was 5.0 (strong agreement by all team members with the recommendation). Fourteen team members provided their ratings. The highest rated recommendations included the following:

- 4.8: Develop a work locator/job finder/skills development program.
- 4.7: Educate the public on the role and the value of the program.
- 4.7: Develop more DA buy-in with the drug court concept.
- 4.6: Refrain from discounting other team members' opinions.
- 4.6: Waive some fees, especially drug testing fees.
- 4.5: Make the drug court program more positive and less punitive.
- 4.5: Team sticking to their roles and more consistency in team decision making.
- 4.5: Increased attention to showing participants how to have fun without drugs.
- 4.5: Recognize that the team derives strength from its diversity. Develop ways to resolve conflict constructively.
- 4.4: Work with partnering agencies to find more positive sanctions.
- 4.4: Team building so that the team comes together as one.
- 4.4: Follow the model and keep participants moving up in phase.
- 4.4: Development of additional incentives. "Being out of jail" is not incentive enough.
- 4.4: Be more creative in the use of sanctions.
- 4.4: Increase understanding and appreciation of members' roles and how they contribute to the well being of the participants.
- 4.4: Increase fellowship opportunities.
- 4.4: Include all drug court team members in decision making process.
- 4.4: Provide ongoing training to all team members.
- 4.4: Identify employers in the community who will hire drug court participants.
- 4.4: Whenever sanctions are applied, frame them in terms of the team (all team members) caring about their success in the program, and help participants connect the sanction with their behavior.
- 4.4: As team members, don't take disagreements personally.
- 4.4: Model "sober fun". Provide opportunities for participants to get together for fun activities.

These 23 recommendations received strong agreement from all team members. As can be seen, very few of these recommendations will require substantial funding to achieve. The Knox County Drug Court team should review these improvement recommendations on a priority basis to develop a plan to improve or enhance their drug court program.

The Knox County Drug Court should meet to review the many recommendations found in this report, especially those for which there is consensus among team members. Recommendations should be prioritized and action steps should be identified that include responsibility for key tasks, timelines, targeted outcomes, etc. Clearly, it may not be feasible to implement all recommendations contained in this chapter, and it will be useful to consider what can be accomplished in the short-term and long-term, given available resources.

Recommendation #2: Implement a Team Training Plan: The Knox County Drug Court should develop and implement an interdisciplinary team training plan, including a way to orient new members to the drug court team. The Bureau of Justice Assistance currently funds the Drug Court Planning Initiative

(DCPI), which is a training program administered by the National Drug Court Institute for jurisdictions which are planning drug courts. An on-line DCPI training curriculum can be accessed free of charge through NDCI's website (www.ndci.org). Members of the Knox County Drug Court team can access this curriculum (www.ndci.org/training-0) to review foundational principles of drug court operations, including implementation approaches, operational elements (e.g., use of sanctions and incentives), and the conceptual framework and principles underlying drug court treatment.

Recommendation #3: Review Ratings of Effectiveness in Implementing the 10 Key Components of Drug Courts: The Knox County Drug Court team may benefit from a review of its ratings described in this report related to the implementation of the "10 Key Components", to determine if there is a need to make program enhancements in any of the component areas, and accordingly, to modify the program description and/or policy and procedural documents.

Recommendation #4: Other Weaknesses: The Knox County Drug Court Team should also review perceived weaknesses in the manner in which the team operates. These include communication and cooperation among team members and the effectiveness of periodic team meetings. The team should develop a strategy to improve these two important aspects of team operation. The team should also review the low degree of drug court effectiveness as perceived by both team members and participants as part of their improvement planning process.

Sumner County Drug Court Program

Overall, results from the process evaluation indicate that the Sumner County Drug Court program is operating in substantial compliance with its goals and objectives, its policy and procedures manual, and the 10 key components of effective adult drug court programs.

Identified Strengths of the Sumner County Drug Court Program

A number of significant strengths were identified within the Sumner County Drug Court program, including the following:

Strength of the Drug Court Team: The members of the drug court team are caring and talented individuals who support the goals and processes of the Sumner County Drug Court program. A key issue facing drug courts is the turnover of team members. Staff turnover requires that drug courts provide ongoing training to the team as a whole, as well as role specific training to each of the team members. Drug court teams must make special efforts to incorporate new members into the team, including a comprehensive orientation to the drug court team and its policies and procedures, and attention to how to monitor team processes to allow for all members to provide input to deliberations. A number of team members have been a member of the Sumner County Drug court team since inception of the program. All but one of its present team members have been associated with this program in some capacity for at least two years.

Drug court team members identified a number of strengths related to their drug court program, especially the strength of team members and their relationships, including the following:

- Each person brings their own strengths to the program. The ability not to judge people for their past actions and accept the willingness to change. If we listened to officers, assistant DA's, other

probation officers opinions of clients coming into drug court, no one would ever be approved for drug court. At some point people get tired of living the lifestyle of using drugs and alcohol and the criminal activity and drama that comes along with it. I feel we do a good job at setting aside past issues and focusing on what a person has the ability to do if given structure and made to be accountable.

- Director, savvy at both legal system and managing client and the complicated life issues that they present with during their time with us. I believe the PERFECT MIX of a very present, lifelong defense attorney, General Sessions judge, and a very busy, only sometimes present, lifelong DA, felony court judge that brings the hammer when required. Participants need BOTH I think.
- Personnel.
- Constant personal contact.
- Weekly reviews.
- Excellent cooperation and communication among drug court team members. Excellent support from Law Enforcement.
- One of our strengths is having someone that has been on both sides of the addiction process.
- Staff sincere and willing to "go the extra mile." New equipment for drug testing.

Drug court participants also identified a number of strengths among the team members including support from various team members.

Elements of Team Effectiveness: Team members were asked the extent of their agreement with the status of key indicators of team effectiveness, using a five-point agreement scale (1 = *Strongly Disagree*, 2 = *Disagree*, 3 = *So-So*, 4 = *Agree*, and 5 = *Strongly Agree*). The team *agreed* or *strongly agreed* with each of these indicators of team and/or judicial review effectiveness. The team *strongly agreed* that (1) the team maintains ongoing communication and (2) the various members of the team are performing their roles and responsibilities. The lowest ranked indicator of team effectiveness (operating in accordance with the current policies and procedures manual) was rated at 3.8 on a scale of 5.0: The composite team rating was 4.7 on a scale to 5.0.

Team Leadership: The leadership of the Drug Court Director, Tracye Bryant, has been pointed out. This report indicates that in the fall of 2009, Ms. Bryant was named the winner of "The Christy Vernon Award," given annually to the drug court coordinator in Tennessee for commitment, dedication and community service.

Satisfaction with the Key Components of their Drug Court Program: Drug court team members were asked to rate their level of satisfaction with sixteen components of a drug court program. These components included:

Mission

- Goals and objectives
- Decision-making processes
- Roles and responsibilities of team members
- Criteria for target population
- Program model (pre- or post-adjudication)
- Judicial supervision
- Screening and referral process
- Plan for acquiring needed resources and services

- Treatment approach and treatment interventions
- Drug testing frequency and protocol
- Case management and monitoring responsibilities
- Incentives and sanctions criteria
- Graduation and termination criteria
- Program evaluation and monitoring plan
- Sustainability plan

Sumner County team members reported that they were *very satisfied* or *satisfied* with 15 of these 16 components. The only component which was rated lower than unanimous satisfaction was their sustainability plan. This area should be considered when developing the task plan envisioned in Recommendation #1 below.

Team Member Perception of the Sumner County Drug Court Program Effectiveness: Team members were asked to assess the effectiveness of the Sumner County Drug Court program relative to the three standard goals of a drug court program: using a five-point effectiveness scale (1 = *Very Ineffective*, 2 = *Effective*, 3 = *So-So*, 4 = *Effective*, and 5 = *Very Effective*). These common goals are (1) achieving the goals of the drug court program, (2) ending participants' substance abuse, and (3) stopping participants' criminal behavior. With a maximum effectiveness rating of 5.0, the mean effectiveness level for achieving the goals of the drug court program was 4.3; for ending participants' substance abuse (4.3); and for stopping participants' criminal activity (4.2).

Effectiveness of the Referral and Intake Process: Team members were asked to rate the effectiveness of the referral and screening processes used in the Sumner County Drug Court program related to three effectiveness criteria: (1) identifying potentially eligible persons for the drug court program; (2) identifying those persons who should not be in the drug court program; and (3) identifying those persons who should be in the drug court program. Sumner County team members reported that their referral and screening process was *effective* in meeting all three of these measures. Overall, team members reported that they were satisfied with their referral and intake process.

Supportiveness of Individual Team Members: Team members were also asked to rate their perceived degree of supportiveness of individual team members. The composite team rating was 4.8 on a scale to 5.0.

Effectiveness of Team/Judicial Review Process: Drug court team members were asked to rate their level of agreement with seven indicators of team effectiveness: (1) the drug court team maintains ongoing communication, (2) team members felt free to make their opinions known to other members, (3) team members fulfill their roles and responsibilities, (4) the team operates by the latest policy and procedures manual, (5) the frequency of court staffings is sufficient, (6) their drug testing protocol is effective, and (7) written progress reports are submitted consistently. The Sumner County Drug Court team members reported a high level of *agreement* with each of these indicators of team effectiveness.

Effectiveness of Team Communication and Coordination: Team members in Sumner County reported that communication and coordination among all team members is *effective* to *very effective*.

Effectiveness of Periodic Team Meetings: When asked to assess the effectiveness of the periodic team meetings in enabling the team to resolve any problems, the team members responded in the following manner. Possible responses were *Very Effective* = 5, *Effective* = 4, *So-So* = 3, *Ineffective* = 2, and *Very Ineffective* = 1. The adjusted mean rating was 4.5 on a scale to 5.0.

Consistency in Applying Incentives and Sanctions: Each team member reported that they either *strongly agreed* or *agreed* that the judge responds consistently to each participant's positive efforts as well as to noncompliant behavior. The mean rating was 4.5 on a scale to 5.0.

Effectiveness of Drug Testing Process in Supporting Participants' Recovery Efforts: Participants were asked to rate the effectiveness of drug testing in supporting their recovery efforts. Participants in the Sumner County Drug Court program reported that their program's drug testing was *effective* to *very effective* in supporting their recovery efforts.

The annual evaluation reports compiled by the external evaluator also recognized the contribution of John Merryman for continuously improving the capability of the Sumner County Drug Court program to conduct its drug testing protocol.

Program Monitoring and Evaluation: In order to provide accountability and objective oversight and to assess the effectiveness of the program, the Sumner County Drug Court has been fortunate to have an external evaluation for much of its existence. An external evaluator has published annual evaluations for the past six years. These reports are based on information obtained from multiple sources, including personal observations made during drug court staffings and hearings, content analysis of various documents, information provided by drug court staff, and from a review of drug court annual report data.

The Sumner County drug court utilizes the CMS2000 MIS, an Access-based database, to manage its program. Demographic characteristics of those referred to the drug court program are documented, as well as the dates of referral to the program and reasons for non-admission to the program for the most part. For persons who are admitted to the program, more complete demographic and historical information is recorded, to include substance use information, diagnoses and prior treatments, arrest history to some extent, and case management information. As participants progress through the program, phase advancement, services, AA/NA meetings, contacts, urinalysis testing and results, sanctions received during the program and are documented. In the Sumner County drug court, two staff members are responsible for all data entry.

Effectiveness in Implementing the Key Components of Adult Drug Courts: Team members were asked to assess the effectiveness of their drug court in implementing the 10 key components of adult drug courts. These components were identified by the National Association of Drug Court Professionals and include:

- Integrating drug and alcohol treatment with justice system case processing.
- Using a nonadversarial approach to promote public safety while protecting due process rights.
- Early identification and treatment.
- Providing access to a continuum of alcohol, drug and other related treatment and rehabilitative services.
- Drug testing.

- Use of incentives and sanctions.
- Judicial monitoring.
- Program monitoring and evaluation.
- Continuing interdisciplinary training.
- Forging partnerships for local support.

The Sumner County Drug Court team indicated that they were *effective* to *very effective* in implementing each of these key components, with the exception of continuing interdisciplinary training.

Identified Issues of Concern

The process evaluation identified a number of significant issues that may have a potentially negative impact on the performance of the Sumner County Drug Court program. These issues are related to the following domains and key components of drug courts, as identified by the U.S. Department of Justice (1997): (1) management information system (key component # 8), and (3) staff training (key component #9), and (3) sustainability planning (key component #10).

Program Monitoring and Management Information System: Fundamental to the effective operation of drug courts are coordinated management, monitoring, and evaluation systems. The design and operation of an effective drug court program results from thorough initial planning, clearly defined program goals, and inherent flexibility to make modifications as necessary. Management and monitoring systems provide timely and accurate information about program operations to the drug court's managers, enabling them to keep the program on course, identify developing problems, and make appropriate procedural changes.

Discussions with the drug court staff revealed that they spend an inordinate number of days at the end of each fiscal year compiling the annual report they are required to submit to the Office of Criminal Justice Programs. The staff would like to have a drug court specific MIS that is capable of "spitting out" the data required for this report.

Interdisciplinary Training: Continuing education is a hallmark of professionalism and a value that is clearly embraced by the drug court team members. Members of the drug court team use these educational opportunities to reassess program activities, and use information gathered from the experiences of others to modify and improve the drug court program. Drug court team members have received substantial training since becoming members of the team. However, given the turnover of team members and the demands of work outside the drug court team, no drug court team member received training on all the topics listed. For example, 5 out of 6 of the current drug court team members reported that they have received training on the goals and philosophy of drug courts; drug testing standards and procedures; effective use of incentives and sanctions; and effective strategies for sustaining drug courts. Four members reported that they have received training on the nature of AOD abuse, its treatment and terminology; dynamics of abstinence and techniques for preventing relapse; responses to relapse and to non-compliance with program requirements; and utilization of performance data.

Even though many drug court team members indicated they had received drug court-specific training during their involvement in the program, some team members have not received all elements of training considered to be essential for drug court practitioners. For example, 3 of the current drug court

team members reported that they have received no training on most of the key training topics recommended by the National Association of Drug Court Professionals. One of the team members reported that he/she has received no formal training – it has all been informal, “learning as you go.”

Drug court team members also identified several specific training needs. Clearly, drug court team members perceive the need for additional training related to (1) the dynamics of abstinence and techniques for preventing relapse, (2) responses to relapse and to non-compliance with program requirements, (3) basic legal requirements of the drug court program and an overview of local CJS policies, procedures, and terminology; (4) drug testing standards and procedures, (5) the interrelationships of co-occurring conditions such as substance abuse and mental illness, (6) effective use of incentives and sanctions., and (7) effective strategies for sustaining your drug court program.

Loss of Funding: The Sumner County Drug Court program will face the loss of its ARRA grant at the end of June 2011. This grant funds 2 or the 4 positions in the drug court office. With the loss of the ARRA grant, which will cause the loss of two of the four positions in the drug court office, the drug court director will probably have to assume probation supervision and case management for all participants in the drug court program. She might also be called upon to facilitate a number of drug court education sessions.

Recommendations

Recommendation #1: Consensus Improvement Recommendations

During interviews with drug court team members, aggregate results of the online survey were presented, and team members were also asked to rate each recommendation offered in the online survey (including theirs and other staff members’ recommendations). The purpose of these additional activities was to reach a consensus rating of each recommendation. A consensus rating was developed for each of the improvement recommendations provided. The highest rating possible for each recommendation was 5.0 (strong agreement with the recommendation). Eight team members provided their ratings. The highest rated recommendations included the following:

5.0: Local government to contribute to overall drug court budget, instead of leaving it up solely to the current set of fees and payments.

4.9: Funds to replace the 12-year-old server.

4.9: Group events that promote confidence, trust and self-esteem.

4.8: Be able to contract with local businesses to work with clients with criminal records.

4.8: Funding for additional staff.

4.8: Increase community support, especially relative to jobs for participants.

4.6: More housing for female participants.

4.6: Public transportation.

4.6: Additional resources.

4.6: Additional resources to increase case managers.

4.6: Encourage clients to use the tools they are given for their continued recovery.

4.6: We need more incentives, not even ones that mean much cost to the program, but if we have a menu of 5-10 sanctions at our disposal, we should work to find just as many incentives, and USE them.

These 12 improvement recommendations received strong agreement from all team members. As can be seen, most of them involve additional funding and/or the development of community partnerships. Three highly rated improvement recommendations involve modifications to the overall treatment

program: (1) Group events that promote confidence, trust and self-esteem; (2) Encourage clients to use the tools they are given for their continued recovery; and (3) We need more incentives.... There are five consensus improvement recommendations related to community partnerships, including (1) Local government to contribute to overall drug court budget, instead of leaving it up solely to the current set of fees and payments; (2) Be able to contract with local businesses to work with clients with criminal records; (3) Increase community support, especially relative to jobs for participants; (4) More housing for female participants; and (5) Local transportation.

The Sumner County Drug Court team should meet to review the many recommendations found in this report, especially those for which there is consensus among team members. Recommendations should be prioritized and action steps should be identified that include responsibility for key tasks, timelines, targeted outcomes, etc. Clearly, it may not be feasible to implement all recommendations contained in this chapter, and it will be useful to consider what can be accomplished in the short-term and long-term, give available resources.

Recommendation #2: Other Weaknesses: The Greene County Treatment Court team should also review perceived weaknesses in the manner in which the team operates. These include communication and cooperation among team members and the effectiveness of periodic team meetings. The team should develop a strategy to improve these two important aspects of team operation. The team should also review the low degree of drug court effectiveness as perceived by both team members and participants as part of their improvement planning process.

Recommendation #3: Full-time Drug Court Coordinator: It is essential that a plan be developed to identify funding to support a full-time Drug Court Coordinator for the Sumner County Drug Court program. Even though the incumbent in this position was recently recognized as Tennessee's Drug court Coordinator of the Year, the loss of the Sumner County Drug Court's ARRA grant at the end of June 2011 will place additional stress on the drug court director. She not only provides leadership for the drug court team, she is also the probation officer for participants in the Criminal Court section of the drug court, as well as case management services for most of the participants in the program. With the loss of the ARRA grant, which will cause the loss of two of the four positions in the drug court office, she will probably have to assume probation supervision and case management for all participants in the drug court program. She might also be called upon to facilitate a number of drug court education sessions.

Recommendation #4: Develop/Acquire and Drug Court-Specific MIS System: Fundamental to the effective operation of drug courts are coordinated management, monitoring, and evaluation systems. Management and monitoring systems provide timely and accurate information about program operations to the drug court's managers, enabling them to keep the program on course, identify developing problems, and make appropriate procedural changes. Program management provides the information needed for day-to-day operations and for planning, monitoring, and evaluation. Program monitoring provides oversight and periodic measurements of the program's performance against its stated goals and objectives.

The Sumner County Drug Court should assess its capability to acquire a management information system that can capture data against the data elements suggested in key documents and BJA documents as well as the information needed for the annual report, including the following:

- Criminal history including charge bring person to drug court
- Date of arrest.
- Date of referral to drug court.
- State ID number.
- Date admitted/not admitted to drug court.
- Reasons referred persons do not enter the drug court.
- Alternative sentence if not coming into drug court.
- Date services begin if different from admissions date
- Level of care assessment upon admission and upon discharge.
- Number of days in residential treatment.
- Types and units of service received while in drug court.
- Type of termination and reason for termination.
- Sentence received upon termination.
- Data needed to compile annual report.
- Etc.

Recommendation #5: Implement a Team Training Plan: The Sumner County Drug Court should develop and implement an interdisciplinary team training plan, including a way to orient new members to the drug court team. The Bureau of Justice Assistance currently funds the Drug Court Planning Initiative (DCPI), which is a training program administered by the National Drug Court Institute for jurisdictions which are planning drug courts. An on-line DCPI training curriculum can be accessed free of charge through NDCI's website (www.ndci.org). Members of the Sumner County Drug Court team can access this curriculum (www.ndci.org/training-0) to review foundational principles of drug court operations, including implementation approaches, operational elements (e.g., use of sanctions and incentives), and the conceptual framework and principles underlying drug court treatment.

Summary Outcome Evaluation Findings

Greene Court Treatment Court Program

The participant cohort for the Greene County Treatment Court program consisted of twenty-three (23) releases from July 1, 2007 – June 30, 2008. Five participants graduated from the program (21.7%); Eighteen (18) were terminated from the program (78.3%). No participants were administratively withdrawn from the program during the 2007-2008 fiscal year. This graduation rate not favorable when compared to completion rates cited in other studies. For example, the Governmental Accountability Office published a report in 2005 reviewing 27 evaluations of 39 adult drug courts and found completion rates between 27% and 66%. Based on the 2007-2008 Annual Drug Court Report, the average graduation rate for in 2007-08 for the 53 drug courts that reported data was 47.5%. The inception-to-date graduation rate for these 53 courts was 53.2%.

Impact on Criminal Activity

The effectiveness of the Greene County Treatment Court program in reducing the criminal offenses of drug court participants is clearly seen by having a recidivism rate of 0% for graduates. However, the

effectiveness of the program seems to be maximized by successful completion of the program, as non-graduates had a recidivism rate of 72% within two years post release.

Impact on Substance Use among Participants

This evaluation sought to examine the extent to which involvement in the drug court program reduced substance use as evidenced by the number and proportion of positive drug tests among drug court participants. However, the treatment provider did not provide sufficient documentation to evaluate this measure.

Impact on Life Circumstances

Information such as changes in education level, employment status, living situations, and other positive outcomes could not be assessed due to the lack of information provided by the treatment provider.

Life Improvements Related by Drug Court Participants: Drug court participants were asked in what ways has participating in the Greene County Treatment Court program has improved their lives. In addition to becoming drug-free, responses clustered into the following categories: (1) enhanced personal gains; and (2) improved employment and education.

Specifically, the participants identified the following ways in which the program has improved their lives.

Sobriety

- It has made me realize there is life without being on drugs.
- I am staying clean and sober. I have a life without drugs.
- It has got me on a structured schedule and is keeping me clean. I have never been so happy about taking a drug test before in my life.
- Sobriety.

Personal Gains

- It's made people have more respect for me.
- Responsibility, maturity, respect, structure.
- I am a mom to my daughter.
- Gained confidence and have become very independent. Have not used in over a year now.
- I don't sit around in pajamas all day anymore! I get up and moving like "normal" people do. I have a job, I have support, I am learning to recognize triggers and cravings and healthy ways to deal with life on life's terms.
- I have coping skills, the ability to stay sober, and restoration of family.
- Mental health

Employment/Education

- I have a job and money.
- Full time job.
- Going back to school.

Predictors of Program Success

The data from Greene County Treatment Court program suggested there are several characteristics that might predict program graduation and reductions in criminal activity.

Participant Characteristics

Age: Consistent with other drug court studies, age was significantly linked to program graduation. The likelihood of graduation increases with age at admission ($p=.014$).

Types of Offenses: Participants with a DUI/drug charge in the 2 years prior to admission were 2 times more likely to graduate than those who did not have a DUI/drug charge in that period ($p=.046$). Participants were eight times more likely to graduate if they had a DUI/drug charge in the year prior to admission ($p=.018$).

Graduation: Graduation was an indicator of long-term success. Participants who failed to graduate were more likely to be arrested post program ($p=.0147$).

Program Characteristics

Timely Processing: Participants who were admitted to the drug court program sooner after arrest were more successful. As the duration from last prior arrest to admission to the program increased, the more likely the participant was to recidivate ($p=.039$).

Length of Stay: As one might expect, increased length of stay is highly correlated with graduation ($p=.001$).

Knox County Drug Court Program

The participant cohort for the Knox County Drug Court program consisted of fifty-one (51) releases from July 1, 2007 – June 30, 2008. Fourteen participants graduated from the program (27.4%); thirty-seven (37) did not complete the drug court program (72.5%). Seventeen participants were terminated; twenty were administratively withdrawn. This graduation rate is comparable to completion rates cited in other studies. For example, the Governmental Accountability Office published a report in 2005 reviewing 27 evaluations of 39 adult drug courts and found completion rates between 27% and 66%. Based on the 2007-2008 Annual Drug Court Report, the average graduation rate for in 2007-08 for the 53 drug courts that reported data was 47.5%. The inception-to-date graduation rate for these 53 courts was 53.2%.

Impact on Criminal Activity

Knox County Drug Court program is effective in reducing the criminal offenses of drug court participants for those participants who complete the drug court program. For example, participants who failed to graduate from the Knox County Drug Court program were 13 times more likely to be arrested in the year following release from the program than graduates, and almost ten times more likely to be arrested in the two years following release than graduates. Moreover, participants in the Knox County Drug Court program, regardless of type of release, were likely to be arrested in the two-year follow-up period that members of the comparison group.

Impact on Substance Use among Participants

This evaluation sought to examine the extent to which involvement in the drug court program reduced substance use as evidenced by the number of positive drug tests among drug court participants. Urinalysis data was extracted from the Knox County Drug Court management information system. All

the urinalysis data was obtained while the participants were actively receiving services in the drug court program.

Drug Testing: Over 4,686 urinalysis screens were scheduled for the participants released from the drug court program from July 1, 2007 – June 30, 2008. This number does not include screens that were scheduled but for which participants were excused from providing a sample. Of those scheduled screens, 4,651 screens were administered to the participant cohort (99%). Thirty-five screens were not administered due to participants not providing a urine sample and not being excused from providing a sample. Unexcused missed urinalysis screens are treated as a positive drug screen in the Knox County Drug Court program.

Positive Urinalysis: Nearly three-quarters of all positive or unexcused drug screens occur while participants are in the first phase of the program. As the participants progressed through the program, the number of drug screens that are positive or unexcused decreased over time. This data is supported by the data presented in the 2007-2008 Annual Drug Court Report. Data from the 53 reporting courts also showed that the number of positive drug screens decreased over time. Positive drug screens in Phase 1 for all drug courts combined was .80 percent of all drug screens; for Phase 2 -- .30 percent; for Phase 3 -- .20 percent; and for Phase 4 -- .11 percent. Six drug courts reported a positive drug screen rate of .11 percent in Phase 5, while three drug courts reported a positive drug screen rate of .49 percent in Phase 6.

Impact on Life Circumstances

Another measure of the effectiveness of drug courts is the change in life circumstances of participants. While often hard to evaluate over longer period of time, the following data on changed life circumstances was extracted from the Knox County management information system on the status of the 2007-08 drug court participants at the time of their release.

Employment Gains: Significant employment gains were noted by the participants who were released from the Knox County Drug Court program from July 1, 2007 – June 30, 2008. At admission, almost fifty-nine percent were unemployed at the time of admission. That number was reduced by nearly half, as only 31% of the participant group was unemployed at the time of release. Nearly forty percent were employed full-time or part-time at admission, while almost 63% were employed full-time or part-time at release. The biggest employment gains were seen in the number persons who had full-time employment at the time of release. The employment status at the time of release proved to be a significant indicator of program success.

Drug Free Babies: There was one participant released from the Knox County Drug Court program during 2007-2008 that was reported to have had a drug-free baby. Estimates on the cost of treating a drug-exposed or drug-addicted baby in the first year of life can total up to \$250,000, with additional medical and related costs accruing in subsequent years to be as high as \$750,000 per child by age 18¹.

Other Life Improvements Related to Drug Court Participation: Drug court participants were asked in what ways has participating in the Knox County Drug Court program improved their life. In addition to

¹ See *Information Relevant To Female Participants In Drug Courts: Summary Overview*. BJA Drug Court Clearinghouse Project, February 14, 2004.

becoming drug-free, responses clustered into the following categories: (1) enhanced personal gains; and (2) reduction in jail time.

Specifically, the participants identified the following ways in which the program has improved their life.

Sobriety

- It has given me another chance at being "free" and living a healthy and happy life.
- I am not using drugs today.
- Forced me to come to terms with my addiction.
- The consequences of drug use have helped keep me clean.
- In all ways....Drug Court gave me my life back!!
- It has changed my life completely for the better.
- Kept me clean and sober
- I'm clean and finding out about myself.
- In many ways. The Drug Court program and Judge B have saved my life.
- Just by staying clean.
- I've learned how to live life clean and sober, how to have fun in recovery, relapse prevention, my spiritual connection grows stronger every day, how to treat myself better - physically, my self esteem is a lot better, I've been employed for a year and a half - learning how to be independent.
- Helped me stay clean.
- It has taught me how to stay sober.

Personal Gains

- In every way. A more manageable life. Less stress. More tools to face life's challenges. Respect. Credibility. Responsibility. Love. Perseverance. Integrity. Hope, above all.
- Anger management classes and mental health provider referral
- Emotional, spiritual, monetary. I've grown up. I'm not a kid anymore; I'm an adult.
- Brought trust with wife back because she knows I want to do right.
- I have an apartment now and vehicle. I have been clean 9 months.

Not in Jail

- It has helped me get back on my feet and kept me out of prison.
- Kept me out of jail.

Predictors of Program Success

The data from Knox County Drug Court program suggested there are several characteristics that might predict program graduation and reductions in criminal activity.

Participant Characteristics

Age: Consistent with other drug court studies, age was significantly linked to program graduation. The likelihood of graduation increases with age at admission ($p=.076$).

Living Environment: Participants who lived in home-based settings, such as with spouses, with partners, with children, with parents, with friends or alone were more likely to graduate ($p<.01$).

Employment: Participants who were employed full-time or part-time were more likely to graduate ($p<.01$).

Probation Status: Participants who were on regular state probation were more likely to graduate ($p<.01$).

Graduation: Graduation was an indicator of long-term success. Participants who failed to graduate were 13 times more likely to be arrested in the year following program release ($p=.018$) and almost ten times more likely to be arrested in the two years following release ($p=.066$) than graduates.

Program Characteristics

Drug Court Counselors: Participants who received their primary treatment from a drug court counselor were more likely to graduate ($p<.01$).

Length of Stay: As one might expect, increased length of stay is a highly correlated with graduation ($p<.01$).

Services: Participants who attended more court sessions ($p<.01$), had more urinalysis tests ($p<.01$), had more documented AA/NA hours ($p<.01$), more documented community service hours ($p<.01$) were more likely to graduate. Participants who had more documented MATRIX hours also proved more likely to graduate ($p=.045$). Specifically, the more hours a participant received of Early Recovery, $p=.046$, Relapse Prevention, $p=.006$, Social Support, $p=.032$, and Family Group, $p=.032$, the more likely they were to graduate. Participants who received more Drug Court Education hours and 12 Step Education hours were also more likely to graduate (both at $p<.01$). Graduates were also more likely to have a greater number of incentives documented ($p<.01$).

Many of these same services are significant to reduced recidivism after release from the program. Participants who attended fewer court sessions ($p=.035$), participants who received fewer urinalysis tests ($p=.045$), participants who received fewer Drug Court Education hours ($p=.047$), and participants who received fewer 12 Step Education hours ($p=.039$) were more likely to be re-arrested at one year post program release. Likewise, participants who documented fewer 12 Step AA/NA hours were more likely to be re-arrested at one year post program release ($p=.029$). Participants who had fewer MATRIX Early Recovery hours documented were more likely to be re-arrested in the two years post program release ($p=.039$).

Treatment Engagement: Participants who had therapeutic services initiated sooner after admission and received those services longer during their participation in the program were more likely to graduate ($p<.01$). Participants who received treatment services for less time compared to their length of stay in the program were more likely to recidivate ($p=.027$).

Participation in the program: Participants were more likely to have a longer time until first arrest compared to the comparison group ($p<.01$). Participants were less likely to be re-arrested in the two year follow-up period than the comparison group ($p=.064$) and were even less likely to have an arrest for a drug charge, or any substance abuse charge, in the two year follow-up period compared to the comparison group (both at $p<.01$).

Sumner County Drug Court Program

The participant cohort for the Sumner County Drug Court program consisted of thirty-seven (37) releases from July 1, 2007 – June 30, 2008. Fifteen participants graduated from the program (40.5%); twenty-two (22) did not complete the drug court program (59.5%). Fifteen of those participants were served under Criminal Court; twenty-two were served under General Sessions division. The graduation rate for the Criminal Court was forty percent; the graduation rate for the General Session court was forty-one percent. This graduation rate is comparable to completion rates cited in other studies. For example, the Governmental Accountability Office published a report in 2005 reviewing 27 evaluations of 39 adult drug courts and found completion rates between 27% and 66%. Based on the 2007-2008 Annual Drug Court Report, the average graduation rate for in 2007-08 for the 53 drug courts that reported data was 47.5%. The inception-to-date graduation rate for these 53 courts was 53.2%.

Impact on Criminal Activity

The Sumner County Drug Court program is effective in reducing the criminal offenses of drug court participants for those participants who complete the drug court program, both during the program and after release. Drug Court participants also experience a longer time until re-arrest than do non-graduates.

Impact on Substance Use among Participants

This evaluation sought to examine the extent to which involvement in the drug court program reduced substance use as evidenced by the number of positive drug tests among drug court participants. Urinalysis data was extracted from the Sumner County Drug Court management information system. All the urinalysis data was obtained while the participants were actively receiving services in the drug court program.

Drug Testing: Over 3,020 urinalysis screens were scheduled for the participants released from the drug court program from July 1, 2007 – June 30, 2008. This number does not include screens that were scheduled but for which participants were excused from providing a sample. Of those scheduled screens, 2,989 screens were administered to the participant cohort (99%). Forty-one screens were not administered due to participants not providing a urine sample and not being excused from providing a sample. Unexcused missed urinalysis screens are treated as a positive drug screen in the Sumner County Drug Court program.

Positive Urinalysis: Well over half of all positive or unexcused drug screens occurred while participants are in the first phase of the program (57.4%). As the participants progressed through the program, the number of drug screens that were positive or unexcused decreased over time. This data is supported by the data presented in the 2007-2008 Annual Drug Court Report. Data from the 53 reporting courts also showed that the number of positive drug screens decreased over time. Positive drug screens in Phase 1 for all drug courts combined was .80 percent of all drug screens; for Phase 2 -- .30 percent; for Phase 3 - .20 percent; and for Phase 4 -- .11 percent. Six drug courts reported a positive drug screen rate of .11 percent in Phase 5, while three drug courts reported a positive drug screen rate of .49 percent in Phase 6.

Impact on Life Circumstances

Another measure of the effectiveness of drug courts is the change in life circumstances of participants. While often hard to evaluate over longer period of time, the following data on changed life circumstances was extracted from the Sumner County management information system on the status of the 2007-08 drug court participants at the time of their release.

Education Gains: Almost 65% of the participant population had a high school education or equivalent or higher at admission. Data was provided in the database that showed that three of the thirty-seven releases had obtained a GED during participation in the program. One participant who earned a GED graduated, while two people who earned GEDs were unsuccessful in the program.

Employment Gains: Significant employment gains were noted by the participants who were released from the Sumner County Drug Court program from July 1, 2007 – June 30, 2008. At admission, almost thirty-nine percent of the participant releases were unemployed. That number was reduced to less than 10% at the time of release. Slightly more than forty-two percent of participant releases were employed full-time or part-time at admission. That figure rose to over 66% at the time of release.

Living Situation: Nearly ninety percent of the participant releases were living in home-based living environment at the time of admission (n=35). Only two persons were documented as being homeless. Upon release, thirty-five of the participant releases were documented as having “adequate housing.” Information on one release was listed as “info not available.” Data on the other release was not available. It was documented in the database that two participants had obtained their own housing during participation in the program. One was living with a relative at admission; the other was documented as “own/rent” at admission.

Drug Free Babies: There was one participant released from the Sumner County Drug Court program during 2007-2008 that was reported to have had a drug-free baby. Estimates on the cost of treating a drug-exposed or drug-addicted baby in the first year of life can total up to \$250,000, with a lifetime of expenses predicted at more than \$750,000. Estimates on the cost of treating a drug-exposed or drug-addicted baby in the first year of life can total up to \$250,000, with additional medical and related costs accruing in subsequent years to be as high as \$750,000 per child by age 18².

Life Improvements Related by Drug Court Participants: Drug court participants were asked in what ways has participating in the Sumner County Drug Court program had improved their life. In addition to becoming drug-free, responses clustered into the following categories: (1) enhanced personal gains; and (2) improved employment and education.

Specifically, the participants identified the following ways in which the program has improved their life.

Sobriety

- I'm sober and see the world different. I now appreciate all the little things in life and I feel good.
- A better me.
- Quit using, became honest.
- I'm sober.
- It's helped me stay off drugs.

² See *Information Relevant To Female Participants In Drug Courts: Summary Overview*. BJA Drug Court Clearinghouse Project, February 14, 2004.

- It has kept me sober.
- Sober, job, responsible.
- I'm drug free.
- I do not wake up withdrawing from pills.
- It has kept me sober.
- Keeps me on track.
- Tremendously; it has helped me to live a complete life again.
- I'm sober and have defects brought to my attention.
- I'm sober.
- Clean living.

Personal Gains

- Family life.
- Made me an upstanding citizen.
- Motivation to help myself, and mend broken relationships.
- Being able to talk about things.
- I'm more responsible, drug free and overall healthier.
- Everything in my life.

Employment/Education

- Got in school.
- GED, college. The way I live. The way I carried myself. The way I treat people.

Predictors of Program Success

The data from Sumner County Drug Court program suggested there are several characteristics that might predict program graduation and reductions in criminal activity.

Participant Characteristics

Education: Education significantly linked to program graduation and post release recidivism. Participants with a high school education or higher were more likely to graduate ($p=.051$) and less likely to recidivate within one year after release ($p=.031$).

Type of Offenses: Interestingly, participants that were referred to the drug court program for an arrest that included a substance charge (drug/DUI), or a property charge or a crime against a person charge, were more likely to be arrested during participation in the program. Participants were more likely to recidivate within one year if they were arrested for a drug offense while in the program ($p=.022$).

Program Characteristics

Length of Stay: As one might expect, increased length of stay is highly correlated with graduation ($p<.01$).

Services: Participants who had more documented AA/NA hours ($p=.015$), had more urinalysis tests ($p<.01$), had more documented in person contact ($p=.026$) were more likely to graduate.

Treatment Engagement: Participants who had therapeutic services initiated sooner after admission and received those services longer during their participation in the program were more likely to graduate ($p<.01$).

Participation in the program: Participants were more likely to have a longer time until first arrest compared to the comparison group ($p<.01$). Participants were also less likely to have an arrest for a drug charge in the two year follow-up period compared to the comparison group ($p<.01$).

Summary Outcome Findings: Predictors of Program Success

Several recent literature reviews and meta-analyses summarize findings from drug court outcome studies (Belenko, 2001; Cissner & Rempel, 2005; General Accounting Office, 2005; Latimer, Morton-Bourgon, & Chretien, 2006; Wilson et al., 2006). A meta-analytic review of 50 drug court outcome evaluations found consistent support for the effectiveness of drug court programs (Wilson, et al., 2006). In reviewing outcomes among drug courts and comparison groups, drug courts were found to have an average of 26% less criminal recidivism than comparison samples. Drug courts also have higher retention/graduation rates in contrast to other offender treatment programs in the community (Belenko, 2001; Cissner & Rempel, 2005). Research indicates that drug court participants have lower rates of substance abuse than offenders who are placed under community supervision (Belenko, 1998, 2001; Rempel & Green, 2009), and drug court graduates have higher rates of employment than non-graduates or groups of untreated offenders (Belenko, 1998, 2001; Marlowe, 2010).

Outcome Evaluation Findings

The table below report the findings of a statistical analysis of MIS data and outcomes in the three drug court programs selected in this study. It is also possible to discern the differences in the types of data captured in each program's management information system from these findings. These findings support the findings from the literature review and meta-analyses described above.

Predictors of Program Success and Other Findings

Predictors of Program Success and Other Findings	Greene	Knox	Sumner
Age: The likelihood of graduation increased with age at admission.	p=.014	p=.076	
Type of Offense Pre-Drug Court:			
<ul style="list-style-type: none"> Participants with a DUI/drug charge in the 2 years prior to admission were 2 times more likely to graduate than those who did not have a DUI/drug charge in that period. 	p=.046		
<ul style="list-style-type: none"> Participants were eight times more likely to graduate if they had a DUI/drug charge in the year prior to admission. 	p=.018		
Education: Education was significantly related to both program graduation and lack of post-program recidivism.			
<ul style="list-style-type: none"> Participants with a high school education or higher were more likely to graduate. 			p=.051
<ul style="list-style-type: none"> Participants with a high school education or higher were less likely to recidivate within one year after release from the drug court program. 			p=.031

Predictors of Program Success and Other Findings	Greene	Knox	Sumner
In-Program Recidivism: Participants were more likely to recidivate within one year if they were arrested for a drug offense while in the program.			p=.022
Graduation:			
• Participants who failed to graduate from drug court were more likely to be arrested after release from drug court.	p=.0147		
• Participants who failed to graduate were 13 times more likely to be arrested in the year following program release than graduates.		p=.018	
• Participants who failed to graduate were almost ten times more likely to be arrested in the two years following release than graduates.		p=.066	
Program Characteristics			
Timely Processing: Participants who were admitted to the drug court program sooner after arrest were more successful.			
• As the duration from the last arrest prior to admission to the program increased, the more likely the participant was to recidivate.	p=.039		
Length of Stay: Increased length of stay is highly correlated with graduation.	P<.01	p<.01	p<.01
Living Situation: The living situation at the time of release proved to be a significant indicator of program success.			
• Participants living in home-based environments as their most recent living situation were more likely to graduate.		p<.01	
Employment:			
• Participants who were employed full-time or part-time were more likely to graduate.		p<.01	
Probation Status: Participants who were on regular state probation were more likely to graduate.		p<.01	
Drug Court Counselors: Participants who received their primary treatment from a drug court counselor were more likely to graduate.		p<.01	
Services: Participants who received more of the following services were more likely to graduate.			
• Attended more court sessions.		p<.01	
• Had more urinalysis tests.		p<.01	p<.01
• Attended more AA/NA sessions.		p<.01	p=.015
• Had more Matrix model hours.		p=.045	
○ More Early Recovery hours.		p=.046	
○ More Relapse Prevention hours.		p=.006	
○ More Social Support hours.		p=.032	
○ More Family Group hours.		p=.032	
• Had more Drug Court Education hours.		p<.01	
• Had more 12--Step Education hours.		p<.01	
• Had more in-person contacts.			p=.026
Services: Participants who received fewer of the following services			

Predictors of Program Success and Other Findings	Greene	Knox	Sumner
were more likely to be re-arrested within one year of release.			
• Attended fewer court sessions.		p=.035	
• Had fewer urinalysis tests.		p=.045	
• Attended fewer AA/NA sessions.		p=.029	
• Had fewer Drug Court Education hours.		p=.047	
• Had fewer 12--Step Education hours.		p=.039	
Services: Participants who received fewer of the following services were more likely to be re-arrested within two years of release.			
• Fewer Matrix Early Recovery hours.		p=.039	
Treatment Engagement:			
• Participants who had therapeutic services initiated sooner after admission and received those services longer during their participation in the drug court program were more likely to graduate.		p<.01	p<.01
• Participants who received treatment services for less time when compared to their length of stay in the program were more likely to recidivate.		P=.027	
Participation in the Drug Court Program:			
• Participants in the drug court program were more likely to have a longer time until their first re-arrest than members of the comparison group.		p<.01	p<.01
• Participants were less likely to be re-arrested in the two-year follow-up period than the comparison group.		p=.064	
• Participants were less likely to have arrest for a drug charge or any other substance abuse charge in the two-year follow-up period than the comparison group.		p<.01	p<.01

Statewide Implications

Given the data described above, it is possible to identify a number of implications that are relevant to future statewide strategies. These strategies should be reviewed with an understanding of the environment in which Tennessee's drug courts are operating.

Environment Strengths

The Office of Criminal Justice Programs has a history of supporting Tennessee's drug court programs. These efforts include leadership, funding and other types of support. A few of these strengths follow. Although this is not an exhaustive list, it is representative of the types of support provided to local drug courts and Tennessee's drug court movement.

Relationship between the Tennessee Office of Criminal Justice Programs and the Drug Court Advisory Committee and the Tennessee Association of Drug Court Professionals: Although the Drug Court Advisory Committee is statutorily mandated, the Office of Criminal Justice Programs has done a great job in respecting the role of the committee so that the committee can support the Office of Criminal

Justice Programs and the statewide drug court movement. OCJP has made great efforts to include the Drug court Advisory Committee and its individual members in all of its major decisions regarding Tennessee's drug courts. Foremost among these was the development of the annual drug court reporting process that is briefly described below.

Similarly, there is a very supportive relationship between OCJP and the Tennessee Association of Drug court Professionals (TADCP). As with the advisory committee, OCJP has also included the input of members of this important drug court professional group in the major decisions being made. They were instrumental in further specifying the types of data that should be included in the annual performance report. Annually, OCJP and TADCP jointly sponsor an annual conference for drug court professionals. This conference is the major training venue for most of the drug court professionals in Tennessee.

Tennessee's Annual Performance Reporting Process: In October 2003, Tennessee initiated a process of developing performance measures and indicators that could be used to assess the performance of individual drug courts and the drug court movement as a whole in the state of Tennessee. This effort was in response to the passage of the Drug Court Treatment Act of 2003. This legislation was enacted to assist the drug court movement in Tennessee by providing dedicated funds and guidelines for the establishment of drug courts. The Act also required OCJP to collect outcome data that could be used to assess the performance of established and emerging drug courts in Tennessee and move the state toward compliance with the Drug Court Treatment Act of 2003. The performance measures are used to establish a standard for best practices and support a network of information that can be shared uniformly.

Standardized Measures: These standardized measures were to be implemented on a statewide basis and their measurement was to be integrated into the ongoing operation of all drug courts in Tennessee. Their implementation provides the foundation for future evaluation of drug court programs across the state. Future evaluations using these performance measures could be used to identify any issues within the statewide network needing reassessment and adjustment. Further, these performance measures and indicators should enable individual jurisdictions to evaluate their local courts.

Institutionalization of Drug Courts: The ultimate goal of the state of Tennessee is to institutionalize drug courts. Without standardized measures and indicators in place, it would be difficult to reproduce and institutionalize the drug court movement in Tennessee. Standardized measures and indicators provide policy-makers and other stakeholders information to continue support and sustenance of the drug court movement. When a member of the community asks, "Does the program work?" a comprehensive response dealing with why and how the program is effective can be provided instead of just a one-word answer.

ARRA Grant to the 21st Judicial District: One of the critical tasks to simplifying the annual reporting process is the acquisition of a management information system that captures the information required for the annual performance reporting process, but other information and data that can enable a drug court to monitor and evaluate its services. OCJP, through an ARRA grant to the 21st Judicial District, enabled and supported the development of a comprehensive management information system designed specifically for Tennessee's performance management environment. This is just one more example of where OCJP has supported an individual drug court program in a way that has statewide promise for other drug courts.

Byrne/JAG Grant to the University of Tennessee: As pointed out in the process evaluations for the three selected drug courts, interdisciplinary team training is an ongoing need. As drug court programs are being planned and implemented, such training is typically available to the entire team. The annual conference jointly sponsored by OCJP and TADCP is able to provide refresher training for many seasoned drug court professionals and those team members who are new to their drug court team. However, budget restraints often limit the ability of all team members to attend. OCJP, through a larger Byrne/JAG grant to the University of Tennessee, has funded the development of a cultural competency module specifically for drug court professionals. This module was recently mailed by CD to all drug courts in Tennessee. This is an important first step to being able to provide just-in-time for new drug court professionals.

Cost Benefit Tool and Template: As part of the contract for this Statewide Drug Court Evaluation and Training Project, the consultants were required to develop a simple, easy-to-use cost-benefit tool and template that any local drug court team could use to document the cost-benefit ratio for their individual drug court, and to garner local support to continue their efforts. As with other activities supported by OCJP, members of the Drug Court Advisory Committee the Tennessee Association of Drug court Professionals were represented on the subcommittee reviewing the project.

Environmental Weaknesses

Local, State and Federal Financial Situation: Drug court teams are made up of a group of persons and agencies that are committed to the drug court mission. Members of these drug court teams are caring and talented individuals who support the goals and processes of their individual drug court programs, in accordance with the key components of effective drug courts. Among these components are short-term and longer-term funding for their drug court programs. Given the economy and the financial situation at all levels of government, it should not be expected that existing drug courts will be able to create, alone, a secure financial future in which to operate.

Statewide Implications and Recommendations

The process evaluations of the three selected drug courts identify a number of individual concerns associated with the implementation of a number of key components of drug courts including ongoing interdisciplinary training and management information systems. While these concerns are clearly the responsibility of local drug courts to solve, a statewide strategy for each of these concerns and others is also warranted. Whether the planning is “bottom’s up” or “top-down”, success will require both a local effort and statewide strategic support. Tennessee is well-positioned because of the strengths identified above to initiate such a planning effort.

The following statewide planning and support implications have been identified in this evaluation effort.

Implication #1: Key Component 6: Program Monitoring and Evaluation: Data System and Data Capability

Rationale: Fundamental to the effective operation of drug courts are coordinated management, monitoring, and evaluation systems. The design and operation of an effective drug court program results from thorough initial planning, clearly defined program goals, and inherent flexibility to make modifications as necessary. Management and monitoring systems provide timely and accurate

information about program operations of the drug court's managers, enabling them to keep the program on course, identify developing problems, and make appropriate procedural changes.

Collection of Evaluation Data

Drug Courts are encouraged to design, implement, and maintain an automated data collection system to collect program implementation data, process information, and baseline data that can be used to chart the progress and impact of their program. The drug court's evaluation plan should detail data elements to be included in the automated data collection system and outline procedures to collect this information, including budgetary and personnel information. The following is a list of the types of information that drug court information systems should routinely collect in addition to the any other information related to their adopted performance measures. The management information systems from the three selected drug court programs were evaluated for their ability to collect the suggested information. Additionally, another data system developed by the 21st Judicial District's drug court program with ARRA funding was evaluation. This is not an assessment of if the drug court program actually collects all of this data, just if their management system is able to collect the data.

Composite Analysis of Selected Management Information Systems

	Greene	Knox	Sumner	21 st JD
Referrals and Screening				
Name, race, sex, and age of persons screened for program eligibility		Y	Y	Y
Case and criminal history information of persons screened for program eligibility		Y	Y	Y
Date of referral to the program		Y	Y	Y
Eligibility determination		Y	Y	Y
Date of refusal/rejection from the program if not admitted		N	Y	Y
Reasons for refusal/rejection from the program if not admitted		Y	Y	Y
Admissions				
Date of arrest.		Y	N	Y
Date of admission to the drug court program.		Y	Y	Y
Age.		Y	Y	Y
Sex.		Y	Y	Y
Race/ethnicity.		Y	Y	Y
Family status.		Y	Y	Y
Employment status.		Y	Y	Y
Educational level.		Y	Y	Y
Current charge(s).		Y	Y	Y
Criminal history.		Y	Y	Y
Drug use history.		Y	Y	Y
Alcohol and other drug treatment history.		N	Y	Y
Mental health treatment history.		N	Y	N
Medical needs (including detoxification).		N	Y	Y
Nature and severity of substance abuse problem.		Y	Y	Y

	Greene	Knox	Sumner	21 st JD
Services and Progress				
Treatment recommendations (from initial assessment and any follow-up assessments).		Y	Y	N
Treatment attendance and progress		Y	Y	Y
Attendance at drug court hearings		Y	Y	Y
Bench warrants issued for participants for nonattendance		N	Y	Y
Urinalysis dates and results		Y	Y	Y
Substances tested for		N	Y	Y
Substances for which found positive		N	Y	Y
Probation contacts		Y	Y	Y
AA/NA Meeting Requirements and Attendance		Y	Y	Y
Incentives on each participant in response to progress with program requirements		Y	Y	Y
Sanctions imposed on each participant in response to a positive drug test or other evidence of noncompliance with program requirements.		Y	Y	Y
Fees, fines, costs, and restitution paid by each participant.		Y	Y	Y
Community service hours completed by each participant.		Y	N	Y
Principal accomplishments of each participant while in the drug court program (e.g., advancement to new phase, attainment of GED or other educational objective, employment, family reunification, birth of drug-free baby).		Y	Y	Y
Phase Level Advancements		Y	Y	Y
Releases				
Release Date		Y	Y	Y
Release Status (graduated, terminated, withdrawn, etc.)		Y	Y	Y
Reasons for Release (non-compliance, lack of progress, new arrest, abscond, etc.)		Y	N	Y
Criminal justice sanctions imposed on participants who do not complete the program.		N	N	N
Re-Arrests				
Number of re-arrests during involvement in the drug court program and for a period of at least 1 year thereafter, and the types of arrests (e.g., drug possession, other nonviolent offense, violent offense), dispositions of those arrests, and days spent in jail for those arrests.		Y	Y	Y
Number of re-arrests for a period of at least 1 year thereafter, and the types of arrests (e.g., drug		Y	Y	Y

	Greene	Knox	Sumner	21 st JD
possession, other nonviolent offense, violent offense), dispositions of those arrests, and days spent in jail for those arrests				
Number of re-arrests for a period of at least 2 year thereafter, and the types of arrests (e.g., drug possession, other nonviolent offense, violent offense), dispositions of those arrests, and days spent in jail for those arrests.		Y	Y	Y
Other Follow-up				
Post program substance use, substance abuse treatment, achievement of social outcomes (attainment of GED or other educational objective, employment, family reunification, birth of drug-free baby), and use of medical services.		N	Y	N
Budget				
Costs of drug court operations, and the source(s) of funding for each operational component.		N	N	N

Entering Evaluation Data

As cited above, just because a MIS can collect key data, does not necessarily mean that drug courts are collecting key data. In addition to having data systems capable of collecting key information, drug courts must ensure processes are in place for staff to enter the information. Processes should outline who is to enter what data and in what timeframe. The processes outlined should be consistent with the functionality of the MIS. For example, if the MIS is a stand-alone program that is housed on only one computer in the office, the drug court should not require that treatment, probation, and the court all enter information into the MIS that they have no access to.

Reporting of Evaluation Data

Another key feature of any MIS is its ability to disseminate data. Data that is difficult to extract from an MIS not only leads to frustration, but underuse of important data needed for ongoing program monitoring and evaluation. The MIS should have preformatted data reports, and if necessary, allow for customization of data queries and reports that programs need for internal and external reporting. An export feature is also advantageous to allow for customized data extraction and manipulation.

If a MIS is well designed, data is entered consistently, and has reasonable reporting features, the above data elements will allow drug courts to produce the following key management reports:

- Tennessee Drug Court Annual Report
- Number of persons screened for program eligibility
- Number of persons found eligible for the program
- Current charges and criminal histories of persons found eligible
- Number of persons admitted to the program
- Number of eligible persons who were not admitted to the program, demographic characteristics, and reasons for non-admission, for comparison purposes.

- Number of participants currently active in the program, with categorization to reflect the number of persons in specific program phases, duration of time in program, and principal types of treatment being provided
- Number and characteristics of persons who successfully complete the program.
- Number and characteristics of persons who have been terminated from the program, reasons for termination, and length of time in the program before termination.
- Number of participants who fail to appear at drug court hearings, and number of bench warrants issued for participants by stage of participation in the program.
- Number of re-arrests during involvement in the drug court program and for a period of at least 1 year thereafter, and the types of arrests (e.g., drug possession, other nonviolent offense, violent offense).
- Fees, fines, costs, and restitution paid by each participant.
- Community service hours completed by each participant.
- Drug test histories of each participant while in the drug court program.
- Record of attendance and treatment progress for each participant.
- Record of program sanctions imposed on each participant in response to a positive drug test or other evidence of noncompliance with program requirements.
- Principal accomplishments of each participant while in the drug court program (e.g., advancement to new phase, attainment of GED or other educational objective, employment, family reunification, birth of drug-free baby).
- Cost-benefit analysis.

For further information, refer to the BJA publication *Drug Court Monitoring, Evaluation, and Management Information Systems*, available online at www.ncjrs.org/html/bja/monitor/welcome.html.

Recommendation 1.1: OCJP should continue to publicize the availability of the data system developed by the 21st Judicial District and facilitate the continued maintenance and enhancement of the system.

Recommendation 1.2: OCJP should include in its priority funding plan monies to enhance the data capability of each drug court, including the adoption of the MIS developed in the 21st Judicial District, as well as data entry capability for each drug court.

Recommendation 1.3: OCJP should continue to work with the Tennessee Bureau of Investigation (TBI) to assure access to information regarding arrests and convictions. TBI is the State Statistical Center, and is the appropriate source of criminal justice information. Enhancements should include the availability of conviction and sentencing data, as contemplated in the annual report performance measures, as well as a web-based user interface for the query system that is already being developed. This would enable individual drug courts to get criminal history information on referrals and participants at various points in the case process.

Recommendation 1.4: Each drug court should assess the capability of its MIS/data system against the recommended requirements and data elements found in the “10 Key Components” document and the guidance provided in Appendix C of annual BJA grant guidance. This assessment should include the ease of data entry, by whom it can be entered, and the capability of the MIS to create reports and data exports for ongoing program monitoring and evaluation purposes. If the drug court’s current management information system is seriously deficient, the drug court should consider adopting the

system developed in the 21st Judicial District (or some other comprehensive, drug court-specific data system).

Recommendation 1.5: Each drug court should also develop procedures to ensure that all suggested data are entered into its MIS to the extent of the capabilities of the MIS.

Recommendation 1.6: Drug courts should include the state ID number (SID), and arrests and referral charges and sentencing information in their MIS. Drug courts should also include termination data (dates and specific reasons and actual sentence imposed) in their MIS.

Implication #2: Key Component 9: Interdisciplinary Team Training:

Rationale: Periodic education and training ensures that the drug court's goals and objectives, as well as policies and procedures, are understood not only by the drug court leaders and senior managers, but also by those indirectly involved in the program. Education and training programs also help maintain a high level of professionalism, provide a forum for solidifying relationships among criminal justice and drug treatment personnel, and promote a spirit of commitment and collaboration. All drug court staff should be involved in education and training. Interdisciplinary education exposes criminal justice officials to treatment issues, and treatment staff to criminal justice issues. It also develops shared understandings of the values, goals, and operating procedures of both the treatment and the justice systems. Judges and court personnel typically need to learn about the nature of alcohol and drug problems, and the theories and practices supporting specific treatment approaches. Treatment providers typically need to become familiar with criminal justice accountability issues and court operations. All need to understand and comply with drug testing standards and procedures.

Drug court team members were asked to indicate from a list of training topics those topics which they or other members of the drug court team needed additional training.

Composite Team Training Needs

Training Topic	DC 1 (n=6)	DC 2 (n=13)	DC 3 (n=7)
Goals and philosophy of drug courts	0	6	4
Nature of AOD abuse, its treatment and terminology	4	4	4
Dynamics of abstinence and techniques for preventing relapse	4	5	6
Responses to relapse and to non-compliance with program requirements	3	6	5
Basic legal requirements of the drug court program and an overview of local CJS policies, procedures, and terminology	0	6	5
Drug testing standards and procedures	1	3	5
Sensitivity to racial, gender, ethnic, and sexual orientation as they affect operations of the drug court	0	6	3
Interrelationships of co-occurring conditions such as AOD abuse and mental illness	1	6	6
Federal, state, and local confidentiality requirements	0	4	4
Effective use of incentives and sanctions	3	7	6
Effective strategies for sustaining your drug court program	2	6	8
Utilization of performance data	1	6	3

Training Topic	DC 1 (n=6)	DC 2 (n=13)	DC 3 (n=7)
<p>Additional Training Needs:</p> <ul style="list-style-type: none"> ▪ Grant writing ▪ Drug Testing ▪ Team building; the importance of communication, enabling. ▪ Copy of the policy/procedures manual. ▪ How the drug court was designed to operate. ▪ Roles, responsibilities and job requirements for drug court staff. ▪ More information on how to develop a more tailored way of accepting or rejecting applications. 			

Recommendation 2.1: OCJP should continue to work with TADCP to ensure “just-in-time” (readily available and accessible) training opportunities for new drug court team members. Such training should include the topics listed in the 10 Key Components document.

Recommendation 2.2: OCJP should evaluate the capability of the system being developed by the University of Tennessee to determine its feasibility for expansion/enhancement to better meet the needs of Tennessee’s drug courts.

Recommendation 2.3: OCJP, in conjunction with TADCP, should develop a drug court treatment academy with the specific mission of enhancing the adoption of evidence-based treatment practices, including staff qualifications and skills. The training academy should also focus on fidelity measures associated with each of the evidence-based treatment curricula.

A number of evidence-based cognitive-behavioral treatment manuals are available and should be considered for implementation in new and emerging drug courts. Many of these are described in SAMHSA’s National Registry of Evidence-based Programs and Practices (NREPP) database. It is recommended that a manualized cognitive-behavioral treatment curriculum be implemented in each “process group” to provide a core set of skills for all drug court participants that address key issues related to substance abuse and criminality. Available treatment curricula provide outlines of treatment sessions and topics, goals and objectives of individual sessions, content to be covered during the sessions, and other resources and materials such as handouts for required homework. Manualized treatments are also available to address special needs of drug court participants, such as trauma/PTSD (e.g., Seeking Safety), co-occurring mental disorders (e.g., Illness Management and Recovery, IMR; Integrated Group Therapy, IGT), and criminal thinking (e.g., criminal Conduct and Substance Abuse, Thinking for a Change). There are also manualized curricula that are geared to enhancing retention in treatment (e.g., Motivational Enhancement Therapy (MET) and Motivational Interviewing MI).

Recommendation 2.4: OCJP should develop a strategy to implement a mentor court system. Mentor courts should be exemplars of one or more of the 10 Key Components. A possible element of such a mentor court process might relate to the evidence-based training academy mentioned above. Another would be the need for immediate technical assistance of a single component of drug courts such as drug testing, management information systems, and the effective use of incentives and sanctions. As part of the mentor court system, OCJP could inventory the strengths of individual drug courts which might be helpful to other drug courts.

Implication #3: Infrastructure Funding Strategy:

Rationale: Each of the strategies identified above will have some fiscal impact to implement. Drug courts are having a difficult time developing their own sustainability plan. This issue is more than merely taking the time to develop such a written plan. It also involves the identification of a realistic source of funding once implementation grant and/or enhancement grant funding ends. In any case, it is an immediate and a longer-term issue for many of Tennessee's existing drug courts.

Recommendation 3.1: Working with the Drug Court Advisory Committee, OCJP should develop a funding/support strategy that assists individual drug courts maintain/enhance their basic infrastructure, to include consideration of the following:

- A full-time drug court coordinator for each drug court with a standard job description.
- Support to acquire/maintain a state-approved MIS system that meets the specifications of the 10 Key Components document as well as being capable of quickly producing the data needed for the annual performance report.
- Drug testing supplies. Drug testing is an instrumental element of all drug courts. Many drug courts fashion their drug testing protocol, not on what is required, but on what they can afford.

Implication #4: Role and Placement of Drug Court Coordinators

Rationale: The drug court coordinator positions in each of the three drug courts selected for this study. In the Greene County Treatment Court the drug court coordinator is an employee of the treatment provider and also serves as the probation officer and case manager for participants in the drug court program as well as serving as the probation officer for another caseload of county probationers. In the Knox County Drug court the drug court coordinator is an employee of the drug court office and serves fulltime as the coordinator. In the Sumner County Drug Court the drug court director is full-time with the drug court office, but also serves as the probation officer and case manager for many of the participants in the drug court program.

In Greene County, the presiding drug court judge recognized the need to have a full-time drug court coordinator and has found another agency to hire the drug court coordinator. Although this might seem to be a small administrative issue, it is a huge structural and organizational issue. For example, the drug court coordinator also inputted drug court information in the treatment provider's management information system. This raises at least three issues. (1) What drug court information will the current treatment provider maintain and provide to the drug court program on drug court participants? (2) What management information system will now be available to the drug court through the new agency that is employing the drug court coordinator? (3) How will current and past drug court information that is in the treatment provider's database be transferred to or accessed by the new agency?

Clearly, these are local issues to resolve, but they may be harbingers for other drug courts in Tennessee. Often local treatment providers have taken the lead in developing the original grant request for funds, and not only provide treatment services to drug court participants but also employee the drug court coordinator. In these instances it is not atypical for the treatment provider to maintain the drug court information. Such a situation seems non-problematic until the need for some type of restructuring of the drug court becomes evident.

Recommendation 4.1: Working with the Drug Court Advisory Committee, OCJP should review the placement options for the drug court coordinator position to determine if such positions should be employed by a treatment provider.

Recommendation 4.2: Working with the Drug Court Advisory Committee, OCJP should review the appropriateness of a treatment provider to maintain/house/own the drug court's management information system.

These two recommendations should be reviewed at the same time funding strategies are developed to assist individual courts maintain and/or enhance their basic infrastructure.

Chapter 8

Cost-Benefit Tool and Template

Introduction

One of the key tasks in this engagement was to develop **a cost-benefit tool and template** specific to Tennessee drug courts that can be used by drug court program personnel for cost-benefit analysis. This tool is to be a simple, computer and/or paper-based tool that can be used on any state approved computer system. The tool is also to include detailed instructions and have the ability to calculate.

Overview³

Drug courts represent the coordinated efforts of justice and treatment professionals to actively intervene and break the cycle of substance abuse, addiction, and crime. As an alternative to less effective interventions, drug courts quickly identify substance-abusing offenders and place them under ongoing judicial monitoring and community supervision, coupled with effective, long-term treatment services.

In this blending of systems, the drug court participant undergoes an intensive regimen of substance abuse treatment, case management, drug testing, and probation supervision while reporting to regularly scheduled status hearings before a judge with a specialized expertise in the drug court model (Fox & Huddleston, 2003). In addition, drug courts increase the probability of participants' success by providing a wide array of ancillary services such as mental health treatment, trauma and family therapy, job skills training, and many other life-skill enhancement services.

Research verifies that no other justice intervention can rival the results produced by drug courts. Drug courts are demonstratively effective. According to over a decade of research, drug courts significantly improve substance abuse treatment outcomes, substantially reduce crime, and produce greater cost benefits than any other justice strategy. Scientists from the Treatment Research Institute at the University of Pennsylvania reported in 2003, "To put it bluntly, we know that drug courts outperform virtually all other strategies that have been used with drug-involved offenders" (Marlow, DeMatteo, & Festinger, 2003). Additionally, Columbia University's historic analysis of drug courts concluded that drug courts provide "closer, more comprehensive supervision and much more frequent drug testing and monitoring during the program than other forms of community supervision. More importantly, drug use and criminal behavior are substantially reduced while offenders are participating in drug court" (Belenko, 1998, p. 2).

GAO Study⁴

In 2005, the U.S. Government Accountability Office (GAO) published an extensive review of drug court research and concluded that adult drug court programs substantially reduce crime by lowering re-arrest

³ Taken from *Painting the Current Picture: A National Report on Drug Courts and Other Problem-Solving Court Programs in the United States*. BJA, March 2008.

⁴ Taken from *Adult Drug Courts: Evidence Indicates Recidivism Reductions and Mixed Results for Other Outcomes*. GAO Report 05-219, February, 2005.

and conviction rates among drug court graduates well after program completion, and **thus, greater cost/benefits for drug court participants and graduates than comparison group members** (GAO, 2005).

According to this study, results from 23 program evaluations confirmed that drug courts significantly reduced crime. Moreover, although up-front costs for drug courts were generally higher than for probation, drug courts were found to be more cost-effective in the long run because they avoided law enforcement efforts, judicial case-processing, and victimization resulting from future criminal activity.

Introduction to Cost-Benefit Analysis⁵

The field of cost analysis, as applied to drug courts, has been developing significantly during the past several years. Initially, most studies focused on savings in jail and prison costs associated with the sanctions that would have been applied to defendants in drug court programs had they proceeded through the traditional adjudication process. More recent studies, however, are increasingly taking into account a variety of other cost factors. These have included:

- Overall criminal justice system costs associated with arrests, prosecution, adjudication and disposition of drug cases;
- Public health costs associated with drug-related physical illnesses, including costs for emergency room care, hospitalization, outpatient medical services, nursing home care and medications;
- Costs relating to lost productivity, including workplace accidents and absences, and unemployment;
- Costs relating to drug related mortality and premature deaths;
- Social welfare costs, including foster care and other support for family members;
- Costs related to specific impacts of drug use, including fetal alcohol syndrome and drug exposed infants; IVU-related AIDS, Hepatitis and Drug-Related Tuberculosis; and
- A range of other costs resulting from drug use, including those incurred by crime victims, persons involved in vehicle accidents; and substance abuse detoxification and other treatment services.

As can be quickly seen, such efforts are beyond the capability of individual drug courts in Tennessee.

Drug Court Cost-Benefit Questions

Increasingly, explorations of the effectiveness of drug courts are called to embrace questions about the benefits that accrue to society relative to the costs that society must absorb in providing drug court services. In short, we are asked to measure the effectiveness of our efforts in economic terms – and to answer such questions as:

- Does the change in client behavior translate into a dollar saving in the reduced societal harm and the increased social productivity of that client?
- Does that dollar saving exceed the dollar cost of providing treatment services?

Common Indices in Cost-Benefit Analyses

To answer those questions fully would require that we apply cost figures, at minimum, to: (a) substance abuse treatment; (b) to criminal justice programming including law enforcement, judicial processing, incarceration, and services to crime victims; (c) to health care; and (d) welfare benefits for our clients. Conversely, we would need to calculate benefits by attaching dollars to reductions in criminal activity, in the use of public health facilities and welfare, and in increases in social productivity.

⁵ Taken from *Cost Benefits/Costs Avoided Reported by Drug Court Programs and Drug Court Program Evaluations*. American University, May 10, 2010.

Because of the HUGE effort to conduct a research-based cost-benefit analysis, these are not often done. However, there are some types of indicators that are commonly used in cost-benefit analysis studies. These include:

Savings reported in jail/prison costs: This information was provided by studied courts using estimated costs for the jail/prison days that would have been imposed on drug court participants, based on prevailing statutory provisions and sentencing practices, had their cases been disposed of through the traditional process. Jail/prison day costs were generally calculated at a minimum rate of \$40.00 per day, but frequently much higher. Per day costs for drug court program participants and services generally ranged between \$8.00 - \$14.00, depending on the nature and extent of treatment and ancillary services provided. This specific number of days and costs saved is based on the total daily costs for drug court participation, compared with the total costs that would have been incurred for probation supervision and incarceration under the traditional disposition process. In addition to the costs savings related to incarceration costs achieved through drug court programs, jurisdictions also reported that the jail and prison capacity made available through the drug court program permitted them to utilize this capacity for offenders who were higher public safety risks.

Estimated rate of employment for drug court graduates (vs. estimated public assistance costs): Typically, less than half of drug court participants were employed either full or part-time at the time of program entry. Many were on public assistance. Most drug courts required participants to be employed or engaged in fulltime study as a condition of graduation and reported a much higher percentage of participants who were employed by the time of graduation.

Birth of drug free babies: Experts estimate that the care and treatment for each child born addicted to drugs costs a minimum of \$250,000 for the first year of life, with additional medical and related costs accruing in subsequent years and estimated to be as high a \$750,000 per child by age 18.

Participant fees collected (in addition to insurance, Medicaid and other payments): In addition to justice system cost savings, studies have noted other benefits resulting which have cost implications including fees/fines collected from participants completing drug court.

General criminal justice system savings resulting from recidivism reductions: Additional findings regarding prosecution, jail and prison cost savings achieved through drug court programs and associated recidivism reductions were also cited in these studies.

Cost-Benefit Tool and Template Subcommittee

To assist in this task, a subcommittee was appointed, comprised of five members: Judge E. Shayne Sexton, Deborah Gibson, Ph.D., Rebekah Provost-Emmons, Ron Hanaver, and Gayle Moyer Harris. These members represent the Advisory Committee, the Tennessee Association of Drug Court Professionals, the Judge's Conference, and individual drug courts.

The Cost-Benefit Tool and Template Subcommittee met in two extensive meetings. Background and discussion materials were reviewed. Research was conducted to identify statewide average data, as well as other well-established monetary values for individual indices. A draft mock-up of the template with explanatory materials was prepared. Examples of the completed draft mock-up of the template

along with back-up materials were reviewed by the subcommittee. Each of the meetings involved intensive, rigorous discussion marked by various viewpoints and opinions. Probably no one agreed with everything in the final template, but through compromise and consensus all subcommittee members are able to support the final version of the template. By the end of this process, the subcommittee agreed to the following guiding principles, in addition to the guidance above (ease, ability to calculate, etc.):

Cost-Benefit Tool and Template Guidance

The Template Should:	The Template Should NOT:
<ul style="list-style-type: none"> Be improvement oriented 	<ul style="list-style-type: none"> Not be a research project.
<ul style="list-style-type: none"> Be based on the data reported in the Annual Report. This includes the population movement reported for that specific year, including admissions, graduates, terminations, and administrative withdrawals. Use one-year benefits rather than lifetime benefits. 	<ul style="list-style-type: none"> Not be a complex, complicated construct that aims to collect any and all costs and potential benefits.
<ul style="list-style-type: none"> Be a tool that can be used at the local level. 	<ul style="list-style-type: none"> Not be a protocol that provides rigid guidance to govern data to be submitted to OCJP.
<ul style="list-style-type: none"> Be voluntary. 	<ul style="list-style-type: none"> Not be a requirement.
<ul style="list-style-type: none"> Be flexible. Drug courts should have the capability to report other benefits not included in the annual report. 	<ul style="list-style-type: none"> Not be rigid and allow no ability of an individual drug court to modify the indices and values to meet local environments.
<ul style="list-style-type: none"> Contain default values that are statewide averages or well-established values. An example of a statewide average is the average cost of a day in prison. An example of a well-established monetary value is the minimum wage of \$7.25 per hours. 	<ul style="list-style-type: none"> Not be considered a tool whose default values are based on individual-specific data.
<ul style="list-style-type: none"> Allow individual drug courts to replace default values with values that are more precise to their local community. 	<ul style="list-style-type: none"> Force each drug court to use the same values if they have more specific and/or precise data.
<ul style="list-style-type: none"> Be a beginning. 	<ul style="list-style-type: none"> Not be an end.

Specific Guidance from Cost-Benefit Tool and Template Subcommittee

- The template should be based on data reported in the Annual Report. As mentioned earlier in Chapter 2, in October 2003, Tennessee initiated a process of developing performance measures and indicators that could be used to assess the performance of individual drug courts and the drug court movement as a whole in the state of Tennessee. This effort was in response to the passage of the Drug Court Treatment Act of 2003. This legislation was enacted to assist the drug court movement in Tennessee by providing dedicated funds and guidelines for the establishment of drug courts. The Act also required the Office of Criminal Justice Programs to collect outcome data that could be used to assess the performance of established and emerging drug courts in Tennessee and move the state toward compliance with the Drug Court Treatment Act of 2003. The performance measures are used to establish a standard for best practices and support a network of information that can be

shared uniformly. These standardized measures were implemented on a statewide basis and their measurement is integrated into the ongoing operation of all drug courts in Tennessee.

Among the data reported in the annual report that can be used as a basis for looking at costs and benefits are:

- Annual participant movement.
 - Amount of time in jail and/or prison during participation in the drug court program.
 - Birth of drug-free babies.
 - Employment, re-employment, and/or improved employment.
 - Education gains.
 - Child support payments.
 - Hours of community service.
 - Fines, court costs, program costs, and restitution paid.
- The template should be a tool that is used for improving the individual drug court, not adding to the body of science and research on cost-benefit analysis methodologies.
 - The template should be a tool that is used at the local level, not a protocol that provides rigid guidance to govern data to be submitted to OCJP.
 - The template should be a tool that is voluntary at the local level, not a requirement that each drug court must use.
 - The template should be a tool that contains “default” values that are statewide averages or well-established values. An example of a statewide average is the average cost of a day in prison. An example of a well-established monetary value is the minimum wage of \$7.25 per hour. The template should be flexible. Drug courts should be able to change from the use of “default” values to values that are more precise for their specific communities. Drug courts should have the capability to report other benefits not included in the annual report.
 - The template should be used by individual drug courts for their own analysis and use. It should be not used as a process to compare one drug court with another.
 - The template should require little additional data collection by the individual drug court, but it should not lock out more precise local information.

The only additional information not included in their annual report that must be used to complete this template and arrive at a cost-benefit ratio is (1) their annual operating budget and (2) the classes of offenses committed by their participants. Inserting this information and information already included in their annual report will allow an individual drug court to develop an initial cost-benefit ratio based on the default values imbedded in the template. However, the default values can be easily revised to substitute more accurate local information to allow a more precise cost-benefit ratio, specific to that individual drug court. (A schedule of the latest statewide default values and their source information for each element of the cost-benefit tool and template is found at Appendix 12.)

Use of the Drug Court Program’s Operating Budget as the Cost Base

Consistent with the Cost-Benefit Tool and Template Subcommittee’s guidance that the cost-benefit tool and template should be a resource for local drug courts to use to garner support at the local level to sustain and enhance their funding, the subcommittee agreed that the basic cost to be used in the template would be the drug court’s operating budget. The subcommittee members discussed the fact that each drug court’s annual operating budget is different one from the other and is based on the budgeting practices of parent organizations. In any case, the annual operating budget should be readily

available to each drug court program and should reflect a standard base at which to begin the cost-benefit analysis. Therefore, the basic question that underlies the cost-benefit tool and template is what is the value our community derives from the cost invested in the drug court's operating budget?

Use of Population Movement as the Base for Potential Cost Savings

One of the advertized benefits of a drug court is the potential savings of serving a person in an intensively supervised program in the community rather than serving that same person in jail or in prison. This template uses the number of admissions in any given year and reported in the Annual Report as the basis for determining potential cost savings. The number of admissions for each class of offense is multiplied by the minimum cost of traditional processing (incarceration and/or probation) for that same class of offense. Potential cost savings are then reduced for the inefficiencies or ineffectiveness of the drug court program, as measured by the number of terminations and administrative withdrawals in that same year.

Minimum Costs for Felony Sentences as a Default Value: The Administrative Office of the Courts annually publishes data on felony sentencing practices in Tennessee. These data include the percent of felons, by class of felony and by type of felony, and their average sentences broken into three classifications: (incarceration only, probation only, and split sentences). However, persons sentenced to the Tennessee Department of Corrections are eligible for parole after serving 30 percent of their sentence. Parole sentences are not reduced – an offender must serve the entire probation sentence. A minimum cost for each of these average incarceration sentences (@30%) for each class of felony can be established simply by multiplying the average number of days (@ 30%) by the statewide average cost of a day in prison. The cost of the follow-on probation sentence can be established by the average probation sentence by the cost of a day on probation. The default value for each class of felony is the minimum possible cost of the average sentence by assuming that an offender will only spend 30% of the incarceration sentence plus the entire probation sentence. However, again, each individual drug court has the ability to modify the monetary value in the template based on their local, more precise information.

Default Costs for Misdemeanor and DUI Cases: In misdemeanor and DUI cases, average sentence costs were established for jail placements and for probation placements. In Tennessee, there is a range of jail time to which a person can be sentenced for each class of misdemeanor offense and for each type of DUI. For example, an offender convicted of a Class C misdemeanor can be sentenced for up to 30 days in jail. Persons sentenced to jail must serve only 75% of that sentence in jail and the remainder of that sentence on probation. The “default” monetary value is the minimum cost of the sentence (minimum number of possible days in jail plus the remainder of the sentence on probation. The cost per day in jail and the cost of a day on probation are the latest statewide average costs. Again, the individual drug court has the ability to modify the monetary value in the template based on their local, more precise information.

Cost or Benefit of the Value of Team Member Time

Typically, more extensive and complicated cost-benefit analyses include the time of team members who “volunteer” their time as a cost. However, one of the goals of the Tennessee’s drug court movement is *to promote effective interaction and the use of resources among local criminal justice agencies and community agencies*. There was considerable discussion among the subcommittee members regarding how to treat the value of the time of the various team members whose salaries are not part of the drug

court's operating budget. A strong rationale could be made to include the value of a team member's time as a value under the goal of promoting effective interaction and the use of resources among criminal justice agencies and community agencies. If team members were not spending time on drug court matters, they would be spending it on other issues. In the end, the subcommittee decided that this was a local decision to include the value of team members' time as a benefit. The cost-benefit tool and template allows this flexibility.

Cost or Benefit of the Value of Residential Treatment Services Not a Part of the Operating Budget

Similarly, many of Tennessee's drug courts use residential treatment as part of their drug court program. In some cases, the cost of residential treatment is part of the operating budget. In others, it is not. In some cases, where the cost of residential treatment is part of the operating budget the participant must pay or reimburse the cost of these services. In situations in which the cost of residential services is not a part of a drug court's operating budget, the drug court has been able to promote the use of other agencies' resources to provide these services to its participants. In some situations, the participant's own insurance covers part or all of the cost of these residential services. The discussion among the subcommittee members was how to include, if at all, the value of these services as a benefit. The subcommittee again decided this was a local decision, but that the template should include the capability to include the value of such services as a value under the goal of effective interaction and use of local resources. Furthermore, the template allows the fees paid by participants to the drug court for residential treatment service to be included under the *goal of increased personal, familial and societal* accountability of offenders in the same way court-ordered fees and fines are included. The template also allows a drug court to include the value of such services, not included in the operating budget, to be included under the *goal of promoting effective interaction and the use of resources among local criminal justice and community agencies*.

One-Year Benefits

The subcommittee agreed that potential benefits should be calculated for a one-year period of time. This is consistent with the use of the annual operating budget being used as the cost base for the template. For example, the benefit the birth of a drug-free baby is typically reported as a cost-savings of \$250,000 for the first year of life and \$750,000 over the life of that infant. For this template only the potential one-year benefit is used. Likewise the potential benefit of a GED is calculated for one year, not over the years of life expectancy of the graduate. Other benefits, other than using standard sentencing data (which in most cases extends beyond a year), are also calculated for a one-year period.

One-Year Recidivism Data

One of areas in which considerable discussion, with multiple viewpoints, occurred among the subcommittee members was consideration of how to use recidivism in the template. Each subcommittee member recognized the value of looking at recidivism as a measure of effectiveness. The concern was how to place a monetary cost to the measure. Among the key elements of the discussion was just how much responsibility does a drug court bear for a former participant committing a new law violation. Must the drug court bear the cost for "fully curing" a participant? The discussion acknowledged that there are many other factors within the environment of each participant that are related to recidivism, not solely the quality of treatment and supervision provided by the drug court program.

In the end the subcommittee agreed that, even in this cost-benefit template, one-year recidivism should be reported, but it should not be a required element in the cost-benefit ratio. The subcommittee members recommend that each drug court review each of the one-year recidivism cases to determine what might be changed to reduce the one-year recidivism rate. In some cases, the local drug court might elect to include individual “costs of recidivism” in its final cost-benefit ratio. However, that should be a local decision, based on local review.

Cost-Benefit Tool and Template

The cost-benefit tool and template was developed in Microsoft Excel. A screenshot of the cost-benefit tool and template is found at Appendix 13. It is a tool that local drug courts can use to begin to place a value on the services they provide to their participants and to their communities. It is a simple, easy-to-use process that local drug courts can use in their efforts to garner more support for their important rehabilitation efforts. In short, the template compares the monetary value of a drug court’s many benefits with its annual operating budget. It is based on the performance measures established in Tennessee’s annual drug court reporting process, and requires little additional data collection on the part of the local drug court. However, it is flexible and allows an individual drug court to use any additional performance data already collected by the individual drug court, or any additional performance data the drug court is willing to collect.

The template is for local use. The template will not be required to be completed. Local drug courts will not be required to submit its analysis to the Tennessee Office of Criminal Justice Programs. It is a tool that can provide additional information to the local drug court team to further fuel the drive to continue to improve the services and outcomes of the specific drug court.

Chapter 9

Training

Introduction

One of the three goals of the Statewide Drug Court Evaluation and Training project was the provision of training to state drug court administrators and drug court programs on the (1) key findings and improvement recommendations identified in the process and outcome evaluations and (2) the use of the cost-benefit tool and template.

Completed Action

This training was conducted on Monday, June 27, 2011 in Nashville, TN. A copy of the PowerPoint presentation used in this training can be found in Appendix 14.

References

- Belenko, S. (1998). Research on drug courts: A critical review. *National Drug Court Institute Review*, 1(1), 1-42.
- Belenko, S. (2001). *Research on drug courts: A critical review 2001 update*. New York: The National Center on Addiction and Substance Abuse at Columbia University.
- Bureau of Justice Assistance (2005). *BJA Drug Court Clearinghouse Project: Summary of drug court activity by state and county*. Washington, DC: American University (<http://www.american.edu/justice/>).
- Cissner, A.B., & Rempel, M. (2005). *The state of drug court research: Moving beyond 'Do they work?'*. Center for Court Innovation: New York.
- Hora, P.F., Schma, W.G. & Rosenthal, J.T.A. (1999). Therapeutic jurisprudence and the drug treatment court movement: Revolutionizing the criminal justice system's response to drug abuse and crime in America. *Notre Dame Law Review*, 74(2): 439-538.
- Huddleston, W. (2010). Drug courts: A viable solution to drug dependent offenders. *Journal of Global Drug Policy and Practice*, 4(3), (<http://www.globaldrugpolicy.org/previous.php>).
- Latimer, J., Morton-Bourgon, K., & Chretien, J. (2006). *A meta-analytic examination of drug treatment courts: Do they reduce recidivism?* Canada Department of Justice, Research and Statistics Division.
- Marlowe, D.B. (2010). *Research Update on Adult Drug Courts*. Alexandria, Virginia: National Association of Drug Court Professionals.
- National Association of Drug Court Professionals (2010). *Need to Know*. Alexandria, Virginia.
- National Institute of Justice (2006). *Special Report - Drug courts: The second decade*. Washington, D.C.
- Peters, R.H. (1996). *Evaluating drug court programs: An overview of issues and alternative strategies*. Washington, D.C: American University, Justice Programs Office.
- Prins, A., Ouimette, P., Kimerling, R., Cameron, R.P., Hugelshofer, D.S., Shaw-Hegwer, J., Thrailkill, A., Gusman, F.D., Sheikh, J.I. (2004). The primary care PTSD screen (PC-PTSD): development and operating characteristics. *International Journal of Psychiatry in Clinical Practice*, 9(1), 9-14.
- Rempel, M., & Green, M. (2009). *Do drug courts reduce crime and produce psychosocial benefits?* Paper session presented at the 2009 Annual Conference of the American Society of Criminology, Philadelphia, Pennsylvania.
- U.S. Department of Justice (1997). *Defining drug courts: The key components*. Washington, D.C: Office of Justice Programs, Drug Courts Program Office.
- U. S. Government Accountability Office (2005). *Adult drug courts: Evidence indicates recidivism reductions and mixed results for other outcomes*. Washington, D.C: General Accounting Office.

Weathers, F.W., Huska, J.A., & Keane, T.M. (1991). *PCL-C for DSM-IV*. Boston: National Center for PTSD – Behavioral Science Division.

Wilson, D.B., Mitchell, O., MacKenzie, D.L. (2006). A systematic review of drug court effects on recidivism. *Journal of Experimental Criminology*, 2(4), 459-487.

Appendices

Appendix 1

Greene County Treatment Court Rated Scales

Appendix 2

Greene County Treatment Court Consensus Improvement Recommendation Ratings

Appendix 3

Knox County Drug Court Rated Scales

Appendix 4

Knox County Drug Court Consensus Improvement Recommendation Ratings

Appendix 5

Sumner County Drug Court Rated Scales

Appendix 6

Knox County Drug Court Consensus Improvement Recommendation Ratings

Appendix 7:

Composite Rated Scales

Appendix 8:

Composite Interdisciplinary Training Needs

Appendix 9

Composite MIS Data Element Analysis

Appendix10

Composite Outcome Data – Predictors of Success

Appendix 11

TBI Grouping of Arrests/Crimes

Appendix 12

Cost-Benefit Tool and Template Default Values for FY 2009-10

Appendix 13

Cost-Benefit Tool and Template

Appendix 14

Training Session PowerPoint Handouts

Appendix 3 Knox County Drug Court Rated Scales

Background

Among the many purposes of the Statewide Drug Court Evaluation and Training Project were the following:

1. Determine whether the selected drug court programs have met their goals and objectives related to the implementation of services.
2. Describe the specific benefits of each drug court program to participants, the community, and the criminal justice system.
3. Identify perceived strengths and weaknesses of each selected drug court program from the perspectives of staff, participants and the evaluation team.
4. Describe the major components of each drug court program, their effectiveness, and any changes that have occurred in the program over time.
5. Examine the degree of coordination between agencies involved in each selected drug court program, and the support for the program from these agencies.
6. Identify recommendations from staff and participants for improving each drug court program.

Six Major Activities

Six major activities were conducted as part of the process evaluation: (1) online survey of drug court team, (2) interviews, (3) observation of drug court and treatment activities, (4) examination of program databases, forms, and other written materials, (5) description of the minimum data set of key program variables as described in Tennessee's annual reporting and certification processes, and (6) review of selected drug court program implementation issues that are identified as priorities by selected drug court staff.

Online Survey: All team members were invited to complete an online survey to assess their perceptions of the effectiveness of the different components of their drug court program and to offer recommendations for improving their program. Items on the survey corresponded with standards and indicators identified in *Defining Drug Courts: The Key Components*, published by the Bureau of Justice Assistance in collaboration with the National Association of Drug Court Professionals (also referred to as the *ten key components of effective drug courts*).

Survey of Participants: A similar survey was administered to participants in the Knox County Drug Court program. This survey was administered at one of the regularly scheduled treatment sessions.

Survey Results

Team Member Survey (14 respondents)

Survey Item	Rating (1.0-5.0) (Adjusted Mean)	Number of Don't Know, Not Applicable, and No Responses
Satisfaction with Following Components of Drug Court Program.		
▪ Mission	4.3	2
▪ Goals and objectives	4.5	3

Survey Item	Rating (1.0-5.0) (Adjusted Mean)	Number of Don't Know, Not Applicable, and No Responses
▪ Decision-making processes	3.5	1
▪ Roles and responsibilities of team members	3.4	1
▪ Criteria for target population	4.1	
▪ Program model (post-adjudication)	4.8	1
▪ Judicial supervision	4.1	
▪ Screening and referral process	4.2	1
▪ Plan for acquiring needed resources and services	3.8	1
▪ Treatment approach and treatment interventions	3.3	
▪ Drug testing frequency and protocol	4.3	
▪ Case management and monitoring responsibilities	4.2	2
▪ Incentives and sanctions criteria	3.2	1
▪ Graduation and termination criteria	4.0	
▪ Program evaluation and monitoring plan	3.9	3
▪ Sustainability plan	3.9	3
Program Effectiveness		
▪ Overall effectiveness in meeting drug court goals	3.9	
▪ Effectiveness in ending participants/ substance abuse	3.6	
▪ Effectiveness in stopping participants' criminal activity	3.8	
Effectiveness in Meeting Specific Needs of Subpopulations		
▪ White/Non Hispanic	4.1	3
▪ Black or African American	4.1	3
▪ American Indian or Alaskan Native	4.0	8
▪ Asian	4.2	9
▪ Native Hawaiian or other Pacific Islander	4.0	9
▪ Hispanic or Latino	3.4	7
▪ Non-English Speaking	3.3	9
▪ Male	3.9	
▪ Female	4.1	
Agreement with Roles and Responsibilities	4.2	4
Referral and Intake Process		
▪ Effectiveness in identifying potentially eligible persons	4.1	2
▪ Effectiveness in screening out non appropriate persons	4.0	2
▪ Effectiveness in screening in appropriate persons	4.3	2
Degree Court Abides with its Eligibility Criteria.	4.7	4
Satisfaction with Referral and Intake Process.	4.2	
Supportiveness of Individual Team Members of Drug Court		
▪ Judge	4.6	
▪ Drug Court Coordinator	4.5	
▪ Drug Court Employees (PMT, CMII, Counselors)	4.5	
▪ Partnering Treatment Agencies	4.3	

Survey Item	Rating (1.0-5.0) (Adjusted Mean)	Number of Don't Know, Not Applicable, and No Responses
▪ State Probation Officers	4.0	
▪ County Probation Officers	3.9	
▪ CAAP	4.4	1
Team/Judicial Review Agreement		
▪ Drug court team maintains ongoing communication	4.2	1
▪ Freedom to make opinions known to other members	4.3	1
▪ Team members fulfill their roles and responsibilities	4.0	1
▪ Team operates by latest policy and procedures manual	4.0	4
▪ Frequency of court staffings is sufficient	4.2	1
▪ Drug testing protocol is effective	4.3	1
▪ Written progress reports submitted consistently	3.9	1
Consistency in Application of Incentives and Sanctions	4.2	1
Effectiveness of Communication/Coordination among Team Members	3.9	
Effectiveness of Periodic Team Meetings	3.4	5
Assessment of Effectiveness in Implementing Key Components		
▪ Component 1: Integrating drug and alcohol treatment with justice system case processing.	4.3	2
▪ Component 2: Using a nonadversarial approach to promote public safety while protecting due process rights.	4.1	2
▪ Component 3: Early identification and treatment.	3.8	2
▪ Component 4: Providing access to a continuum of alcohol, drug and other related treatment and rehabilitation services.	4.2	1
▪ Component 5: Drug testing.	4.3	1
▪ Component 6: Use of incentives and sanctions.	3.8	2
▪ Component 7: Judicial monitoring.	4.5	2
▪ Component 8: Program monitoring and evaluation.	3.8	1
▪ Component 9: Continuing interdisciplinary training.	3.6	3
▪ Component 10: Forging partnerships for local support.	3.7	2

Active Participant Survey (26 Participants)

Survey Item	Rating (1.0-5.0) (Adjusted Mean)	Number of Don't Know, Not Applicable and No Responses
<i>Degree Judge Supports Your Substance Abuse Treatment</i>	4.0	
<i>Degree Other Team Members Support Your Treatment</i>	3.1	1
<i>Effectiveness of Drug Testing in Supporting Recovery</i>	4.3	1

Survey Item	Rating (1.0-5.0) (Adjusted Mean)	Number of Don't Know, Not Applicable and No Responses
<i>Effectiveness of Court Hearings in Supporting Recovery</i>	4.1	2
<i>Effectiveness of Program in Meeting Recovery Needs</i>	2.8	2
<i>Overall Effectiveness of the Drug Court Program</i>	3.2	1

Appendix 4

Knox County Drug Court Consensus Improvement Recommendation Ratings

During interviews with the drug court team members, aggregate results of the online survey with team members and the semi-structured interviews with participants were presented. Team members were then asked to rate each recommendation offered in the online survey and the participant interviews. The purpose of these additional activities was to reach a consensus rating of each improvement recommendation. The highest rating possible for each recommendation was 5.0 (strong agreement with the recommendation). Fourteen members of the Knox County Drug Court team provided their ratings of each recommendation.

Consensus Ratings of Improvement Recommendations from Team Member Survey

Improvement Recommendation	Adjusted Mean Max = 5.0	No Opinion/ No Response
Recommendations to More Effectively Meet Specific Needs of Various Populations Groups		
▪ Having own residential facility for participants to live in	3.9	
▪ Increased team discussion of application of sanctions	4.2	
▪ Work with partnering agencies to find more positive sanctions	4.4	
▪ More consistent judicial decisions	3.8	1
▪ Identify opportunities to provide greater individualization in program to meet specific needs of various groups – women, single parents, etc.	4.0	
▪ Team building so that team comes together as one	4.4	1
Recommendations to Improve Graduation Rate		
▪ Having own residential facility for participants to live in	4.0	
▪ Team building with probation officers	4.2	1
▪ Additional training for probation officers regarding goals of drug court and how they can support treatment/recovery better	3.6	
▪ More consistency in application of sanctions and requirements	3.8	1
▪ Make drug court program more positive and less punitive	4.5	1
▪ Follow the model and keep participants moving up in phase	4.4	2
▪ Team sticking to their roles and more consistency in team decision making	4.5	1
▪ Increased attention to showing participants how to have fun without drugs	4.5	1
▪ Development of additional incentives. “Being out of jail” is not incentive enough.	4.4	
▪ Develop aftercare program and have them come back and socialize with active participants	4.2	
Recommendations to Improve Referral and Intake Process		
▪ Revise target group to include those with less serious crimes	3.6	2
▪ Provide information to potential participants when they are taken into custody instead of waiting until court dates and conversation with their attorney	3.9	
▪ Develop more DA buy-in with the Drug Court concept	4.7	1
Recommendations to Improve the Use of Incentives and Sanctions		

Improvement Recommendation	Adjusted Mean Max = 5.0	No Opinion/ No Response
▪ Be more consistent	4.3	1
▪ Develop more incentives	4.3	1
▪ Be more creative in use of sanctions	4.4	
▪ Take participants into custody at court, rather than letting them serve jail time at their convenience	3.7	
▪ Work with Drug Court Treatment team to work through possibilities	4.0	2
▪ Allow individual team members (partners) to implement a rewards program	4.0	1
Recommendations to Improve Communication and Coordination Among Team Members		
▪ Increase understanding and appreciation of members' roles and how they contribute to the well being of the participants	4.4	
▪ Increase fellowship opportunities	4.4	
▪ Drug Court team members attend meetings at probation office. Probation office now has a staff panel that reviews referrals to drug court, including probationers	4.2	
▪ Probation office staff attend treatment team meeting each week	4.2	1
▪ Drug Court staff attend more agency treatment/staff meetings when agencies are discussion drug court participants	4.0	1
▪ Immediate notification of issues when they arise	4.5	
▪ Conduct retreat where drug court team members can discuss and resolve issues	4.0	2
▪ Use email more often/consistently in the information sharing process	4.3	1
▪ Drug Court staff share ALL information regarding a participant's behavior and sanctions so that better decisions can be made	4.0	
Recommendations to Improve Ability to Solve Operational Issues		
▪ Improve communication among all team members	4.2	1
▪ Provide required training to all team members of the goals and philosophy of drug courts	4.3	1
▪ Conduct problem solving meeting immediately whenever a problem arises	4.1	1
▪ Have full, open discussion at team meetings rather than individual conversations away from other team members	4.5	
▪ Team members adhere to their roles and memorandum of understanding agreements	4.2	1
▪ Include all drug court team members in decision making process	4.4	1
▪ Conduct team review of roles and responsibilities and required credentials of all team members	4.3	
Overall Recommendations to Improve the Drug Court Program		
▪ Reduce intensity and requirements of the drug court program to make it more attractive to those charged with less serious offenses	3.4	3
▪ Ongoing training with all service providers as a team	3.8	
▪ Increase number of Drug Court staff	2.8	2
▪ Increase fellowship among team members	3.9	2

Improvement Recommendation	Adjusted Mean Max = 5.0	No Opinion/ No Response
▪ Increase communication among team members	4.3	1
▪ Provide ongoing training to all team members	4.4	1
▪ Provide team building activities/raining for team	4.2	1
▪ Obtain funding for Drug Court funded housing for participants others won't serve	4.2	
▪ Identify employers in the community who will hire drug court participants	4.4	
▪ Enhance mental health assessment and treatment services for participants who need such services	3.6	
▪ The drug court program is very intensive. Reframe the whole program in a way that enhances the sense of pride and accomplishment.	3.6	2
▪ Whenever sanctions are applied, frame them in terms of the team (all team members) care about their success in the program and help participants connect the sanction with their behavior	4.4	
▪ Increase communication among team members	4.2	
▪ Be consistent in the application of sanctions and incentives	4.3	
▪ As team members, don't take disagreements personally	4.4	
▪ Consider what impact consequences on one person may have on all participants	4.2	1
▪ Don't seek recommendations outside of treatment team	3.3	1
▪ Develop more incentives	4.3	1
▪ Consider opinions of all team members, not just "treatment" staff	4.3	
▪ Model "sober fun". Provide opportunities for participants to get together for fun activities.	4.4	
▪ Educate the public on the role and the value of the program	4.7	2
▪ Open a residential program	4.2	2
▪ Develop a work locate/job finder/skills development program	4.8	
▪ Mentor new residential/halfway homes	4.0	2
▪ Members know and abide by their roles on the team	4.3	2
▪ Recognize that it is more therapeutic to discharge persons not responding to the drug court program	3.9	
▪ Recognize that the team derives strength from its diversity. Develop ways to resolve conflict constructively	4.5	
▪ Refrain from discounting other team members' opinions	4.6	1

Consensus Ratings of Improvement Recommendations from Active Participant Survey

Improvement Recommendation	Adjusted Mean Max = 5.0	No Opinion/ No Response
How the Judge Could Better Meet Participants' Needs		
▪ Review the requirements of the program. Make it easier for a person	3.9	

Improvement Recommendation	Adjusted Mean Max = 5.0	No Opinion/ No Response
to maintain employment while in the program.		
▪ Meet with participants one-on-one	3.9	1
▪ Hold drug court workers to a higher standard of professional behavior	4.2	1
How the Drug Court Program Staff Could Better Meet Participants' Needs		
▪ Have a program with qualified people	4.3	3
▪ Consider the opinions of participants on how to improve the program	4.2	
▪ Focus on our recovery – not who we are talking with	3.8	
▪ Understand how difficult the program is and forgive us some infractions. (Be compassionate.)	3.8	2
▪ Waive some fees, especially drug testing fees	4.6	2
▪ Support our efforts for employment – like the job I had when I came into the program. Be less picky about the jobs we can get.	3.5	1
▪ Help us individually based on our situation and don't treat us all the same	4.0	1
▪ Provide more one-on-one interactions with participants	4.1	
How the Drug Court Program Could be Improved		
▪ More accountable and professional staff	3.8	1
▪ Provide more educational materials for participants – handouts, books, etc.	3.9	
▪ Revise program to allow more outside meetings rather than evening sessions at drug court treatment site	3.6	4
▪ Cancel/improve day program	3.7	2
▪ Provide more family interaction/treatment	4.3	2
▪ Allow one-on-one time with judge	3.2	
▪ Make program less intensive and less structured. Be more flexible about certain requirements.	2.2	1
▪ Eliminate cost of drug screens	3.1	
▪ Be more caring about people with jobs	3.7	1
▪ Be more flexible about the types of jobs participants can accept	3.6	1
▪ Be consistent in the application of incentives and sanctions. Have the same rules for everyone.	3.9	2
▪ Solicit and listen to our opinions about how to improve/enhance the program	4.2	1

Appendix 8

Composite Team Training Needs

Background

Periodic education and training ensures that the drug court's goals and objectives, as well as policies and procedures, are understood not only by the drug court leaders and senior managers, but also by those indirectly involved in the program. Education and training programs also help maintain a high level of professionalism, provide a forum for solidifying relationships among criminal justice and drug treatment personnel, and promote a spirit of commitment and collaboration. All drug court staff should be involved in education and training. Interdisciplinary education exposes criminal justice officials to treatment issues, and treatment staff to criminal justice issues. It also develops shared understandings of the values, goals, and operating procedures of both the treatment and the justice systems. Judges and court personnel typically need to learn about the nature of alcohol and drug problems, and the theories and practices supporting specific treatment approaches. Treatment providers typically need to become familiar with criminal justice accountability issues and court operations. All need to understand and comply with drug testing standards and procedures.

Drug court team members were asked to indicate from a list of training topics those topics which they or other members of the drug court team needed additional training.

Composite Team Training Needs

Training Topic	CD 1 (n=6)	DC 2 (n=13)	DC 3 (n=7)
Goals and philosophy of drug courts	0	6	4
Nature of AOD abuse, its treatment and terminology	4	4	4
Dynamics of abstinence and techniques for preventing relapse	4	5	6
Responses to relapse and to non-compliance with program requirements	3	6	5
Basic legal requirements of the drug court program and an overview of local CJS policies, procedures, and terminology	0	6	5
Drug testing standards and procedures	1	3	5
Sensitivity to racial, gender, ethnic, and sexual orientation as they affect operations of the drug court	0	6	3
Interrelationships of co-occurring conditions such as AOD abuse and mental illness	1	6	6
Federal, state, and local confidentiality requirements	0	4	4
Effective use of incentives and sanctions	3	7	6
Effective strategies for sustaining your drug court program	2	6	8
Utilization of performance data	1	6	3
Additional Training Needs: <ul style="list-style-type: none"> ▪ Grant writing ▪ Drug Testing ▪ Team building; the importance of communication, enabling. ▪ Copy of the policy/procedures manual. ▪ How the drug court was designed to operate. ▪ Roles, responsibilities and job requirements for drug court staff. ▪ More information on how to develop a more tailored way of accepting or rejecting applications. 			

Appendix 9

Composite MIS Data Element Analysis

Collection of Evaluation Data

Drug Courts are encouraged to design, implement, and maintain an automated data collection system to collect program implementation data, process information, and baseline data that can be used to chart the progress and impact of their program. The drug court's evaluation plan should detail data elements to be included in the automated data collection system and outline procedures to collect this information, including budgetary and personnel information. The following is a list of the types of information that drug court information systems should routinely collect in addition to the any other information related to their adopted performance measures. The management information systems from the three selected drug court programs were evaluated for their ability to collect the suggested information. Additionally, another data system developed by the 21st Judicial District's drug court program with ARRA funding was evaluation. This is not an assessment of if the drug court program actually collects all of this data, just if their management system is able to collect the data.

Composite Analysis of Selected Management Information Systems

	Greene	Knox	Sumner	21 st JD
Referrals and Screening				
Name, race, sex, and age of persons screened for program eligibility		Y	Y	Y
Case and criminal history information of persons screened for program eligibility		Y	Y	Y
Date of referral to the program		Y	Y	Y
Eligibility determination		Y	Y	Y
Date of refusal/rejection from the program if not admitted		N	Y	Y
Reasons for refusal/rejection from the program if not admitted		Y	Y	Y
Admissions				
Date of arrest.		Y	N	Y
Date of admission to the drug court program.		Y	Y	Y
Age.		Y	Y	Y
Sex.		Y	Y	Y
Race/ethnicity.		Y	Y	Y
Family status.		Y	Y	Y
Employment status.		Y	Y	Y
Educational level.		Y	Y	Y
Current charge(s).		Y	Y	Y
Criminal history.		Y	Y	Y
Drug use history.		Y	Y	Y
Alcohol and other drug treatment history.		N	Y	Y
Mental health treatment history.		N	Y	N
Medical needs (including detoxification).		N	Y	Y
Nature and severity of substance abuse problem.		Y	Y	Y

	Greene	Knox	Sumner	21 st JD
Services and Progress				
Treatment recommendations (from initial assessment and any follow-up assessments).		Y	Y	N
Treatment attendance and progress		Y	Y	Y
Attendance at drug court hearings		Y	Y	Y
Bench warrants issued for participants for nonattendance		N	Y	Y
Urinalysis dates and results		Y	Y	Y
Substances tested for		N	Y	Y
Substances for which found positive		N	Y	Y
Probation contacts		Y	Y	Y
AA/NA Meeting Requirements and Attendance		Y	Y	Y
Incentives on each participant in response to progress with program requirements		Y	Y	Y
Sanctions imposed on each participant in response to a positive drug test or other evidence of noncompliance with program requirements.		Y	Y	Y
Fees, fines, costs, and restitution paid by each participant.		Y	Y	Y
Community service hours completed by each participant.		Y	N	Y
Principal accomplishments of each participant while in the drug court program (e.g., advancement to new phase, attainment of GED or other educational objective, employment, family reunification, birth of drug-free baby).		Y	Y	Y
Phase Level Advancements		Y	Y	Y
Releases				
Release Date		Y	Y	Y
Release Status (graduated, terminated, withdrawn, etc.)		Y	Y	Y
Reasons for Release (non-compliance, lack of progress, new arrest, abscond, etc.)		Y	N	Y
Criminal justice sanctions imposed on participants who do not complete the program.		N	N	N
Re-Arrests				
Number of re-arrests during involvement in the drug court program and for a period of at least 1 year thereafter, and the types of arrests (e.g., drug possession, other nonviolent offense, violent offense), dispositions of those arrests, and days spent in jail for those arrests.		Y	Y	Y
Number of re-arrests for a period of at least 1 year thereafter, and the types of arrests (e.g., drug possession, other nonviolent offense, violent offense), dispositions of those arrests, and days spent in jail for		Y	Y	Y

	Greene	Knox	Sumner	21 st JD
those arrests				
Number of re-arrests for a period of at least 2 year thereafter, and the types of arrests (e.g., drug possession, other nonviolent offense, violent offense), dispositions of those arrests, and days spent in jail for those arrests.		Y	Y	Y
Other Follow-up				
Post program substance use, substance abuse treatment, achievement of social outcomes (attainment of GED or other educational objective, employment, family reunification, birth of drug-free baby), and use of medical services.		N	Y	N
Budget				
Costs of drug court operations, and the source(s) of funding for each operational component.		N	N	N

Entering Evaluation Data

As cited above, just because a MIS can collect key data, does not necessarily mean that drug courts are collecting key data. In addition to having data systems capable of collecting key information, drug courts must ensure processes are in place for staff to enter the information. Processes should outline who is to enter what data and in what timeframe. The processes outlined should be consistent with the functionality of the MIS. For example, if the MIS is a stand-alone program that is housed on only one computer in the office, the drug court should not require that treatment, probation, and the court all enter information into the MIS that they have no access to.

Reporting of Evaluation Data

Another key feature of any MIS is its ability to disseminate data. Data that is difficult to extract from an MIS not only leads to frustration, but underuse of important data needed for ongoing program monitoring and evaluation. The MIS should have preformatted data reports, and if necessary, allow for customization of data queries and reports that programs need for internal and external reporting. An export feature is also advantageous to allow for customized data extraction and manipulation.

If a MIS is well designed, data is entered consistently, and has reasonable reporting features, the above data elements will allow drug courts to produce the following key management reports:

- Tennessee Drug Court Annual Report
- Number of persons screened for program eligibility
- Number of persons found eligible for the program
- Current charges and criminal histories of persons found eligible
- Number of persons admitted to the program
- Number of eligible persons who were not admitted to the program, demographic characteristics, and reasons for non-admission, for comparison purposes.
- Number of participants currently active in the program, with categorization to reflect the number of persons in specific program phases, duration of time in program, and principal types of treatment being provided
- Number and characteristics of persons who successfully complete the program.

- Number and characteristics of persons who have been terminated from the program, reasons for termination, and length of time in the program before termination.
- Number of participants who fail to appear at drug court hearings, and number of bench warrants issued for participants by stage of participation in the program.
- Number of re-arrests during involvement in the drug court program and for a period of at least 1 year thereafter, and the types of arrests (e.g., drug possession, other nonviolent offense, violent offense).
- Fees, fines, costs, and restitution paid by each participant.
- Community service hours completed by each participant.
- Drug test histories of each participant while in the drug court program.
- Record of attendance and treatment progress for each participant.
- Record of program sanctions imposed on each participant in response to a positive drug test or other evidence of noncompliance with program requirements.
- Principal accomplishments of each participant while in the drug court program (e.g., advancement to new phase, attainment of GED or other educational objective, employment, family reunification, birth of drug-free baby).
- Cost-benefit analysis.

For further information, refer to the BJA publication *Drug Court Monitoring, Evaluation, and Management Information Systems*, available online at www.ncjrs.org/html/bja/monitor/welcome.html.

Appendix 11

TBI Groups of Arrests/Crimes

Arrest/Crime Grouping: The Tennessee Bureau groups arrests/crimes into the following groups:

Crimes against Persons

- Aggravated Assault
- Simple Assault
- Intimidation
- Stalking
- Homicide Offenses
- Murder and Non-Negligent Manslaughter
- Negligent Manslaughter
- Justifiable Homicide
- Kidnapping/Abduction
- Sex Offenses, Forcible
- Forcible Rape
- Forcible Sodomy
- Sexual Assault with on Object
- Forcible Fondling
- Sex Offenses, Non-Forcible
- Incest
- Statutory Rape

Crimes against Property

- Arson
- Bribery
- Burglary/Breaking and Entering
- Counterfeiting/Forgery
- Embezzlement
- Extortion/Blackmail
- Fraud Offenses
- False Pretenses/Swindle/Confidence Game
- Credit Card/Automatic Teller Machine Fraud
- Impersonation
- Welfare Fraud
- Wire Fraud
- Larceny/Theft Offenses
- Pocket-Picking
- Purse-Snatching
- Shoplifting
- Theft from a Building
- Theft from a Coin-Operated Machine or Device
- Theft from a Motor Vehicle
- Theft of Motor Vehicle Parts or Accessories
- All Other Larceny
- Motor Vehicle Theft
- Robbery

- Stolen Property Offenses
- Vandalism/Intention Destruction/Damage of Property

Drug Offenses

- Drug/Narcotics Offenses
- Drug/Narcotics Violations
- Drug Equipment Violations

Other Crimes against Society

- Gambling Offenses
- Betting/Wagering
- Operating/Promoting/Assisting Gambling
- Gambling Equipment Violations
- Sports Tampering
- Pornography/Obscene Material
- Prostitution
- Prostitution
- Assisting or Promoting Prostitution
- Weapon Law Violations

Dui Offenses

- Driving Under the Influence
- DUI using Commercial Vehicle
- Juvenile DWI
- Boating Under the Influence
- Vehicular Assault

Other Offenses

- Bad Checks
- Curfew/Loitering/Vagrancy Violations
- Disorderly Conduct
- Drunkenness, including Public Intoxication
- Family Offenses, Non-Violent
- Liquor Law Violations
- Peeping Tom
- Runaway
- Trespass of Real Property
- All Other Offenses Not Specifically Names

Technical Violations

- Violation of Probation
- Violation of Parole
- Failure to Appear

Appendix 12

Cost-Benefit Tool and Template Default Values for FY 2009-10

Potential Value of Sentence in Traditional Criminal Justice Process

The table below summarizes the potential value of sentencing through the traditional criminal justice system using data from the Tennessee Administrative Office of the Courts and the Tennessee Department of Corrections.

Administrative Office of the Courts: The Administrative Office of the Courts annually publishes data on felony sentencing practices in Tennessee. These data include the percent of felons, by class of felony and by type of felony, and their average sentences broken into three classifications: (incarceration only, probation only, and split sentences). However, persons sentenced to the Tennessee Department of Corrections are eligible for parole after serving 30 percent of their sentence. Parole sentences are not reduced – an offender must service the entire probation sentence.

The table below shows the average standard incarceration days for the various classes of felonies, reduced to 30 percent of the average sentence. These are the minimum number of days an offender would serve given the average standard sentence received in 2009-10. The numbers of probation days are the actual average days an offender would serve, based on the statewide average sentence for each class of felony.

Tennessee Department of Corrections: Tennessee's Department of Corrections published statewide average costs per day for prisons and jails. The average incarceration costs per day for felony offenses are the FY 2009-10 cost per prison day. For misdemeanor offenses and DUI offenses, the average incarceration costs per day are the statewide average cost per jail day in FY 2009-10.

Default Values for Misdemeanors and DUI Offenses: In misdemeanor and DUI cases, average sentence costs were established for jail placements and for probation placements. In Tennessee, there is a range of jail time to which a person can be sentenced for each class of misdemeanor offense and for each type of DUI. For example, an offender convicted of a Class C misdemeanor can be sentenced for up to 30 days in jail. Persons sentenced to jail must serve only 75% of that sentence in jail and the remainder of that sentence on probation. The "default" monetary value is the minimum cost of the sentence (minimum number of possible days in jail plus the remainder of the sentence on probation. The cost per day in jail and the cost of a day on probation are the FY 2009-10 statewide average costs.

Default Values for Statewide Average Sentences

Type of Offense	**Average Standard Incarceration Days	Incarceration Cost Per Day (from Above)	**Average Standard Probation Days	Probation Cost Per Day (from Above)	Total Cost Per Placement
Class C Felony	55	\$64.00	1449	\$3.00	\$7,867.00
Class D Felony	44	\$64.00	1092	\$3.00	\$6,092.00
Class E Felony	36	\$64.00	612	\$3.00	\$4,140.00
Class A Misdemeanor	273	\$56.00	0	\$3.00	\$15,288.00

Type of Offense	**Average Standard Incarceration Days	Incarceration Cost Per Day (from Above)	**Average Standard Probation Days	Probation Cost Per Day (from Above)	Total Cost Per Placement
Class B Misdemeanor	136	\$56.00	46	\$3.00	\$7,754.00
Class C Misdemeanor	22	\$56.00	8	\$3.00	\$1,256.00
DUI (First)	2	\$56.00	362	\$3.00	\$1,198.00
DUI (Second)	45	\$56.00	319	\$3.00	\$3,477.00
DUI (Third)	120	\$56.00	244	\$3.00	\$7,452.00

Default Values for Other Data in Annual Drug Court Report

Employment: The default wage-per-hour is the current federal minimum wage of \$7.25 per hours. The default time value for full-time employment is 32 hours per week. The default value for part-time employment is 20 hours per week.

Drug-Free Babies: The default value of the benefit of the birth of a drug-free baby is \$250,000. This is the average cost of caring for a substance-exposed newborn that is widely reported by reputable national organizations such as the March of Dimes and the National Perinatal Association.

Value of a High School Education/GED: The default value of a high school diploma or GED is \$1705 per year. This is the average amount a young, white drop-out would earn above minimum wage. This value comes from a unique data set containing GED test scored and Social Security Administration earnings data. The analysis indicated that earning a GED increases the earnings of young white dropouts by 10-19 percent. Using minimum wage, this calculates as an increased wage value of \$7.98 - \$8.63 per hours. The authors posited that the “real value” of a GED is \$1705 in annual earnings for all persons.

Community Service: The default value for an hour of community services is \$7.25 per hour, the current minimum wage.

Child Support Payments: The amount reported on the Annual Drug Court Report.

Fines and Court Costs: The amount court-ordered fines and court costs paid by participants, as reported on the Annual Drug Court Report.

Program Costs: The amount court-ordered program costs paid by participants, as reported on the Annual Drug Court Report.

Restitution: The amount court-ordered restitution paid by participants, as reported on the Annual Drug Court Report.

Appendix 13
Cost-Benefit Tool and Template

DRUG COURT COST BENEFIT TOOL TEMPLATE

Developed for use internally by Drug Courts
2011

Developed for use by OCJP through Performance Vistas, Inc.

DIRECTIONS

This cost-benefit tool was developed for INTERNAL USE by Drug Courts. The basis of this tool is the Tennessee Annual Drug Court Report.

Fields in yellow on the following tabs must be filled in to complete the tool.

Fields in pink on the following tabs may be updated with local or updated state data by individual drug court programs, as necessary.

The following tabs are included in this tool:

- 1 - Updateable Cost Justifications
- 2 - Budget and Population Movement
- 3 AVERAGE - Potential Costs Averted due to Placement in Drug Court using Average Sentencing Data
- 3 ACTUAL - Potential Costs Averted due to Placement in Drug Court Using Actual Sentencing Data
- 4 AVERAGE- Reduced Costs Averted due to Ineffectiveness Using Average Sentencing Data
- 4 ACTUAL - Reduced Costs Averted due to Ineffectiveness Using Actual Sentencing Data
- 5 - Reduced Costs Averted due to Use of Jail Using Actual Data
- 6 - Potential Added Benefit due to Goal 5 Outcomes
- 7 - Potential Added Benefits due to Goal 6 Coordination
- 8 - Cost-Benefit Recap
- 9 AVERAGE - Recidivism Using Average Sentencing Data
- 9 ACTUAL - Recidivism Using Actual Sentencing Data
- 10 - Cost-Benefit Recap Reduced by Recidivism Data

Note: Use either worksheet 3Average or 3Actual, but do not use both.

Note: Use either worksheet 4Average or 4Actual, but do not use both.

Note: Use either worksheet 9Average or 9 Actual, but do not use both.

Cost Justifications - 2009-2010

Cost Per Day Figures

Cost Per Day - Local County Jail*	\$56.00	*Statewide average for the current year provided. You can update these fields with the current local figures.
Cost Per Day - Prison (TDOC)*	\$64.00	*Statewide average for the current year provided. You can update these fields with the current local figures.
Cost Per Day - Community Supervision*	\$3.00	*Statewide average for the current year provided. You can update these fields with the current local figures.

Average Standard Cost Per Sentencing Placement Figures

Cost Per Placement figures are derived from taking the median cost of the average standard sentences for the offense type. Sentencing practices are taken from the AOC study of sentencing. Each average sentence is costed out per placement usign the cost per day figures above.

Type of Offense	**Average Standard Incarceration Days	Incarceration Cost Per Day (from Above)	**Average Standard Probation Days	Probation Cost Per Day (from Above)	Total Cost Per Placement	**Average Standard Incarceration days and Probation Days for each type of offense can be updated as necessary.
Class C Felony	55	\$64.00	1449	\$3.00	\$7,867.00	
Class D Felony	44	\$64.00	1092	\$3.00	\$6,092.00	
Class E Felony	36	\$64.00	612	\$3.00	\$4,140.00	
Class A Misdemeanor	273	\$56.00	0	\$3.00	\$15,288.00	
Class B Misdemeanor	136	\$56.00	46	\$3.00	\$7,754.00	
Class C Misdemeanor	22	\$56.00	8	\$3.00	\$1,256.00	
DUI (First)	2	\$56.00	362	\$3.00	\$1,198.00	
DUI (Second)	45	\$56.00	319	\$3.00	\$3,477.00	
DUI (Third)	120	\$56.00	244	\$3.00	\$7,452.00	

Budget and Population

Drug Court Budget

	Amount
Operating Budget for Current Year:	

Population Movement

	Number
Admitted/Enrolled	
Successfully Completed	
Terminated	
Administratively withdrawn	

Potential Costs Averted at Placement Using Average Sentencing Data

Goal 1: Reduce the use of jail and prison beds and other correctional services by non-violent chemically dependent offenders by diverting them into a rehabilitative program.

Enter the number of persons admitted to your drug court for the following offense types:

Type of Offense	# Admitted	Potential Cost Averted at Placement
Class C Felony - Enter the number of Class C felons admitted to drug court:		\$0.00
Class D Felony - Enter the number of Class D felons admitted to drug court:		\$0.00
Class E Felony - Enter the number of Class E felons admitted to drug court:		\$0.00
Class A Misdemeanor - Enter the number of Class A misdemeanants admitted to drug court:		\$0.00
Class B Misdemeanor - Enter the number of Class B misdemeanants admitted to drug court:		\$0.00
Class C Misdemeanor - Enter the number of Class C misdemeanants admitted to drug court:		\$0.00
DUI (1st) - Enter the number of persons admitted to drug court for DUI 1st:		\$0.00
DUI (2nd) - Enter the number of persons admitted to drug court for DUI 2nd:		\$0.00
DUI (3rd) - Enter the number of persons admitted to drug court for DUI 3rd:		\$0.00
Total Potential Cost Averted Due to Placement in Drug Court:	0	\$0.00

Potential Costs Averted at Placement Using Actual Sentencing Data

Goal 1: Reduce the use of jail and prison beds and other correctional services by non-violent chemically dependent offenders by diverting them into a rehabilitative program.

*Calculate the number of days of incarceration or probation supervision each person **ADMITTED** to your program this fiscal year would have served if they had not entered into the drug court program. Then insert the **TOTAL** number of days sentenced to incarceration and probation for all fiscal year admissions.*

Type of Placement	Total Days of Placement	Cost Per Day (from worksheet 1)	Potential Cost Averted at Placement
Incarceration by TDOC		\$64.00	\$0.00
Incarceration in Local Jail		\$56.00	\$0.00
Probation Supervision		\$3.00	\$0.00
Total Placement Days for Admissions	0	Total Potential Cost Averted at Placement Using Actual Data:	\$0.00

Reduced Averted Costs Due to Ineffectiveness Using Average Sentencing Data

Goal 1: Reduce the use of jail and prison beds and other correctional services by non-violent chemically dependent offenders by diverting them into a rehabilitative program.

Enter the number of persons **terminated** from your drug court for the following offense types:

Type of Offense	# Terminated	Potential Reduced Averted Costs
Class C Felony - Enter the number of Class C felons terminated from drug court:		\$0.00
Class D Felony - Enter the number of Class D felons terminated from drug court:		\$0.00
Class E Felony - Enter the number of Class E felons terminated from drug court:		\$0.00
Class A Misdemeanor - Enter the number of Class A misdemeanants terminated from drug court:		\$0.00
Class B Misdemeanor - Enter the number of Class B misdemeanants terminated from drug court:		\$0.00
Class C Misdemeanor - Enter the number of Class C misdemeanants terminated from drug court:		\$0.00
DUI (1st) - Enter the number of persons terminated from drug court for DUI 1st:		\$0.00
DUI (2nd) - Enter the number of persons terminated from drug court for DUI 2nd:		\$0.00
DUI (3rd) - Enter the number of persons terminated from drug court for DUI 3rd:		\$0.00
Total Potential Reduced Averted Costs Due to Terminations:	0	\$0.00

Enter the number of persons **administratively withdrawn** from your drug court for the following offense types:

Class C Felony - Enter the number of Class C felons administratively withdrawn from drug court:		\$0.00
Class D Felony - Enter the number of Class D felons administratively withdrawn from drug court:		\$0.00
Class E Felony - Enter the number of Class E felons administratively withdrawn from drug court:		\$0.00
Class A Misdemeanor - Enter the number of Class A misdemeanants administratively withdrawn:		\$0.00
Class B Misdemeanor - Enter the number of Class B misdemeanants administratively withdrawn:		\$0.00
Class C Misdemeanor - Enter the number of Class C misdemeanants administratively withdrawn:		\$0.00
DUI (1st) - Enter the number of persons administratively withdrawn for DUI 1st:		\$0.00
DUI (2nd) - Enter the number of persons administratively withdrawn for DUI 2nd:		\$0.00
DUI (3rd) - Enter the number of persons administratively withdrawn for DUI 3rd:		\$0.00
Total Potential Reduced Averted Costs Due to Administrative Withdrawals:	0	\$0.00

Reduced Averted Costs Due to Ineffectiveness Using Actual Sentencing Data

Goal 1: Reduce the use of jail and prison beds and other correctional services by non-violent chemically dependent offenders by diverting them into a rehabilitative program.

Actual Reduced Averted Costs due to Ineffectiveness (Terminations)

First calculate the number of days each person **TERMINATED** from your program was sentenced to incarceration and/or probation supervision. Then insert the **TOTAL** number of days sentenced to incarceration and probation for all terminations.

Type of Placement	Total Days of Placement	Cost Per Day (from worksheet 1)	Actual Reduced Averted Costs
Incarceration by TDOC		\$64.00	\$0.00
Incarceration in Local Jail		\$56.00	\$0.00
Probation Supervision		\$3.00	\$0.00
Total Placement Days for Term	0	Actual Reduced Averted Costs due to Term	\$0.00

Actual Reduced Averted Costs due to Ineffectiveness (Administrative Withdrawals)

First calculate the number of days each person **ADMINISTRATIVELY WITHDRAWN** from your program was sentenced to incarceration and/or probation supervision. Then insert the **TOTAL** number of days sentenced to incarceration and probation for all admin withdrawals.

Type of Placement	Total Days of Placement	Cost Per Day (from worksheet 1)	Actual Reduced Averted Costs
Incarceration by TDOC		\$64.00	\$0.00
Incarceration in Local Jail		\$56.00	\$0.00
Probation Supervision		\$3.00	\$0.00
Total Placement Days for Admin WD	0	Actual Reduced Averted Costs due to Admin WD	\$0.00

Reduced Averted Costs Due to Program's Use of Jail

Goal 1: Reduce the use of jail and prison beds and other correctional services by non-violent chemically dependent offenders by diverting them into a rehabilitative program.

Actual Reduced Averted Costs due to Program's Use of Jail

Enter the total number of jail days utilized by program participants as reported on your annual report:

Reason for Use of Jail	Days Incarcerated	Incarceration Cost Per Day (from worksheet 1)	Actual Reduced Averted Costs
Number of Days in Jail as a Result of a New Charge		\$56.00	\$0.00
Number of Days in Jail as a Result of a Sanctions		\$56.00	\$0.00
Number of Days in Jail as a Result of a Program Design		\$56.00	\$0.00
Total Incarceration Days	0	Actual Reduced Averted Costs due to Jail Use	\$0.00

Potential Added Benefits or Cost Aversions - Goal 5

Goal 5: Increase the personal, familial, and societal accountability of offenders

Enter the number of events that occurred or amount of payments made this year as reported on your annual report*:

Indicators	Number	Standard Dollar Value	Standard Time Value	Benefit or Cost Aversion
Potential Annual wages due to Enhanced Part-time Employment: Number of persons who SUCCESSFULLY COMPLETED* the drug court program who were employed part-time at release minus the number of those who were employed part-time at admission		\$7.25	20	\$0.00
Potential Annual wages due to Enhanced Full-time Employment: Number of persons who SUCCESSFULLY COMPLETED* the drug court program who were employed full-time at release minus the number of those who were employed full-time at admission		\$7.25	32	\$0.00
Drug-Free Babies born		\$250,000.00		\$0.00
High School Graduates or GEDs Earned		\$1,705.00		\$0.00
Community Service Hours Performed		\$7.25		\$0.00
Child Support Payments				\$0.00
Fines and court costs				\$0.00
Program costs				\$0.00
Restitution				\$0.00
Other Payments Made by Participants (Specify):				\$0.00
Other Payments Made by Participants (Specify):				\$0.00
Potential Added Benefits or Cost Aversions				\$0.00

Potential Added Benefits or Cost Aversions - Goal 6

Goal 6: Promote Effective Interaction and the Use of Resources Among Local Criminal Justice Agencies and Community Agencies

Enter the information below for items NOT included in your operating budget for which you get donated time/services:

	<i>Salary + Benefits</i>	<i>% Time spent on Drug Court</i>	<i>Monetary Amount</i>	<i>Benefit or Cost Aversion</i>
Judge				\$0.00
Prosecutor/State Attorney				\$0.00
Public Defender				\$0.00
Treatment Provider(s)				\$0.00
Probation Officer				\$0.00
Law Enforcement				\$0.00
Clerk				\$0.00
Bailiff				\$0.00
Other (specify):				\$0.00
Office Space				\$0.00
Transporation/bus tickets				\$0.00
Gifts/Graduation				\$0.00
Other donations. Specify your other donations here.....				\$0.00
Other donations. Specify your other donations here.....				\$0.00
Other donations. Specify your other donations here.....				\$0.00
Potential Added Benefits or Cost Aversions				\$0.00

TENNESSEE DRUG COURT COST-BENEFIT RECAP

Page		Costs	Benefits
2	Operating Budget for Current Year	\$0.00	
Goal 1: Reduce the use of jail and prison beds and other correctional services by non-violent chemically dependent offenders by diverting them into a rehabilitative program.			
3 Average	Potential Averted Costs at Placement Using Average Sentencing Data		\$0.00
3 Actual	Potential Averted Costs at Placement Using Actual Setencing Data		\$0.00
	Note: You should NOT have data on sheets 3 Average and 3 Actual. Choose one method by which to define the potential averted costs.		
4 Average	Reduced Potential Averted Costs Due to Terminations Using Average Sentencing Data	\$0.00	
4 Average	Reduced Potential Averted Costs Due to Administrative Withdrawals Using Average Sentencing Data	\$0.00	
4 Actual	Reduced Potential Averted Costs Due to Terminations Using Actual Data	\$0.00	
4 Actual	Reduced Potential Averted Costs Due to Administrative Withdrawals Using Actual Data	\$0.00	
5	Reduced Potential Averted Costs Due to Use of Jail	\$0.00	
	Note: You should NOT have data on sheets 4 Average and 4 Actual. Choose one method by which to reduce the averted costs.		
Goal 5: Increase personal, familial and societal accountability of offenders			
6	Potential Averted Costs due to Birth of Drug-Free Babies		\$0.00
6	Potential Benefit of Enhanced Employment (one year)		\$0.00
6	Potential Benefit of HS Graduation or GED		\$0.00
6	Actual Benefit of Child Support Payments		\$0.00
6	Actual Benefit of Community Service Performed		\$0.00
6	Actual Benefit of Court-ordered Fines and Court Costs Paid		\$0.00
6	Actual Benefit of Program Costs Paid		\$0.00
6	Actual Benefit of Restitution Paid		\$0.00
6	Actual Benefit- All Others		\$0.00
Goal 6: Promote Effective Interaction and the Use of Resources Among Local Criminal Justice Agencies and Community Agencies			
7	Value of Volunteer Team Membership Not Included in Operating Budget		\$0.00
7	Value of Other Donated Services Not Included in Operating Budget		\$0.00
	Total Costs and Benefits	\$0.00	\$0.00
	Cost-Benefit Ratio	#DIV/0!	

Recidivism Costs Using 1 Year Post Conviction Average Sentencing Data

Goal 3: Reduce crimes committed as a result of drug use and addiction

Goal 4: Promote public safety through these reductions

Recidivism Costs Using 1 Year Post Conviction Data

*Recidivism for the use of this tool is defined as a conviction within 1 year of successful release from the drug court program. Enter the total number of persons who were **convicted** of an offense within 1 year of release from your drug court for the following offense types:*

Type of Offense	# Recidivists	Potential Cost of Placement for Recidivism
Class C Felony - Enter the number of graduates reconvicted of a Class C felony within 1 year:		\$0.00
Class D Felony - Enter the number of graduates reconvicted of a Class D felony within 1 year:		\$0.00
Class E Felony - Enter the number of graduates reconvicted of a Class E felony within 1 year:		\$0.00
Class A Misdemeanor - Enter the number of graduates reconvicted of a Class A misdemeanor within 1 year:		\$0.00
Class B Misdemeanor - Enter the number of graduates reconvicted of a Class B misdemeanor within 1 year:		\$0.00
Class C Misdemeanor - Enter the number of graduates reconvicted of a Class C misdemeanor within 1 year:		\$0.00
DUI (1st) - Enter the number of graduates reconvicted of a DUI 1st within 1 year:		\$0.00
DUI (2nd) - Enter the number of graduates reconvicted of a DUI 2nd within 1 year:		\$0.00
DUI (3rd) - Enter the number of graduates reconvicted of a DUI 3rd within 1 year:		\$0.00
Total Potential Cost of Placement for Recidivism at 1 year:	0	\$0.00

Recidivism Costs Using 1 Year Post Conviction Actual Sentencing Data

Goal 3: Reduce crimes committed as a result of drug use and addiction

Goal 4: Promote public safety through these reductions

Recidivism Costs Using 1 Year Post Conviction Data

Recidivism for the use of this tool is defined as a conviction. First determine the number of days each recidivist was sentenced to incarceration and/or probation supervision. Then insert the TOTAL number of days sentenced to incarceration and probation for all recidivists.

Type of Supervision	Total Days of Placement	Cost Per Day (from worksheet 1)	Actual Cost of Placement for Recidivism
Incarceration by TDOC		\$64.00	\$0.00
Incarceration in Local Jail		\$56.00	\$0.00
Probation Supervision		\$3.00	\$0.00
Total Placement Days for Recidivism	0	Actual Recivisim Costs	\$0.00

TENNESSEE DRUG COURT

COST-BENEFIT RECAP WITH RECIDIVISM

Page		Costs	Benefits
2	Operating Budget for Current Year	\$0.00	
Goal 1: Reduce the use of jail and prison beds and other correctional services by non-violent chemically dependent offenders by diverting them into a rehabilitative program.			
3 Average	Potential Averted Costs at Placement Using Average Sentencing Data		\$0.00
3 Actual	Potential Averted Costs at Placement Using Actual Setencing Data		\$0.00
	Note: You should NOT have data on sheets 3 Average and 3 Actual. Choose one method by which to define the potential averted costs.		
4 Average	Reduced Potential Averted Costs Due to Terminations Using Average Sentencing Data	\$0.00	
4 Average	Reduced Potential Averted Costs Due to Administrative Withdrawals Using Average Sentencing Data	\$0.00	
4 Actual	Reduced Potential Averted Costs Due to Terminations Using Actual Data	\$0.00	
4 Actual	Reduced Potential Averted Costs Due to Administrative Withdrawals Using Actual Data	\$0.00	
5	Reduced Potentional Averted Costs Due to Use of Jail	\$0.00	
	Note: You should NOT have data on sheets 4 Average and 4 Actual. Choose one method by which to reduce the averted costs.		
Goal 5: Increase personal, familial and societal accountability of offenders			
6	Potential Averted Costs due to Birth of Drug-Free Babies		\$0.00
6	Potential Benefit of Enhanced Employment (one year)		\$0.00
6	Potential Benefit of HS Graduation or GED		\$0.00
6	Actual Benefit of Child Support Payments		\$0.00
6	Actual Benefit of Community Service Performed		\$0.00
6	Actual Benefit of Court-ordered Fines and Court Costs Paid		\$0.00
6	Actual Benefit of Program Costs Paid		\$0.00
6	Actual Benefit of Restitution Paid		\$0.00
6	Actual Benefit- All Others		\$0.00
Goal 6: Promote Effective Interaction and the Use of Resources Among Local Criminal Justice Agencies and Community Agencies			
7	Value of Volunteer Team Membership Not Included in Operating Budget		\$0.00
7	Value of Other Donated Services Not Included in Operating Budget		\$0.00
	Total Costs and Benefits	\$0.00	\$0.00
	Cost-Benefit Ratio	#DIV/0!	
Goal 3: Reduce crimes committed as a result of drug use and addiction			
Goal 4: Promote public safety through these reductions			
9 Average	Reduced Potentional Averted Costs Due to 1 Year Recidivism	\$0.00	
9 Actual	Reduced Actual Averted Costs Due to 1 Year Recidivism	\$0.00	
	Note: You should NOT have data in both lines 9 Average and 9 Actual. Choose one method by which to reduce the averted costs.		
	Total Costs and Benefits Including Recidivism Reduction	\$0.00	\$0.00
	Cost-Benefit Ratio Including Recidivism Reduction	#DIV/0!	

Appendix 14
Training Session PowerPoint Handouts

Tennessee Statewide Evaluation and Training Project

Performance Vistas, Inc.
Dick Grimm
Ashley Self
June 27, 2011

Goals

- Complete a process evaluation and outcome evaluation of three selected drug courts that will describe each program and the outcomes being achieved, as well as present a set of recommendations for improving each program.
- Develop a cost-benefit tool and template that can be used by any drug court in Tennessee for developing their own cost-benefit.
- Provide training on (1) the findings and improvement recommendations identified in the process and outcome evaluations and (2) the use of the cost-benefit tool and template.

Drug Court Evaluation

Program Evaluation

Complete a **process evaluation** and **outcome evaluation** of three selected drug courts that will describe each program and the outcomes being achieved, as well as present a set of recommendations for improving each program.

Process Evaluation Purposes

- Determine if goals and objectives were achieved.
- Identify perceived strengths and weaknesses as perceived by team members, participants and evaluators.
- Describe effectiveness of major components of the drug court.
- Examine degree of coordination and support from various agencies participating in the drug court.
- Identify improvement recommendations from team members and participants.

Purposes of Outcome Evaluation

- Examine key drug court outcomes related to criminal recidivism, substance abuse and other selected outcomes such as employment status.
- Compare outcomes for program participants and a similar group of untreated offenders.

Criteria Used in Selecting Three Drug Courts

- Representative of type, size and location of drug courts.
- At least five years of operation to allow pre- and post- criminal records to be analyzed.
- Achieved certification status to permit feedback of certification process.
- Automated MIS to ensure required data would be available.
- Ability of develop list of offenders for the comparison group.
- Volunteer for the project.

Selected Drug Courts

- Greene County Treatment Court
- Knox County Drug Court
- Sumner County Drug Court

Population Movement (FY 07-08)

Indicators	Greene County	Knox County	Sumner County
Funded Capacity	35	80	100
Admitted/Enrolled	40	52	25
Graduated	5	14	15
Terminated	18	18	10
Administratively Withdrawn	0	22	12
Year Implemented	2003	1999	2001

Greene County Treatment Court

- General Sessions Court
- County population = 66,000
 - 96% white
 - 19% in poverty
- Treatment Program
 - 28-day residential treatment in Phase I
 - Living In Balance
 - Treatment provided by 2 counselors of CCS
- Drug Court Staff
 - Coordinator who is also probation officer and case manager for participants and another county probation caseload (CCS)
- MIS – Protrack system (CCS)

Knox County Drug Court

- Criminal Court
- County population = 424,000
 - 87% white
 - 15% in poverty
- Treatment Program
 - Residential treatment provided as needed
 - Matrix Model
 - Treatment provided by drug court staff and by residential treatment providers
- Drug Court Staff
 - Full-time Coordinator plus other case managers and counselors/therapists
- MIS – Access-based MIS

Sumner County Drug Court

- General Sessions and Criminal Court
- County population = 152,000
 - 90% white
 - 10% in poverty
- Treatment Program
 - 28-day residential treatment in Phase I
 - Moral Reconation Therapy and 12-Step adjuncts
 - Treatment provided by drug court staff
- Drug Court Staff
 - Director is also probation officer and case manager for participants in Criminal Court section.
 - Drug court support and drug tester
 - One additional probation officer
 - Drug educator

Caveat

For these and other reasons it is not appropriate to rate drug courts against each other. The best one should do is to describe each drug court and to identify the outcomes achieved by each of them. Individual drug court teams can be informed by the results of their process and outcome analyses and take actions that are appropriate for themselves.

Process Evaluation

Process Evaluation Purposes

- Determine if goals and objectives were achieved.
- Identify perceived strengths and weaknesses as perceived by team members, participants and evaluators.
- Describe effectiveness of major components of the drug court.
- Examine degree of coordination and support from various agencies participating in the drug court.
- Identify improvement recommendations from team members and participants.

Process Evaluation Activities

- Online survey and follow-up interview with team members
- Semi-structured interviews with participants
- Examination of program databases, forms, policies and procedures, and other written materials
- Observation of drug court and treatment sessions
- Review of minimum dataset variables
- Review of drug court implementation issues

Process Evaluation Findings

Satisfaction with Major Components of Drug Court Program

Team Members

Satisfaction with Components of Drug Court Program

	DC 3 (n = 9)	DC 2 (n = 14)	DC 1 (n = 6)
Mission	4.7	4.3	4.3
Goals and objectives	4.7	4.5	4.4
Decision-making processes	4.3	3.5	4.0
Roles and responsibilities of team members	4.1	3.4	4.0
Criteria for target population	4.2	4.1	3.8
Program model (post-adjudication)	4.4	4.8	4.0
Judicial supervision	4.6	4.1	4.3
Screening and referral process	4.2	4.2	4.0

Satisfaction with Components of Drug Court Program

	DC 3	DC 2	DC 1
Plan for acquiring needed resources and services	4.4	3.8	3.2
Treatment approach and treatment interventions	4.7	3.3	4.4
Drug testing frequency and protocol	4.8	4.3	4.2
Case management and monitoring responsibilities	4.6	4.2	4.2
Incentives and sanctions criteria	4.1	3.2	3.8
Graduation and termination criteria	4.4	4.0	4.2
Program evaluation and monitoring plan	4.6	3.9	3.8
Sustainability plan	3.9	3.9	3.7

Process Evaluation Findings

Effectiveness of Drug Court Program

Team Members

Program Effectiveness

	DC 3	DC 2	DC 1
Overall effectiveness in meeting drug court goals	4.3	3.9	4.5
Effectiveness in ending participants' substance abuse	4.3	3.6	3.8
Effectiveness in stopping participants' criminal activity	4.2	3.8	4.3

Effectiveness of Referral and Intake Process

	DC 3	DC 2	DC 1
Effectiveness in identifying potentially eligible persons	4.1	4.1	4.3
Effectiveness in screening out non appropriate persons	4.3	4.0	4.2
Effectiveness in screening in appropriate persons	4.2	4.3	4.2
Degree Court Abides with its Eligibility Criteria.	4.5	4.7	3.8
Satisfaction with Referral and Intake Process.	4.2	4.2	4.3

Process Evaluation Findings

Coordination and Communication Among Team Members

Team Members

Team/Judicial Review Interaction

	DC 3	DC 2	DC 1
Drug court team maintains ongoing communication	4.7	4.2	4.7
Freedom to make opinions known to other members	4.7	4.3	4.5
Team members fulfill their roles and responsibilities	4.5	4.0	4.7
Team operates by latest policy and procedures manual	4.8	4.0	3.8
Frequency of court staffings is sufficient	4.9	4.2	4.2
Drug testing protocol is effective	4.8	4.3	4.2
Written progress reports submitted consistently	4.7	3.9	4.2

Team/Judicial Review Interaction

	DC 3	DC 2	DC 1
Consistency in Application of Incentives and Sanctions	4.5	4.2	4.0
Effectiveness of Communication/Coordination among Team Members	4.5	3.9	4.5
Effectiveness of Periodic Team Meetings	4.5	3.4	4.5

Process Evaluation Findings

Interdisciplinary Team Training Needs

Team Members

Training Needs Assessment

Training Topic	DC 1 (n=7)	DC 2 (n=14)	DC 3 (n=8)
Goals and philosophy of drug courts	0	6	4
Nature of AOD abuse, its treatment and terminology	4	4	4
Dynamics of abstinence and techniques for preventing relapse	4	5	6
Responses to relapse and to non-compliance with program requirements	3	6	5
Basic legal requirements of the drug court program and an overview of local CJS policies, procedures, and terminology	0	6	5
Drug testing standards and procedures	1	3	5

Training Needs Assessment

Training Topic	DC 1 (n=7)	DC 2 (n=14)	DC 3 (n=8)
Sensitivity to racial, gender, ethnic, and sexual orientation as they affect operations of the drug court	0	6	3
Interrelationships of co-occurring conditions such as AOD abuse and mental illness	1	6	6
Federal, state, and local confidentiality requirements	0	4	4
Effective use of incentives and sanctions	3	7	6
Effective strategies for sustaining your drug court program	2	6	8
Utilization of performance data	1	6	3

Process Evaluation Findings

Implementation of 10 Key Components

Team Members

Training Needs Assessment

Other Needed Training Topics

- Grant writing
- Drug Testing
- Team building; the importance of communication, enabling.
- Copy of the policy/procedures manual.
- How the drug court was designed to operate.
- Roles, responsibilities and job requirements for drug court staff.
- More information on how to develop a more tailored way of accepting or rejecting applications.

Effectiveness in Implementing Key Components

	DC 3	DC 2	DC 1
Component 1: Integrating drug and alcohol treatment with justice system case processing.	4.8	4.3	4.6
Component 2: Using a nonadversarial approach to promote public safety while protecting due process rights.	4.4	4.1	4.2
Component 3: Early identification and treatment.	4.3	3.8	4.2
Component 4: Providing access to a continuum of alcohol, drug and other related treatment and rehabilitation services.	4.3	4.2	4.6
Component 5: Drug testing.	4.7	4.3	4.6

Effectiveness in Implementing Key Components

	DC 3	DC 2	DC 1
Component 6: Use of incentives and sanctions.	4.4	3.8	4.6
Component 7: Judicial monitoring.	4.7	4.5	4.2
Component 8: Program monitoring and evaluation.	4.3	3.8	4.2
Component 9: Continuing interdisciplinary training.	3.9	3.6	4.6
Component 10: Forging partnerships for local support.	4.3	3.7	3.4

Process Evaluation Findings

Effectiveness of Drug Court Program

Participants

Participant Survey

	DC 3	DC 2	DC 1
Degree Judge Supports Your Substance Abuse Treatment	4.4	4.0	4.4
Degree Other Team Members Support Your Treatment	4.1	3.1	3.4
Effectiveness of Drug Testing in Supporting Recovery	4.8	4.3	4.6
Effectiveness of Court Hearings in Supporting Recovery	4.3	4.1	4.0
Effectiveness of Program in Meeting Recovery Needs	4.3	2.8	4.0
Overall Effectiveness of the Drug Court Program	4.3	3.2	4.3

Life Improvements

- Reduction in jail time
- Sobriety -- becoming drug-free
- Enhanced personal gains
 - Improved relationships
 - Increased dependability
 - Improved problem-solving skills
 - Improved coping skills
 - Improved anger management skills
- Improved employment and education

Process Evaluation Finding

The results of the process evaluation of the three drug courts reflect that each court is in substantial compliance with the 10 key components of effective adult drug courts. By and large, both drug court team members and current participants perceive their individual drug court to be effective in reducing both criminal behavior and substance use.

Consensus Improvement Recommendations (DC 1)

- 4.7: Additional long-term treatment options.
- 4.6: Additional counseling.
- 4.6: To not let people in just because you feel sorry for them.
- 4.6: More staff with a coordinator to help with drug court requirements.
- 4.4: Greater support and cooperation with the support system of AA/NA.
- 4.4: More partnerships with private business for "incentives".
- 4.4: Develop a brochure for distribution to prospective participants.
- 4.4: Encourage more community support.
- 4.4: Develop an alumni group.

Consensus Improvement Recommendations (DC 2)

- 4.8: Develop a work locator/job finder/skills development program.
- 4.7: Educate the public on the role and the value of the program.
- 4.7: Develop more DA buy-in with the drug court concept.
- 4.6: Refrain from discounting other team members' opinions.
- 4.6: Waive some fees, especially drug testing fees.
- 4.5: Make the drug court program more positive and less punitive.
- 4.5: Team sticking to their roles and more consistency in team decision making.
- 4.5: Increased attention to showing participants how to have fun without drugs.
- 4.5: Recognize that the team derives strength from its diversity. Develop ways to resolve conflict constructively.

Consensus Improvement Recommendations (DC 2)

- 4.4: Work with partnering agencies to find more positive sanctions.
- 4.4: Team building so that the team comes together as one.
- 4.4: Follow the model and keep participants moving up in phase.
- 4.4: Development of additional incentives. "Being out of jail" is not incentive enough.
- 4.4: Be more creative in the use of sanctions.
- 4.4: Increase understanding and appreciation of members' roles and how they contribute to the well being of the participants.
- 4.4: Increase fellowship opportunities.
- 4.4: Include all drug court team members in decision making process.
- 4.4: Provide ongoing training to all team members.

Consensus Improvement Recommendations (DC 2)

- 4.4: Identify employers in the community who will hire drug court participants.
- 4.4: Whenever sanctions are applied, frame them in terms of the team (all team members) caring about their success in the program, and help participants connect the sanction with their behavior.
- 4.4: As team members, don't take disagreements personally.
- 4.4: Model "sober fun". Provide opportunities for participants to get together for fun activities.

Consensus Improvement Recommendations (DC 3)

- 5.0: Local government to contribute to overall drug court budget, instead of leaving it up solely to the current set of fees and payments.
- 4.9: Funds to replace the 12-year-old server.
- 4.9: Group events that promote confidence, trust and self-esteem.
- 4.8: Be able to contract with local businesses to work with clients with criminal records.
- 4.8: Funding for additional staff.
- 4.8: Increase community support, especially relative to jobs for participants.
- 4.6: More housing for female participants.

Consensus Improvement Recommendations (DC 3)

- 4.6: Public transportation.
- 4.6: Additional resources.
- 4.6: Additional resources to increase case managers.
- 4.6: Encourage clients to use the tools they are given for their continued recovery.
- 4.6: We need more incentives, not even ones that mean much cost to the program, but if we have a menu of 5-10 sanctions at our disposal, we should work to find just as many incentives, and USE them.

Outcome Evaluation

Purposes of Outcome Evaluation

- Examine key drug court outcomes related to criminal recidivism, substance abuse and other selected outcomes such as employment status.
- Compare outcomes for program participants and a similar group of untreated offenders.

Two Primary Questions

- Are participant outcomes better than outcomes achieved by comparison group members?
- Are outcomes for graduates better than outcomes for non-graduates?

Measure of Recidivism

- Participants vs. Comparison Group
 - Arrests one and two years prior to eligibility decision regarding entry into drug court
 - Arrests one and two years after decision regarding entry into drug court
- Graduates vs. Non-Graduates
 - Arrests one and two years prior to entry into drug court
 - Arrests while in drug court
 - Arrests one and two years after being releases from drug court
- Criminal history provided by TBI

Participant Group Cohort

- Drug court participants who were released in FY 2007-08
- Start Date:
 - Date participants entered the drug court program
- Release Date
 - Date participants were released/discharged from the drug court program

Comparison Group Cohort

- Contemporaneous comparison group
- Determined to be eligible for drug court but for some reason did not enter
- Start Date:
 - Date comparison group members continued with traditional court processing

Outcome Evaluation Activities

- Examination of:
 - Program databases
 - TBI criminal history files
 - Jail records
 - Clerk of Court files
 - JIMS (Knox County)
 - Participant record files

Types of Data Collected/Analyzed

- Demographic Data
 - Age
 - Gender
 - Race/Ethnicity
 - Marital Status
 - Education Level
 - Employment Status
- Criminal History
 - Pre- and Post arrest data

Types of Data Collected/Analyzed

- Program Outcome Data
 - Date and types of arrests one and two years prior to START date; and one and two years after START date and Release date from program
 - Date and type of arrest immediately prior to START date and Admission date
 - Drug test results
 - Type of arrest while in program
 - Type of discharge

Statistical Analysis

- Microsoft Excel and Microsoft Access
 - Frequency values
- Statistical Package for the Social Services (SPSS)
 - Correlation analysis (A correlation exists when it is determined that one variable can predict another)
 - Odds ratio analysis (the odds, not probability, that something was likely to occur)
 - Bivariate regression analysis (to determine if two variables are correlated)
 - Non-parametric statistics to correct for small values ($n < 30$)
 - Significance ($p \leq .05$ (95% certainty there is a true difference or correlation and that it did not happen by chance))

Key Outcome Findings

The outcome evaluations provide evidence the three selected drug courts were relatively successful in reducing subsequent criminality and substance use relative to a comparison group of offenders who entered the traditional criminal/judicial process. While not universally applicable to each court, the findings of the outcome evaluations are consistent with findings of other drug court evaluations.

Key Outcome Findings

Comparison of Drug Court Participants vs. Comparison Group Members

- **Participation in the Program:** Participants were more likely to have a longer time until first arrest compared to the comparison group and were even less likely to have an arrest for a drug charge, or any substance abuse charge in the two year follow-up period compared to the comparison group.

Key Outcome Findings

Comparison of Graduates vs. Non-Graduates

- **Graduation Rates:** Graduation rates are comparable to completion rates cited in other studies. For example, the Governmental Accountability Office published a report in 2005 reviewing 27 evaluations of 39 adult drug courts and found completion rates between 27% and 66%.
- **Reduction of Drug Use:** As the participants progressed through the program, the number of drug screens that are positive or unexcused decreased over time.
- **Age:** The likelihood of graduation increased with age at admission.
- **Length of Stay:** Increased length of stay in the drug court program is highly correlated with graduation.
- **Services:** Participants who received more program services were more likely to graduate from the drug court program.

Key Outcome Findings

Comparison of Graduates vs. Non-Graduates

- **Treatment Engagement:** Participants who had therapeutic services initiated sooner after admission and received those services longer during their participation in the program were more likely to graduate.
- **Education Level:** Education level was significantly related to both program graduation and lack of post-program recidivism.
- **Graduation:** Participants who failed to graduate from drug court were more likely to be arrested after release than were graduates from the program.

Statewide Implications

- **Implication #1:** Key Component 6: Program Monitoring and Evaluation: Data System and Data Capability
- **Implication #2:** Key Component 9: Interdisciplinary Team Training:
- **Implication #3:** Infrastructure Funding Strategy:
- **Implication #4:** Role and Placement of Drug Court Coordinators

Implication #1: Data System and Data Capability

Recommendations

- **Recommendation 1.1:** OCJP should continue to publicize the availability of the data system developed by the 21st Judicial District and facilitate the continued maintenance and enhancement of the system.
- **Recommendation 1.2:** OCJP should include in its priority funding plan monies to enhance the data capability of each drug court, including the adoption of the MIS developed in the 21st Judicial District, as well as data entry capability for each drug court.

Implication #1: Data System and Data Capability

Recommendations

- **Recommendation 1.3:** OCJP should continue to work with the Tennessee Bureau of Investigation (TBI) to assure access to information regarding arrests and convictions. TBI is the State Statistical Center and is the appropriate source of criminal justice information. Enhancements should include the availability of conviction and sentencing data, as contemplated in the annual report performance measures, as well as a web-based user interface for the query system that is already being developed. This would enable individual drug courts to get criminal history information on referrals and participants at various points in the case process.
- **Recommendation 1.4:** Each drug court should assess the capability of its MIS/data system against the recommended requirements and data elements found in the "10 Key Components" document and the guidance provided in Appendix C of annual BJA grant guidance. This assessment should include the ease of data entry by whom it can be entered, and the capability of the MIS to create reports and data exports for ongoing program monitoring and evaluation purposes. If the drug court's current management information system is seriously deficient, the drug court should consider adopting the system developed in the 21st Judicial District (or some other comprehensive, drug court-specific data system).

Implication #1: Data System and Data Capability

Recommendations

- **Recommendation 1.5:** Each drug court should also develop procedures to ensure that all suggested data are entered into its MIS to the extent of the capabilities of the MIS.
- **Recommendation 1.6:** Drug courts should include the state ID number (SID), and arrests and referral charges and sentencing information in their MIS. Drug courts should also include termination data (dates and specific reasons and actual sentence imposed) in their MIS.

Implication #2: Interdisciplinary Team Training

Recommendations

- **Recommendation 2.1:** OCJP should continue to work with TADCP to ensure "just-in-time" (readily available and accessible) training opportunities for new drug court team members. Such training should include the topics listed in the 10 Key Components document.
- **Recommendation 2.2:** OCJP should evaluate the capability of the system being developed by the University of Tennessee to determine its feasibility for expansion/enhancement to better meet the needs of Tennessee's drug courts.

Implication #2: Interdisciplinary Team Training

Recommendations

- **Recommendation 2.3:** OCJP, in conjunction with TADCP, should develop a drug court treatment academy with the specific mission of enhancing the adoption of evidence-based treatment practices, including staff qualifications and skills. The training academy should also focus on fidelity measures associated with each of the evidence-based treatment curricula.

Implication #2: Interdisciplinary Team Training

Recommendations:

- **Recommendation 2.4:** OCJP should develop a strategy to implement a mentor court system. Mentor courts should be exemplars of one or more of the 10 Key Components. A possible element of such a mentor court process might relate to the evidence-based training academy mentioned above. Another would be the need for immediate technical assistance of a single component of drug courts such as drug testing, management information systems, and the effective use of incentives and sanctions. As part of the mentor court system, OCJP could inventory the strengths of individual drug courts which might be helpful to other drug courts.

Implication #3: Infrastructure Funding Strategy

Recommendations

- **Recommendation 3.1:** Working with the Drug Court Advisory Committee, OCJP should develop a funding/support strategy that assists individual drug courts maintain/enhance their basic infrastructure, to include consideration of the following:
 - A full-time drug court coordinator for each drug court with a standard job description.
 - Support to acquire/maintain a state-approved MIS system that meets the specifications of the 10 Key Components document as well as being capable of quickly producing the data needed for the annual performance report.
 - Drug testing supplies. Drug testing is an instrumental element of all drug courts. Many drug courts fashion their drug testing protocol, not on what is required, but on what they can afford.

Implication #4: Role and Placement of Drug Court Coordinators

Recommendations:

- **Recommendation 4.1:** Working with the Drug Court Advisory Committee, OCJP should review the placement options for the drug court coordinator position to determine if such positions should be employed by a treatment provider.
 - **Recommendation 4.2:** Working with the Drug Court Advisory Committee, OCJP should review the appropriateness of a treatment provider to maintain/house/own the drug court's management information system.
- These two recommendations should be reviewed at the same time funding strategies are developed to assist individual courts maintain and/or enhance their basic infrastructure.**

Cost-Benefit Tool and Template

Cost-Benefit Tool and Template

Develop a
cost-benefit tool and template
that can be used by any drug court in
Tennessee for developing their own cost-
benefit.

Cost-Benefit Tool and Template

Original Specifications

- Tool is to be a simple, computer and/or paper-based tool that can be used on any state approved computer system.
- Tool is to include instructions and have the ability to calculate.

Cost-Benefit Tool and Template Subcommittee

To assist in this task, a subcommittee was appointed, comprised of five members:

- Judge E. Shayne Sexton
- Deborah Gibson, Ph.D.
- Rebekah Provost-Emmons
- Ron Hanaver
- Gayle Moyer Harris.

These members represent the Advisory Committee, the Tennessee Association of Drug Court Professionals, the Judge's Conference, and individual drug courts.

Cost-Benefit Tool and Template Subcommittee

The Template Should:

- Be based on data reported in the Annual Report.
- Be a tool for improving individual drug court, not adding to the body of science and research on C-B-A methodologies.
- Be voluntary at the local level, not a requirement that every drug court must use.

Cost-Benefit Tool and Template Subcommittee

The Template Should:

- Be a tool that contains "default" values that are statewide averages or well-established values.
- Be a flexible tool that allows drug courts to change from default values to values that are more precise for their local communities.

Cost-Benefit Tool and Template Subcommittee

The Template Should:

- Provide the capability for individual drug courts to report other benefits not included in the Annual Report.
- Be used by individual drug courts for their own analysis and use. It should not be used to compare one drug court with another.

Cost-Benefit Tool and Template Subcommittee

The Template Should:

- Require little additional data collection, but should not lock out more precise local information.

• Additional required information:

- The drug court's annual operating budget.
- Classes of offenses committed by their participants.

Cost-Benefit Tool and Template

Design Specifications

- Use of the annual operating budget as the cost base.
- Use of annual population movement as the base for potential cost savings.
- Minimum costs for felony sentences as a default value.
- Minimum costs for a misdemeanor and/or DUI offense as a default value.

Cost-Benefit Tool and Template

Other Considerations

- Valuing a team member's time.
- Value of residential treatment services not a part of the operating budget.
- One-year benefits.
- One-year recidivism data.