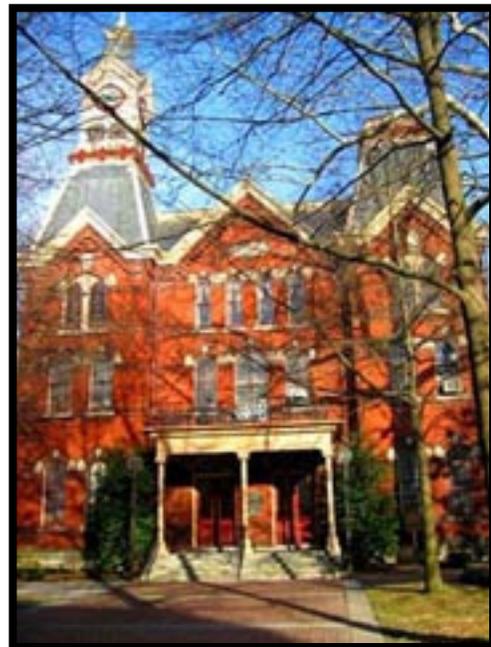


# Wicomico County Adult Drug Treatment Court (Circuit Court) Process Evaluation



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**Wicomico County  
Adult Drug Treatment Court  
(Circuit Court)  
*Process Evaluation***

*Submitted By*

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**April 2008**



*Informing policy, improving programs*



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## EXECUTIVE SUMMARY

**D**rug treatment courts are one of the fastest growing programs designed to reduce drug abuse and criminality in nonviolent offenders in the United States. The first drug court was implemented in Florida in 1989. There were over 1,700 drug courts as of April 2007, with drug courts operating or planned in all 50 states (including Native American Tribal Courts), the District of Columbia, Northern Mariana Islands, Puerto Rico, and Guam (BJA 2007).

Drug courts use the coercive authority of the criminal justice system to offer treatment to nonviolent addicts in lieu of incarceration. This model of linking the resources of the criminal justice system and substance treatment programs has proven to be effective for increasing treatment participation and for decreasing criminal recidivism.

The court administrator in Wicomico County, Wendy Riley, at the urging of the Honorable Judge Donald Davis, was instrumental in starting the Wicomico County Adult Drug Treatment Court (WCADTC) program. Planning for the program began in May 2004, with funding from the Maryland Office of Problem-Solving Courts. The program accepted its first participant in September 2005, and the current coordinator, Cherie Meien-schein, took over for Ms. Riley in November 2005. Judge Beckstead voluntarily accepted the role as drug court judge and continues to serve as the drug court's judge today.

The WCADTC enrolled 54 participants from September 2005 through October 2007. During that period, a total of 4 participants graduated and 19 were released unsuccessfully from the program. The program had a goal of 50 active participants by the end of the fiscal year 2007 and continues to strive for that number. At the end of October 2007 the program had 31 active participants. These participants work with counselors from Wicomico

County Health Department Addictions Program in structured group and individual therapy.

Information was acquired for this process evaluation from several sources, including observations of court reviews and team meetings during site visits, key informant interviews, and a focus group comprised of program participants. The methods used to gather this information from each source are described in detail in the main report.

According to its *Policy and Procedures Manual*, WCADTC's program goals are to:

- Reduce the number of repeat drug crimes committed by addicted offenders in Wicomico County.
- Increase the completion percentage of those who are court ordered into substance abuse treatment.
- Provide effective court supervision.
- Return repeat offenders to the community as productive law-abiding citizens.
- Increase the number of those served to 50 participants by the end of fiscal year 2007.

### Process Results

Using the 10 Key Components of Drug Courts (as described by the National Association of Drug Court Professionals, 1997) as a framework, NPC examined the practices of the WCADTC program.

The WCADTC fulfills many of the 10 key components through its current policies and structure. It integrates alcohol and other drug treatment services with justice system case processing and has formed an exemplary partnership with local law enforcement. The program uses frequent alcohol/drug testing to monitor abstinence, has invested in training for drug court team members, has had a con-

tinuously sitting judge since its inception, and has worked to develop numerous partnerships with public and private community agencies and organizations to meet the needs of program participants.

There are several areas in which the WCADTC should and can make program improvements. The program should consider accepting pre-plea participants to minimize time between arrest and program services rendered; make certain that all members of the drug court team have clearly defined roles and that turnover is minimized; identify more opportunities to offer incentives to participants and to encourage their continued involvement in the program; adopt a mandatory aftercare program that will aid participants in their transition back into the community.

A summary of suggestions and recommendations that emerge from this evaluation include the following:

#### **SUMMARY OF COMMUNITY-LEVEL RECOMMENDATIONS**

WCADTC has an impressive list of community supporters. The WCADTC should continue to maintain and develop community resources as they relate to the most common participant needs. The team also needs to examine the underlying causes for the overrepresentation of African Americans in the program.

#### **SUMMARY OF AGENCY-LEVEL RECOMMENDATIONS**

The WCADTC should work to minimize parole/probation caseloads in order to achieve and maintain the structured nature of this program. They should also look into the reasons behind turnover in the public defender's office in an effort to increase cohesiveness and key stakeholder buy-in. The program needs to ensure that all drug court services are culturally appropriate, especially given the current racial/ethnic composition of WCADTC's participant population. The team should implement a mandatory aftercare program that offers support to the participant as s/he transitions back into the community.

#### **SUMMARY OF PROGRAM-LEVEL RECOMMENDATIONS**

The program should consider accepting pre-plea individuals to reduce the time between arrest and services received following entry and to increase participant population to intended capacity. A history of behavioral problems should not necessarily disqualify a person from participation in the program, but should be seen as an opportunity to change those behaviors and, ultimately, benefit the community. Team members should identify more opportunities to acknowledge progress and offer incentives, while relying less on the imposition of sanctions.

## BACKGROUND

In the last 18 years, one of the most dramatic developments in the movement to reduce substance abuse among the United States criminal justice population has been the spread of drug courts across the country. The first drug court was implemented in Florida in 1989. As of April 2007, there were at least 1,700 juvenile and adult drug courts, with drug courts operating or planned in all 50 states (including Native American Tribal Courts), the District of Columbia, Northern Mariana Islands, Puerto Rico, and Guam (BJA, 2007).

Drug courts are designed to guide offenders identified as drug-addicted into treatment that will reduce drug dependence and improve the quality of life for offenders and their families. Benefits to society take the form of reductions in crime committed by drug court participants, resulting in reduced costs to taxpayers and increased public safety.

In the typical drug court program, participants are closely supervised by a judge who is supported by a team of agency representatives who operate outside of their traditional roles. The team typically includes a drug court coordinator, addiction treatment providers, prosecuting attorneys, defense attorneys, law enforcement officers, and parole/probation officers who work together to provide needed services to drug court partic-

ipants. Prosecuting attorneys and defense attorneys hold their usual adversarial positions in abeyance to support the treatment and supervision needs of program participants. Drug court programs can be viewed as blending resources, expertise, and interests of a variety of jurisdictions and agencies.

Drug courts have been shown to be effective in reducing recidivism (GAO, 2005) and in reducing taxpayer costs due to positive outcomes for drug court participants (Carey & Finigan, 2003; Carey, Finigan, Waller, Lucas, & Crumpton, 2005). Some drug courts have even been shown to cost less to operate than processing offenders through traditional (business-as-usual) court processes (Carey & Finigan, 2003; Crumpton, Brekhus, Weller, & Finigan, 2004a, 2004b; Carey et al., 2005).

This report contains the process evaluation for the Wicomico County Circuit Court, Adult Drug Treatment Court Program (WCADTC); a program for adults age 18 and older. The first section of this report is a description of the methods used to perform this process evaluation, including a site visit and key stakeholder interviews. The second section contains the evaluation, including a detailed description of the drug court's process. Findings and recommendations are based on the 10 Key Components of Drug Courts.



## METHODS

Information was acquired for this process evaluation from several sources, including observations of a court hearing and team meeting during a site visit, key stakeholder interviews, a focus group, and program documents. The methods used to gather information from each source are described below.

### SITE VISITS

NPC evaluation staff traveled to Wicomico County, Maryland, for a site visit in September 2007. The visit included attendance at the drug court team meeting, facilitation of a focus group with current drug court participants and an observation of a drug court hearing. These observations and the focus group provided information about the structure, procedures, and routines used in the drug court, as well as offering participants an opportunity to give feedback about their experiences in the program.

### KEY STAKEHOLDER INTERVIEWS

Key stakeholder interviews, conducted in person or by telephone, were a critical component of the WCADTC process study. NPC Research (NPC) staff interviewed 11 individuals involved in the administration of the drug court, including the Judge, the Program Coordinator, the Resource Manager, a representative from the State's Attorney's Office and the Assistant Public Defender. Other team members interviewed included the Court Administrator, a representative from Wicomico County Health Department Addictions Program (WCHDAP), a representative from the Parole and Probation Department, two representatives from Wicomico County Detention Center and a representative from Salisbury City Police Department.

NPC has designed a *Drug Court Typology Interview Guide*<sup>1</sup>, which provides a consistent method for collecting structure and process information from drug courts. In the interest of making this evaluation reflect local circumstances, this guide was modified to fit the purposes of this evaluation and this particular drug court. The information gathered through the use of this guide assisted the evaluation team in focusing on the day-to-day operations as well as the most important and unique characteristics of the WCADTC.

### FOCUS GROUP

NPC staff conducted a focus group with three active program participants in the offices of the WCADTC in September 2007. The focus group provided the participants with an opportunity to share their experiences and perceptions regarding the drug court process. A summary of results can be found in Appendix B of this report.

### DOCUMENT REVIEW

In order to better understand the operations and practices of the drug court, and to compare this information to descriptions of the program provided by the key stakeholder interviews, the evaluation team reviewed the *Wicomico County Circuit Court Adult Drug Treatment Court Program Policy and Procedures Manual* and the *Wicomico County Adult Drug Treatment Court Participant Handbook* for program information.

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<sup>1</sup> The Typology Guide was originally developed by NPC Research under a grant from the Bureau of Justice Assistance and the Administrative Office of the Courts of the State of California. A description of the guide can be found in Appendix A, and a copy of this guide can be found at the NPC Research Web site at [http://www.npcresearch.com/Files/NPC\\_Research\\_Drug\\_Court\\_Typology\\_Interview\\_Guide\\_\(copyrighted\).pdf](http://www.npcresearch.com/Files/NPC_Research_Drug_Court_Typology_Interview_Guide_(copyrighted).pdf)



## RESULTS

### Wicomico County Adult Drug Treatment Court Program Description

#### WICOMICO COUNTY, MARYLAND

Wicomico County is located in the southeastern part of Maryland, bordering Delaware to the north. To the south are Somerset and Worcester Counties. Salisbury is the county seat and had a population of 23,743 in 2000. According to the 2005 Census estimate, the population of Wicomico County was 87,334, with more than 75% over the age of 18. The median age was 36. Wicomico County's racial/ethnic composition was 71% White with 24% African American and 3% of the population identified as Hispanic of any race. The Census also found that the median family income was \$56,056 and the median household income was \$45,581, with 15% of individuals and 12% of people in families living below poverty level. The county's unemployment rate at the time of the 2005 census was 7%. The main industries of employment are educational services, health care, and social assistance.

#### WICOMICO COUNTY DRUG TREATMENT COURT OVERVIEW

The Wicomico County Adult Drug Treatment Court (WCADTC) is located in Salisbury, Maryland, with the program servicing the entire county. The program enrolled its first participant in September 2005. A variety of local agencies comprise the drug court. The WCADTC operations team is made up of the Judge, program coordinator, a parole/probation agent, two representatives from corrections, three representatives from law enforcement, an Assistant State's Attorney, an Assistant Public Defender, Wicomico County Health Department representatives, including the Director of Addictions

and two addictions counselors, a resource manager, and the Circuit Court Administrator. The WCADTC program serves adult offenders who have committed crimes as a result of their addiction. The program provides intensive supervision and treatment along with comprehensive judicial monitoring. Plans are being made to implement a drug court at the District level in Wicomico County in 2008.

#### IMPLEMENTATION

In May 2004, Wicomico County's Administrative Judge, Donald Davis, who was on the Drug Treatment Court Commission (now called the Drug Court Oversight Committee), approached Court Administrator, Wendy Riley, about implementing an adult drug court. Ms. Riley convened a stakeholders' meeting which included representatives from the State's Attorney's Office, the Office of the Public Defender, the Parole and Probation Department, the Wicomico County Health Department, corrections, law enforcement, and Salisbury City Council. A team of representatives, including the Circuit Court Administrator, the Deputy Health Officer, the Judge, the Director of Corrections, representatives from the State's Attorney's Office, the Office of the Public Defender and the Division of Parole and Probation were approved to attend a series of drug court implementation trainings put on by the National Drug Court Institute (NDCI), which concluded in October 2005. The trainings were funded through a Byrne Justice Assistance Grant.

Judge Beckstead has been with the WCADTC program since its inception, and Judge Davis has served as the court's back-up judge. Ms. Riley served as the drug court's coordinator for the first year. The drug court's first participant began the program in September 2005. The current coor-

dinator began at the end of November 2005. The Maryland Office of Problem-Solving Courts (MOPSC) funds the coordinator's position as well as drug testing and some transportation services for participants. The resource manager's position was initially funded through the Governor's Office of Crime Control and Prevention but is now funded through MOPSC. In addition, the program has been awarded a 1-year grant from MOPSC for a dedicated representative from the State's Attorney's Office who began work with the team in January 2008. The program also received MOPSC funding for law enforcement overtime costs, in order to conduct all the necessary home visits and employment checks for participants. The Health Department receives some funds through the Alcohol and Drug Abuse Administration (ADAA), and other WCADTC staff members are paid through their own agencies.

#### **PARTICIPANT POPULATION AND PROGRAM CAPACITY**

At capacity, the WCADTC program is currently designed to serve 50 active participants. Since the drug court program has been operational, it has been able to accommodate all eligible participants. As of October 2007, 54 individuals had enrolled in the drug court since the program's inception; 4 of these participants had graduated, 19 were unsuccessful at completing the program, and 31 individuals were active participants.

Just over half (55%) of the program's participants, as of October 2007, are male; 45% are White, 52% are Black, and 3% are other racial backgrounds. The average age of current program participants is 33 years. Thirty-five percent of participants are ages 20 to 25, 19% are 26 to 35 years old, 19% are 36 to 45 years old and 26% are over 45 years old. The main drugs of choice for participants of the WCADTC program are cocaine, heroin, and marijuana.

#### **DRUG COURT GOALS**

The WCADTC program works to reduce criminal behavior and substance abuse by participants. Currently, the program has five specific goals listed in its *Policy and Procedures Manual*:

- Reduce the number of repeat drug crimes committed by addicted offenders in Wicomico County.
- Increase the completion percentage of those who are court ordered into substance abuse treatment.
- Provide effective court supervision.
- Return repeat offenders to the community as productive law-abiding citizens.
- Increase the number of those served to 50 participants by the end of fiscal year 2007.

The WCADTC staff's goals for the program, as reported during the key stakeholder interviews, are in line with those listed in the *Policy and Procedures Manual*. Staff members emphasized the importance of treating the whole person and every aspect of his/her life. Additional reported program goals included helping individuals maintain a life of sobriety and rebuilding life skills so participants can re-engage within the community.

#### **ELIGIBILITY CRITERIA**

The WCADTC eligibility criteria are listed in the *Policy and Procedures Manual*. Prospective participants to the program must be residents of Wicomico County, Maryland, and be 18 years of age or older. In addition:

- The offender must be charged in Wicomico County.
- The charge must be a nonviolent Circuit Court charge.
- The offender must be substance abusing, with a dependency diagnosis.

Key stakeholder interviews confirmed that these are the operational eligibility criteria for the program. Generally, prospective drug court participants have not responded to regular probation and outpatient treatment. Although the charge must be a Circuit Court felony or misdemeanor, it does not have to be directly drug related. Charges and behaviors that preclude an individual's entry into the program are violent offenses or a propensity toward violent behavior, sales of controlled substance for profit and firearm offenses. Additionally, the team decided not to accept anyone with sex offenses. Eligibility criteria and disqualifying factors are not waived; however, there is some flexibility for certain charges such as trafficking. Most individuals with trafficking charges are not accepted into the program; however, if trafficking took place primarily to support the offender's drug use—and not for profit—the team will consider admitting the prospective participant.

#### **DRUG COURT PROGRAM SCREENING AND ENTRY PROCESS**

The following description explains the process that prospective WCADTC participants go through before entering the program. Originally, potential participants came to the program through a violation of probation only. The team decided to include new arrests in order to increase their participant numbers to meet capacity.

An offender with a violation of probation would be referred to drug treatment court by the Parole and Probation Department. An offender with a new arrest is typically referred by corrections, law enforcement, or defense counsel. Finally, the Judge may order that an individual be screened for program participation, if she believes him or her to be suitable. Referral forms are kept at the detention center, with the court, with the public defender, with parole/probation, and at the office of the local Bar Association.

Team members reported that arrest to referral can take 45 days to 9 months. This window is impacted by the length of time it takes an individual to be assigned a public defender and where the case begins: Circuit or District Court. A case that begins in District Court typically takes 120 days to get to Circuit Court. Team members report that this happens in up to one third of the cases.

The completed referral form and signed program release forms are sent to the coordinator before the prospective participant is ready to make a plea. Sentencing must then be deferred for 45 days for the screening process to occur. Once she has received the referral, the coordinator then forwards a copy to the State's Attorney's Office, where a criminal history check is conducted. If the prospective participant legally qualifies for the program, a clinical screening is conducted by the Wicomico County Health Department. To be eligible for program entry, the prospective participant must meet American Society of Addiction Medicine (ASAM) criteria for level 2, intensive outpatient care or greater. If the prospective participant passes both of those screenings, a sub-group of the drug court team meets to further discuss his or her eligibility. This group is comprised of the Assistant State's Attorney, the Assistant Public Defender, corrections, law enforcement, and parole/probation. Formerly, the entire team voted on the prospective participant's admission into the program; however, the team decided that having just the aforementioned group members present to discuss admission would make the process less subjective.

Within a week of being accepted into the program, participants must attend an orientation, which includes a Power Point presentation that thoroughly covers the participant handbook.

If the participant came to the program through a violation of probation, a guilty plea is imposed, and sentencing includes supervised probation along with mandatory

drug court attendance and successful program completion. Participants coming from the detention center's substance abuse treatment program who request the program are placed in drug court as a condition of their probation. Those individuals who are admitted through original sentencing must accept a guilty plea and attend and successfully complete drug court while on supervised probation (as part of their sentencing).

#### **INCENTIVES FOR OFFENDERS TO ENTER (AND COMPLETE) THE WCADTC PROGRAM**

The WCADTC is a violation of probation, post-plea, and re-entry program. Those who decline participation have opted to serve their jail time rather than take part in the 18-month program, according to team members. Most of the participants are repeat offenders with a felony case, so they are typically faced with significant incarceration time as an alternative to drug treatment court participation. If they are accepted into the drug court program, their sentences are suspended. They do not have to serve jail/prison time once they successfully complete the program.

For the four program graduates, completion has meant an end to probation. However, the *Policy and Procedures Manual* allows for probation to continue. The program is voluntary, and the removal of potential incarceration time is the primary incentive for offenders to enter the program. Additional incentives for offenders to enter and progress through the program include support in their recovery with treatment and case management, receiving praise from the judge, and material rewards (e.g., gift cards) as they advance from phase to phase.

#### **DRUG COURT PROGRAM PHASES**

The WCADTC program has four phases which, cumulatively, take 18 to 24 months to complete. The length of each phase is dependent upon the participant's compliance

with drug court requirements. During all phases, participants must comply with their individualized substance abuse treatment plan, health care instructions, medication requirements, curfew rules, and referrals made by the resource manager.

Phase 1 lasts a minimum of 3 months. During this phase, the participant must have a complete physical examination, followed by a health education appointment to learn more about mental illness-related issues and communicable diseases (e.g., tuberculosis and HIV). Participants must obtain (or currently be living in) housing approved by the drug court team, and they must have a land line telephone. The participant must obtain employment within 6 weeks of program entry. He or she must visit the parole/probation agent at least 2 times each month. Participants in this phase attend drug court hearings twice monthly.

Phase 2 of the drug court program lasts a minimum of 6 months. Participants must maintain suitable housing with a land line telephone, as evaluated by the parole/probation agent and/or law enforcement at least once each month. A monthly face-to-face contact with the parole/probation agent is required. During this visit, the participant must provide proof that he or she is working a minimum of 25 hours per week. A total of 20 hours of community service is also required in Phase 2; however, if the participant is not working, additional community service is required in lieu of employment hours. Participants must come to drug court 1 to 2 times monthly, and they must show proof that they have attended at least three self-help meetings every week. Participants in this phase must submit two to six random urine tests weekly, and they must be clean for a minimum of 120 consecutive days in order to move on to the next phase.

Drug Court Phase 3 takes a minimum of 6 months to complete. Participants are required to maintain safe and clean housing during that period and must have one face-

to-face contact with the parole/probation agent. Participants must also be employed a minimum of 30 hours per week and attend at least one drug court hearing monthly. At the drug court hearing they must show proof of employment and evidence of attendance of at least four self-help meetings per week. Random UAs take place 1 to 6 times per week, and participants must remain clean for a minimum of 150 consecutive days in order to advance to Phase 4.

Phase 4 takes a minimum of 3 months to complete. During this phase, participants are expected to complete substance abuse treatment and pay all restitution and parole/probation supervision fees. Maintenance of suitable housing and weekly call-ins to the parole/probation agent are required. Participants are expected to work a minimum of 35 hours weekly, and they must attend drug court at least once monthly. They must also complete 50 hours of community service and attend 5 self-help meetings each week. Random UAs are conducted for participants in this phase 1 to 6 times weekly, and an aftercare plan with the resource manager must be completed. A minimum of 210 consecutive clean days are required in order to graduate.

At some point in the program, each participant is required to complete a “Beyond the Limits” program. This is a day-long team building program that is facilitated by high school teachers and requires participants and drug court team members to work together to achieve assigned goals. These goals require mental and physical teamwork. The activities, such as tree climbing, take place in a wooded setting. Four sessions of Beyond the Limits, with 15 participants in each session, have taken place so far. Future delivery of this program is dependent upon the continuation of grant funding.

Referrals made by the resource manager are part of the drug court’s case management program called “Made for Excellence.” The program is intended to provide participants

with the tools to replace drug use with healthy living skills. Individualized case plans are developed, and participants must adhere to their plans in order to progress in the drug court program.

## GRADUATION

In order to graduate from WCADTC, participants must satisfy program requirements for all four phases, including:

- Successful completion of substance abuse treatment, including payment of all fees.
- Payment of any outstanding court costs, fines, and/or restitution.
- Successful completion of any recommended treatment or aftercare.
- Continued regular employment.
- Successful completion of the “Made for Excellence” case plan.
- Completion of 210 days of consecutive clean time.

The WCADTC program holds individual or group graduations, depending on the number of graduates. Ceremonies have been held at WorWic Community College with all active program participants present. Graduates wear caps and gowns that have been donated by a local business. A certificate of completion, mounted on a plaque, is presented to each graduate, and the judge gives a speech on his or her behalf. In past ceremonies, invocations have been delivered by city council members; a benediction was also given at a previous graduation ceremony.

## TREATMENT OVERVIEW

The Wicomico County Health Department, Addiction Program (WCHDAP) is the primary treatment provider for WCADTC. The drug court also has agreements with six other treatment agencies: two that offer residential treatment and four that offer outpatient treatment. Two WCHDAP counselors work

with drug court participants providing individual and group counseling, and one counselor works with participants who have a dual diagnosis. The program's treatment model utilizes motivational interviewing in a disease model treatment setting. Drug court counselors use American Society of Addiction Medicine (ASAM) criteria to determine if the prospective participant meets level 2 care for intensive outpatient treatment. An individual who is assessed as having schizophrenia, severe bipolar disorder or schizoaffective disorder would be considered not clinically eligible for the program. Those who meet the program's eligibility standards receive intensive outpatient treatment that includes treatment planning, case management, group counseling, individual counseling and development of a sober support system. Participants in intensive outpatient care attend treatment programming at least 9 hours weekly.

Treatment phases are separate from drug court phases; however, a participant must be progressing in treatment in order to advance in drug court phases. Phase 1 of treatment lasts a minimum of 3 months. Participants attend intensive outpatient groups 3 times per week for 3 hours per session. Additionally, participants attend individual counseling sessions at a minimum of two each month. They must also attend two self-help meetings per week.

Phase 2 of treatment lasts a minimum of 4 months. Treatment consists of 3 hours of intensive outpatient groups twice a week. Participants must attend individual counseling sessions once a month. They must also attend three self-help meetings per week.

Treatment Phase 3 takes a minimum of 4 months to complete. Participants must attend intensive outpatient groups once weekly for 3 hours. An individual session is required at least once monthly, and four self-help meetings per week are required.

Progression through Phase 4 of treatment takes a minimum of 4 months. Participants must attend individual counseling at least once monthly. They must also attend five self-help meetings each week.

Finally, for Treatment Phase 5, participants must attend six self-help meetings weekly for a minimum of 3 months. Once treatment is completed, participants must complete an aftercare plan with their primary counselor, including relapse prevention and recovery management. During the time period after treatment completion but before drug court graduation, the team is able to see how each participant puts his or her plan into place. Aftercare treatment is available but not mandatory. Participants choosing optional aftercare treatment can meet individually with their counselors once weekly for 3 months, and thereafter they can contact their counselor for needed support by phone for up to 6 months.

Before entering the drug court program, a small percentage of participants have received Residential Substance Abuse Treatment (RSAT) while incarcerated. RSAT is a 12- to 18-month treatment program and includes addiction classes, mental health counseling, and anger management and conflict resolution classes. Participants must attend some form of treatment for a minimum of 9 hours each week. They also work toward educational and employment goals.

If it is determined that a program participant continues to use while in WCADTC, s/he can be referred to residential treatment. WCHDAP works with two local residential drug treatment organizations. One of these is specifically designed to serve women with children.

## **THE DRUG COURT TEAM**

### *Judge*

Judge Kathleen Beckstead has been with WCADTC since its implementation and currently presides over the drug court. The po-

sition of drug treatment court judge is voluntary, and the duties performed are in addition to her responsibilities as a Wicomico County Circuit Court judge. In rare instances when Judge Beckstead is unable to preside over the drug court hearings, Judge Davis steps in to take her place.

#### *Coordinator*

The current WCADTC coordinator has been with the team since November 2005. She is responsible for organizing pre-court team meetings and disseminating information about participant progress to the team every other week at these meetings. She administers all of the program's grants and serves as a resource to the team with regard to identifying drug-court based training and workshop opportunities. The coordinator attends pre-court meetings and drug court hearings, and is responsible for scheduling the docket. All participant referrals go through the drug court coordinator. She also supervises the resource manager position.

#### *Resource Manager*

The resource manager provides case management services and administers the "Made for Excellence" life skills component of the program. He is the central source for referrals to a variety of ancillary services. He meets regularly with drug court participants, on an individual basis, to assist them in creating short and long-term goals pertaining to areas of career development, education and health. Progress notes are written by this team member after each meeting. The resource manager also meets weekly with treatment providers and the parole agent to discuss participant progress. He attends pre-court meetings and drug court hearings and is responsible for completing an aftercare plan with each participant, which includes identifying pro-social activities. The previous resource manager left her position in August 2007; the individual currently in this position began in November 2007.

#### *Parole/Probation Agent*

The parole/probation agent has been with the WCADTC program since its inception. She supervises all of the program participants, conducts home and work site visits, and performs regular drug testing. She is also responsible for sending reports to the coordinator a few days prior to each drug court hearing. The reports include information on participants' drug test results, payment of probation fees, home and work visits and any new arrests. She also meets with prospective participants who are incarcerated to determine if they should be referred to drug court. The parole/probation agent attends pre-court meetings as well as drug court hearings, and occasionally attends program orientation. She reports a caseload of 40-50 individuals outside of her drug court caseload.

In December 2007, the parole/probation division assigned a new officer to drug court full-time. She will carry this program's caseload and the District Drug Court's caseload once it has been implemented.

#### *Treatment Provider*

There are two counselors from Wicomico County Health Department Addiction Program (WCHDAP) on the drug court team. The counselors conduct individual and group sessions with the program participants, and they regularly report to the team regarding the progress of program participants. They create individualized treatment plans for program participants and conduct drug testing as needed. One of the two counselors is always present for both pre-court team meetings and drug court hearings. In addition to these two counselors, the director of WCHDAP sometimes attends meetings and hearings. Another counselor works with participants who have been diagnosed with both mental health concerns and substance abuse/dependence issues. She does not attend team meetings or hearings.

### *Assistant Public Defender*

The WCADTC's Assistant Public Defender (APD) began working with the program in October 2006. She represents the program's participants after their plea agreement, and supports the non-adversarial team approach. The APD attends the pre-court team meetings, where she contributes to team decisions and advocates for participants along with the other team members. She also attends the drug court hearings and the eligibility meetings. The APD ensures that drug court procedures and protocols are in each defendant's best interests. In December 2008, a new APD began working with the drug court team. She was a new hire in the Office of the Public Defender and the fourth APD for the team since program implementation.

### *State's Attorney's Office*

A representative from the State's Attorney's Office (SAO) serves on the drug court team. He regularly participates in the pre-court team meetings and the drug court hearings. As part of the eligibility process for potential drug court participants, the Assistant State's Attorney (ASA) helps determine legal eligibility for the program. The ASA has the ultimate veto power concerning which individuals are accepted into the program. In an effort to make the eligibility determination process less subjective, the ASA and the APD now meet with law enforcement, parole/probation and corrections representatives, rather than the whole team, to discuss prospective participant's eligibility. Beginning January 2008, a new ASA will be assigned to the drug court team full-time, supported by a 1-year grant from the Maryland Office of Problem-Solving Courts.

### *Corrections Liaison*

The Wicomico County Corrections Center's Classification Supervisor serves as the team's corrections liaison. She joined the drug court team in December 2005. She attends pre-court meetings, drug court hear-

ings and eligibility meetings. The corrections liaison can provide information about participants who have received a jail sanction. She also provides information on prospective participants who have gone through the Correction Center's treatment program. Additionally, she follows up with incarcerated participants to ensure that they are following the drug court judge's instructions.

### *Community Service Coordinator*

The Community Service (CS) coordinator monitors all community service-related activities performed by drug court participants. The CS coordinator arranges community service placements for participants in the community with participating organizations, and verifies completion of their assigned hours. The CS coordinator attends drug court team meetings and hearings, during which she reports on each participant's compliance with community service assigned activities, as well as participant compliance with any electronic monitoring orders. The CS coordinator maintains regular contact with the Drug Court Coordinator, providing information on compliance with the court-ordered monitoring. She is employed by the Department of Corrections and monitors approximately 275 individuals in addition to the drug court participants.

### *Law Enforcement*

The main law enforcement liaison is employed by Salisbury City Police Department. The majority of WCADTC participants live in his jurisdiction. He has been with WCADTC since September 2006, and attends the pre-court meetings and the court sessions until roll call is done. The law enforcement liaison also attends the eligibility meetings with the Assistant State's Attorney and accompanies the parole/probation agent on home visits and searches of current participants' homes. Other law enforcement agencies involved in the drug court include the Wicomico County Sheriff's Department and the Fruitland Police Department. Repre-

sentatives from these agencies attend team meetings and court hearings when individuals from their jurisdictions are participating in the program.

#### *Circuit Court Administrator*

The Circuit Court administrator supervises the drug court coordinator's position and oversees the Circuit Court administration staff. She sometimes attends pre-hearing team meetings and court hearings. She was key to the implementation of this drug court program and served as its coordinator for the first year.

#### **DRUG COURT TEAM TRAINING**

Judge Beckstead, the court administrator, a representative from the State's Attorney's Office, a representative from the Office of the Public Defender, a representative from the parole/probation office, and the Wicomico County Health Officer attended a series of planning trainings sponsored by the National Drug Court Institute (NDCI) in 2005. The coordinator received job-specific training regarding program sustainability through NDCI in March 2007. She also attended a 1-day training symposium in Annapolis in the winters of 2005 and 2006. This training was sponsored by the Maryland Office of Problem-Solving Courts. The parole/probation agent and the law enforcement representative attended the 2007 winter symposium in Annapolis as well. The ASA attended in 2006, and the corrections representative attended both years. The coordinator also attended the Annual Drug Court Training Conference in June 2007 in Washington, DC. This 3-day conference was sponsored by the National Association of Drug Court Professionals (NADCP). Other WCADTC team members who attended this conference were the judge, the resource manager, the parole/probation agent, the Assistant State's Attorney, the Assistant Public Defender, the corrections representative, the Director of Addiction Programs, a treatment counselor, and a law enforcement representative. In

January 2006, the coordinator, parole/probation agent, resource manager and a law enforcement representative attended the "Drug Court 101" training through the Maryland Office of Problem-Solving Courts. The APD attended job-specific training in Reno, Nevada, in April 2007. The parole/probation agent and a law enforcement representative participated in a 5-day "community supervision" training in November 2007 in Annapolis.

#### **TEAM MEETINGS**

The pre-court meeting is held every other Friday from 9 a.m. until 10:30 a.m., prior to the drug court session. The judge, coordinator, APD, ASA, parole/probation agent, health department treatment counselor, outside treatment provider, resource manager, corrections and law enforcement representatives are in regular attendance. During these meetings, team members review the progress of program participants, including urinalysis results, attendance at self-help meetings, participation and cooperation with treatment, and case management plans. They also discuss participants' progress regarding employment or any other conditions or requirements that have been imposed by the court. Team members then make recommendations for sanctions and rewards. The judge makes final decisions regarding responses to participant behavior.

In addition to the pre-court meetings, the judge organizes staff retreats twice annually to discuss policy issues and changes to the policy manual. Attendees include all team members present at pre-court meetings, in addition to the director of the Wicomico County Detention Center, the parole/probation field supervisor and the court administrator. WCADTC no longer holds steering committee meetings. However, in response to training on program sustainability, the drug court team began holding monthly policy meetings in March 2007.

## **PROVIDER AND TEAM COMMUNICATION WITH THE COURT**

The WCADTC team primarily communicates through e-mail. The coordinator communicates daily with the treatment provider, the parole/probation agent, the APD and the ASA. She communicates almost daily with the judge and weekly with everyone else on the drug court team. In the team meeting, the judge asks the treatment provider, the parole/probation agent, and the coordinator how each participant is doing. She repeats this process in the drug court hearing. In addition, written progress reports are submitted to the judge at team meetings by the coordinator who compiles the summary information from the resource manager, parole/probation, and the treatment providers' reports. Data in the reports include urine drug test results, counseling attendance and participation, referral follow-up, and treatment progress.

## **DRUG COURT HEARINGS**

The drug court hearings are held every other Friday at 10:30 a.m. and can last anywhere from 2 to 4 hours. Team members that regularly attend the hearings include the judge, coordinator, APD, ASA, parole/probation agent, treatment counselor, law enforcement, corrections representative, and resource manager. Each session begins with roll call. If a drug court participant is not present, the judge issues a bench warrant and the associated law enforcement representative will immediately try to serve the individual at his/her home address.

On average, there are about 20 to 25 participants in attendance at each drug court hearing, and they are expected to remain for the entire hearing to observe the rewards and sanctions administered to their peers. Individual participants are called and directed to sit next to the public defender. The drug court coordinator speaks first about the participant's progress and then the treatment

provider and parole/probation agent report on participant progress.

Oftentimes, a representative from Goodwill Industries is present during the drug court session. If a participant is utilizing their career development services, the Goodwill representative will provide the court with a verbal progress report.

The drug court is open to the public. Family members do not usually attend unless the participant is advancing from one phase to the next. If they do attend, the judge acknowledges them.

## **FAMILY INVOLVEMENT**

Family members are invited to the participant orientation. Participants are also encouraged to invite family members to court hearings that include phase advancement and on the day they graduate from the program. Family participation is not compulsory; however, the treatment counselor may suggest that certain participants bring their family in for weekly family counseling. The program has also held special events, like an Easter egg hunt, which have included family members.

## **SUBSTANCE ABUSE TREATMENT FEES**

Wicomico County Health Department Addiction Program charges for treatment using a sliding fee scale. Counseling sessions range from \$2 to \$60, depending on the individual's income. There is no cost for drug testing if it is conducted with the treatment provider or at the detention center. There is a \$6 fee for drug tests conducted with parole/probation, with a \$100 maximum charge for drug testing over the course of program participation. Another fee associated with the program is confirmation of a positive UA, which the participant must cover if positive results are confirmed. Separate from treatment fees are the parole/probation fees, which include a monthly supervision fee of \$40. Parole/probation balances may also include fines. Participants

must pay all fees in full in order to graduate and must be actively making payments in order to advance from phase to phase.

### **DRUG TESTING**

Participants' compliance with clean time requirements is assessed by urinalysis tests. Drug tests are conducted weekly through the treatment provider and 1 to 2 times weekly by parole/probation. Other urinalysis tests are conducted randomly 1 to 3 times per month, depending on the participant's current phase in the program. Each participant is assigned a color and must call a recorded message nightly to find out if his/her color group has to report to one of the testing sites the next day. Drug testing is also conducted if there is any suspicion of drug use.

Participants used to receive drug testing through parole/probation, the treatment provider or at the Detention Center. Currently, participants are directed to parole/probation or the corrections center for testing services. Substances tested for by parole/probation and corrections are cocaine, marijuana, opiates, and benzodiazepines. Parole/probation uses instant tests. If results are positive, an automatic confirmatory test is done. Tests are sent to Kroll laboratory, and results usually come back the next day—2 days at most. When the health department conducted tests for the drug court program, they tested for alcohol, opiates, benzodiazepines, amphetamines, methamphetamines, barbiturates, PCP, and sedatives. They send their drug tests to Friends Laboratory for analysis. Results can take up to 7 days to receive, but they are also made available to the agency by phone after 3 days. All UA tests are observed by a staff member of the same gender as the participant being tested. Optional drug testing includes breath tests and Secure Continuous Remote Alcohol Monitor (SCRAM) units, which are used to monitor alcohol use transdermally when alcohol use is strongly suspected.

### **REWARDS**

WCADTC participants receive rewards from the judge for doing well in the program. Staff reported that reduction in program requirements is the most sought after reward. Incentives include applause, reduced supervision, decreased frequency of court appearances, curfew restriction reduction, and decreased community service requirements. Community businesses donate gifts (e.g., beach towels, music CDs and gift cards) which are typically given out upon phase advancement or program graduation.

### **SANCTIONS**

After a non-compliant act/behavior occurs, such as catching a new charge or missing treatment, case management or parole/probation appointments, the WCADTC team discusses the issues surrounding the infraction at the pre-court meeting taking place just prior to the participant's next regularly scheduled drug court hearing. A sanction schedule is used for infractions such as positive UAs. During the pre-court meeting, the coordinator will identify the scheduled sanction and the team will discuss its appropriateness given the infraction. The judge takes the team's recommendations into consideration and then makes the final decision; however, she generally agrees with the team's decision.

Sanctions are graduated and may include increased frequency of court appearances or community service hours, electronic monitoring, escalating periods of jail confinement, increased frequency of drug testing, assignment to the courtroom jury box for the duration of a drug court session, extension of program phases and extension of curfew restriction hours.

## **UNSUCCESSFUL PROGRAM COMPLETION (TERMINATION)**

Participants' program participation may be revoked for the following reasons, but are not limited to:

- Threatening violence towards self or others
- Violent acts of any kind towards self, others, or property
- Possession of a dangerous and deadly weapon
- Illegal activity, including but not limited to attempting to solicit fellow drug court participants for drug activity
- Soliciting drugs from other providers (MDs, etc.)
- Failure to attend sessions or comply substantially with conditions of treatment
- Continued non-compliance with supervision guidelines

The WCADTC program to date has discharged 19 participants (87%) as unsuccessful. The decision to remove a participant unsuccessfully from the program is made through a vote by the drug court team, with the judge having the ultimate say.

## **DATA COLLECTED BY THE DRUG COURT FOR TRACKING AND EVALUATION PURPOSES**

The treatment provider tracks assessment information using the Statewide Maryland Automated Records Tracking (SMART) system, Excel databases and client charts. Staff members reported that the entire team will be using SMART in the future; in fact, drug court staff attended SMART training in November 2007. Currently, team members use the Maryland Uniform Court System (UCS) to track participants' progress. Using the case management system in UCS, team members can track individual referrals, eligibility, forms signed, the type of hearings

attended, hearing results and sanctions imposed.

## **COMMUNITY LIAISONS**

Team members have partnered with a number of community agencies in Wicomico County in a concerted effort to provide needed services to drug court participants. The following list is not exhaustive but offers a fairly comprehensive picture of partner services offered through the drug court program.

Participants entering the WCADTC program receive a "care package" as a welcome gift that includes hygiene products provided by local businesses. The program has partnered with Goodwill Industries for the purpose of career development support and with Habitat for Humanity, which serves as the drug court's community service project. Salisbury Taxi offers transportation services for drug court participants.

Clean and sober housing is offered through Joseph House and Witness International, and the Life Crisis Center has offered housing to participants needing safe housing from domestic violence situations. The Economy Inn hotel is available for short-term emergency housing.

Additionally, several participants have been referred to Harvard Custom Manufacturing and Perdue Farms for employment. The program works with the Board of Education, the Adult Learning Center, Wicomico Family Support Center and area community colleges to meet participants' educational goals. Participants are able to get a complete physical either at the Governor's Wellmobile at no charge, or at Main Street Medical Center for a fee of \$90. Maryland Volunteer Legal Services is available to help with issues such as child custody and child support payments, at low or no cost. Finally, a local photography studio has worked with WCADTC to provide each program participant a portrait sitting.

## 10 KEY COMPONENTS OF DRUG COURTS

This section lists the 10 Key Components of Drug Courts as described by the National Association of Drug Court Professionals (NADCP, 1997). Following each key component are research questions developed by NPC for evaluation purposes. These questions were designed to determine whether and how well each key component is demonstrated by the drug court. Within each key component, drug courts must establish local policies and procedures to fit their local needs and contexts. There are currently few research-based benchmarks for these key components, as researchers are still in the process of establishing an evidence base for how each of these components should be implemented. However, preliminary research by NPC connects certain practices within some of these key components with positive outcomes for drug court participants. Additional work in progress will contribute to our understanding of these areas.

Key components and research questions are followed by a discussion of national research available to date that supports promising practices, and relevant comparisons to other drug courts. Comparison data come from the National Drug Court Survey performed by Caroline Cooper at American University (2000), and are used for illustrative purposes. Then, the practices of this drug court in relation to the key component of interest are described, followed by recommendations pertinent to each area.

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

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

#### National Research

Previous research (Carey et al., 2005) has indicated that greater representation of team members from collaborating agencies (e.g., defense attorney, treatment, prosecuting attorney) at team meetings and court sessions is correlated with positive outcomes for clients, including reduced recidivism and, consequently, reduced costs at follow-up.

#### Local Process

The Wicomico County Adult Drug Treatment Court (WCADTC) has an integrated treatment and judicial team that includes the Judge, the treatment provider, a representative from the Office of the Public Defender, a representative from the State's Attorney's Office, a resource manager, a corrections representative, a community service coordinator, law enforcement liaisons and a parole/probation agent. There are two full-time counselors that work with drug court participants and one counselor who works part-time with dually-diagnosed clients. One of the full-time counselors attends all pre-hearing meetings and drug court hearings. The second full-time counselor attends meetings and hearings only when he is available.

Ongoing recovery assessment is achieved through the Wicomico County Health Department Addictions Program (WCHDAP), the program's primary treatment provider. The director of the WCHDAP is also part of the drug court team and sometimes attends hearings and pre-hearing meetings.

Team members agreed that the different agencies participating in drug court work well together, and reported that there is a great deal of interaction and information sharing occurring between agency partners. One team member commented that the team is comprised of “a lot of really experienced people that really care about [drug court participants].”

When questioned about drug court team interaction, many of the team members talked about the active participation of law enforcement and about this agency’s value to the program. An interview with a law enforcement representative, as well as an observation of a drug court meeting and hearing, supported this team perception. Representatives from Wicomico County Detention Center, Salisbury City Police Department, Wicomico County Sheriff’s Office and the Parole and Probation Department attend both pre-hearing team meetings and drug court hearings. A representative from the Fruitland Police Department attended drug court meetings when an individual from his jurisdiction was participating in the program. In summary, the WCADTC program has an exceptionally successful working relationship with local law enforcement.

Prior to March 2007, program policy issues were discussed twice annually at group retreats spearheaded by the drug court judge. All of the team members attended these retreats along with the director of Wicomico County Detention Center, the parole/probation field supervisor, and the court administrator. Since March 2007, the team has held monthly policy meetings in accordance with trainings they have received.

There has been some turnover of WCADTC team members. The previous public defender, who was interviewed for this report, had been in her position just over a year. Prior to that time her supervisor and one other attorney consecutively held the public defender’s position on the drug court team. As of De-

ember 2007, a new public defender was hired in the Office of the Public Defender and began working with the drug court. The coordinator’s position was previously held by the court administrator. A new resource manager was hired in November 2007. The previous resource manager was the only other person that held that position. Additionally, the program received funding to hire a dedicated state’s attorney for 1 year. This person will replace the team’s current SAO representative in January 2008.

### Recommendations/Suggestions

- Because continuity in team roles strengthens relationships, the program should work to reduce turnover in the Office of the Public Defender, and look into the reasons behind short tenures in that agency. The Office of the Public Defender should recognize the drug court program as an opportunity for its clients to experience greater success in the community and in their lives. All agency representatives should be well integrated into the team and should share the perception that they all have a stake in the program’s goals/purpose. This should also be a serious consideration when filling positions, such as the dedicated State’s Attorney, funded by short-term grants which can have the unintended effect of causing staff turnover.
- The American Parole and Probation Association recommends a maximum caseload standard of 20 intensely supervised individuals to each agent (Burrell, 2006). The drug court program should try to stay as close to this standard as possible in order to achieve and maintain (or support) the highly structured nature of this program. Staff can be assigned larger caseloads if supervision and case management responsibilities are shared or if some participants are in later program phases, requiring less contact and support. Additionally, it is important to

communicate with the Parole and Probation Department regarding the program's needs, especially if this agency is assigning non-drug court caseloads for agents working with drug court participants.

- The coordinator should make sure that action items discussed at policy meetings are appropriately addressed, or that someone on the team is assigned to carry out agreed-upon tasks and then report back to the group on the outcome.

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

*Research Question: Are the Office of the Public Defender and the State's Attorney's Office satisfied that the mission of each has not been compromised by drug court?*

National Research

Recent research by Carey, Finigan, & Puksas, in press, found that participation by the prosecution and defense attorneys in team meetings and at drug court sessions had a positive effect on graduation rate and outcome costs.

In addition, allowing participants into the drug court program only post-plea was associated with lower graduation rates and higher investment costs<sup>2</sup>. Higher investment costs were also associated with courts that focused on felony cases only and with courts that allowed non-drug-related charges. However, courts that allowed non-drug-related charges also showed lower outcome costs<sup>3</sup>. Finally, courts that imposed the orig-

<sup>2</sup> Investment costs are the resources that each agency and the program overall spend to run the drug court, including program and affiliated agency staff time, costs to pay for drug testing, etc.

<sup>3</sup> Outcome costs are the expenses related to the measures of participant progress, such as recidivism, jail time, etc. Successful programs result in lower out-

come costs, due to reductions in new arrests and incarcerations, because they create less work for courts, law enforcement, and other agencies than individuals who have more new offenses.

Local Process

Prosecution and defense counsel are included as part of the drug court team. They attend both pre-court team meetings and drug court hearings. While team members reported that they may have debates/disagreements during team meetings, it was also reported that the team will generally arrive at an agreed-upon solution by the end of the discussion, and that team members typically have shown flexibility beyond their traditional roles. The prosecution and defense counsel have implemented an eligibility meeting (separate from pre-court team meetings) which also includes law enforcement, corrections and parole/probation, in order to minimize subjectivity in the screening process. Rather than have the entire team vote on whether a particular individual should be accepted into the program, this smaller group, which includes individuals who may have had prior experience with prospective participants, discusses potential participants during the eligibility meeting.

Based on information from key stakeholder interviews, there is a difference in the extent to which team members are committed to the practice of this key component (i.e., the adoption/acceptance of a non-adversarial team approach). This is a critical component that the team will have to work together to integrate into the program. Drug court is a different model than traditional court. Team members that are used to having a certain kind of authority have to adopt a different paradigm for this design to be effective. Research shows that this model works, but re-

come costs, due to reductions in new arrests and incarcerations, because they create less work for courts, law enforcement, and other agencies than individuals who have more new offenses.

cognizes that it is challenging for some to step outside of their traditional roles.

Recommendations/Suggestions

- It would benefit the team to clarify roles in an attempt to promote non-adversarial relationships between team members (e.g., attorney representatives). The creation of a separate eligibility meeting to reduce team member subjectivity is a step toward this goal. In addition, the team should adhere as closely as possible to written eligibility requirements.

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

*Research Question: Are the eligibility requirements being implemented successfully? Is the original target population being served?*

National Research

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

Local Process

The WCADTC accepts only post-plea offenders. Charges do not have to be directly drug-related and can be either misdemeanors or felonies. The program relies on referrals from law enforcement, defense attorneys, parole/probation, corrections and occasionally the Judge. Legal eligibility is determined by the State’s Attorney and is based on requirements which are clearly set forth in the *Wicomico County Adult Drug Treatment Court Policy and Procedures Manual*. However, eligibility is also discussed during the smaller eligibility team meeting which includes the public defender, law enforcement, parole/probation and corrections. In this setting, individual team members who

may have had prior experience with prospective participants are able to provide additional information to better support program entry decisions.

The time from arrest to referral to the WCADTC program varies widely. It can be as short as 45 days and as long as 9 months. The longer times are associated with referrals for individuals who have been incarcerated while awaiting an appointment with a public defender. Additionally, cases that are moved from District Court to Circuit Court have a longer arrest to referral timeframe. Ideally, WCADTC would like to have a 45 day arrest to referral timeframe.

Recommendations/Suggestions

- Because the intent of drug court is to connect individuals to services expeditiously and limit their time in the criminal justice system, the program should consider accepting pre-plea cases for referral. Under these circumstances, the State’s Attorney’s Office or law enforcement would be primarily responsible for referring participants.
- In keeping with written eligibility criteria, prospective participants whose histories may include behavioral problems should not be automatically disqualified from program entry. The program serves its community most effectively when these individuals are able to successfully fulfill the goals of the program.
- The program reports a capacity goal of 50 active participants. This number is based on the caseload assignment for resource managers. At the end of September 2007, there were 31 active participants. In order to meet the program’s capacity goals, the team should consider identifying more opportunities for participants to receive incentives, increasing the likelihood that participants will remain in the program; make certain that attorney’s roles are clearly defined and

understood, allowing for more individuals to enter the program; make certain that there are adequate resources for thorough case management at all levels of the program, ensuring that participant needs are being met.

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

*Research Question: Are diverse specialized treatment services available?*

National Research

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

Clients who participate in group treatment sessions 2 or 3 times per week have better outcomes (Carey et al., 2005). Programs that require more than three treatment sessions per week may create a hardship for clients, and may lead to clients having difficulty meeting program requirements. Conversely, it appears that one or fewer sessions per week is too little service to demonstrate positive outcomes. Individual treatment sessions, used as needed, can augment group sessions and may contribute to better outcomes, even if the total number of treatment sessions in a given week exceeds three.

The American University National Drug Court Survey (Cooper, 2000) shows that most drug courts have a single treatment provider. NPC, in a study of drug courts in California (Carey et al., 2005), found that having a single provider or an agency that oversees all the providers is correlated with more positive participant outcomes, including lower recidivism and lower costs at follow-up.

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

Local Process

The treatment provider for the WCADTC program is Wicomico County Health Department Addictions Program (WCHDAP). One counselor from this partner agency facilitates group therapy during the day and the other facilitates evening groups for participants who work during the day. There is also a therapist available for dually-diagnosed participants. The treatment modalities used include motivational interviewing based in the chronic disease model. Also, the program has an active referral service for participants needing support for anger management and victimization issues.

WCADTC also has contracts with 4 other treatment providers. One of these is Hudson Health Services, which serves drug court participants requiring inpatient residential treatment. Another facility, Center for a Clean Start, is designed to assist pregnant women and the remaining two are standard outpatient treatment providers, available to participants with health insurance. A comprehensive list of treatment services offered through all providers is included in the program’s policy and procedure manual; it includes detoxification services, therapeutic community support, medically-monitored

intensive inpatient treatment and medication-assisted treatment.

Participants of the WCADTC are required to attend group therapy 3 times per week in Treatment Phase 1, twice weekly in Treatment Phase 2 and once weekly in Treatment Phase 3. Beyond this, they must attend two individual sessions per month in Treatment Phase 1, and a minimum of one individual session per month in Treatment Phases 2, 3 and 4. Family counseling sessions are available as needed and counselors may suggest family counseling; however, it is not required. When all treatment phases have been completed, the creation of an aftercare plan, including relapse prevention and recovery management, is required. Aftercare treatment with the WCHDAP is optional.

#### Recommendations/Suggestions

- Based on information compiled from key stakeholder interviews, treatment should seek additional resources around addiction case management strategies and skills, and additional topics or curricula to cover in group sessions. Plans to contact other drug court treatment providers are in place and encouraged. Other programs have used a variety of therapeutic interventions including Seeking Safety, Cognitive Behavioral Therapy, public speaking assignments aimed at drug use prevention for youth, and alumni support groups.
- Mandatory aftercare that offers support to the participant as s/he transitions back into the community should be implemented by the drug court team, including facilitating linkages to family and community supports.

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

*Research Question: Does this court conduct frequent, random drug tests?*

#### National Research

Research on drug courts in California (Carey et al., 2005) found that drug testing that occurs randomly, at least 3 times per week, is the most effective model. If testing occurs frequently (that is, 3 times per week or more), the random component becomes less important.

The outcomes of programs that tested more than 3 times per week were neither better nor worse than the outcomes of programs testing only 3 times per week. Less frequent testing resulted in less positive outcomes. It is still unclear whether the important component of this process is taking the urine sample (having clients know they may or will be tested) or actually conducting the test, as some programs take multiple urine samples and then select only some of the samples to test. Further research will help answer this question.

Results from the American University National Drug Court Survey (Cooper, 2000) show that the number of urinalyses (UAs) given by the large majority of drug courts nationally during the first two phases is two to three per week.

#### Local Process

The number of urinalyses administered in WCADTC is comparable to most drug courts nationally. The administration of two to six UAs weekly, with an average of three to four per week is consistent with national experience. WCADTC administers UAs randomly in all phases. The team utilizes a color coded, call-in system. If a participant's color group is listed on the daily phone recording, s/he must report to the parole/probation office, the detention center, or

the treatment provider for drug testing the next day. As of January 2008, the treatment provider no longer conducts drug tests for drug court participants. Drug tests given at the detention center and at parole/probation assess for alcohol, cocaine, amphetamine, methamphetamines, marijuana, PCP, opiates, and benzodiazepines.

In addition to drug testing, WCADTC uses the Secure Continuous Remote Alcohol Monitor (SCRAM) system, an ankle bracelet worn by participants, as needed. The SCRAM unit is designed to detect alcohol use transdermally.

#### Recommendations/Suggestions

- There are no recommendations at this time for this area, as the program appears to have implemented a successful drug use monitoring system. As a guide, research has shown that 75 percent of all drug court participants had one or more positive drug tests during their time in the drug court (Rempel et al., 2003).

#### **Key Component #6: A coordinated strategy governs drug court responses to participants' compliance.**

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

#### National Research

Nationally, experience shows that the drug court judge generally makes the final decision regarding sanctions or rewards, based on input from the drug court team. All drug courts surveyed in the American University study confirmed they had established guidelines for their sanctions and rewards poli-

cies, and nearly two thirds (64%) reported that their guidelines were written (Cooper, 2000).

Carey, Finigan, & Pukstas, in press, found that for a program to have positive outcomes, it is not necessary for the judge to be the sole person who provides sanctions. However, when the judge is the sole provider of sanctions, it may mean that participants are better able to predict when those sanctions might occur, which might be less stressful. Allowing team members to dispense sanctions makes it more likely that sanctions occur in a timely manner, more immediately after the non-compliant behavior. Immediacy of sanctions is related to improved graduation rates.

#### Local Process

Currently, drug court hearings are held every other Friday, following the pre-court team meetings. At these meetings, team members discuss and generally agree upon responses to participant behavior. However, team members have reported that sanctions are handed down more frequently than incentives. Team members agreed that only the judge imposes sanctions.

WCADTC has clearly stated guidelines on what constitutes compliant and non-compliant behavior. Information related to incentives, rewards, and sanctions is addressed in the *WCADTC Policy and Procedures Manual* as well as the *Participant Handbook*. Not all team members felt that sanctions and rewards were handed out in a consistent manner. Team members reported that sanctions are given from 24 hours to 2 weeks after a non-compliant behavior, depending on the gravity of the behavior.

#### Recommendations/Suggestions

- The team needs to take into consideration the appearance of equal treatment for similar infractions and the importance and challenge of communicating the rationale behind decisions regarding

levied sanctions. Because the program attempts to individualize services delivered to participants, different consequences may be handed down for similar behaviors. The program is encouraged to explain this program element during orientation and at the time of each decision. Continuing to provide this information, and reminders, to participants regarding the sanctioning (and reward) process would be beneficial.

- The program should demonstrate its understanding of addiction and, relatedly, the reality of relapse (and associated behaviors) as part of the recovery process by identifying more opportunities to acknowledge progress and offer incentives.

**Key Component #7: Ongoing judicial interaction with each drug court participant is essential.**

*Research Question: Do this court's participants have frequent contact with the judge? What is the nature of this contact?*

National Research

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

Further, research in California and Oregon (Carey et al., 2005; Carey & Finigan, 2003) demonstrated that participants have the most positive outcomes if they attend at least one court session every 2 to 3 weeks in the first phase of their involvement in the program. In addition, programs where judges participated in drug court voluntarily and remained with the program at least 2 years had the most positive participant outcomes. It is rec-

ommended that drug courts not impose fixed terms on judges, as experience and longevity are correlated with cost savings (Carey et al., 2005; Finigan, Carey, & Cox, 2007).

Local Process

Participants in WCADTC have twice monthly interaction with the Judge in Phase I, once or twice per month in Phase 2 and once per month in Phases 3 and 4. Judge Beckstead has presided over the drug court since its inception and is not serving a fixed term. In the courtroom, the Judge acknowledges each participant, inviting the treatment provider, the parole/probation agent and the resource manager to give oral progress reports as each participant approaches the bench. If applicable, the Detention Center representative and/or Goodwill Industries representative will also provide an oral report on participants involved in their programs. Team members report that drug court sessions last from 2.5 to 4 hours and that 20 to 25 participants attend any given session.

The team had only positive comments to make about the Judge's demeanor in court, unanimously agreeing that she possesses the ideal temperament to preside over the drug court. According to team members, she shows appropriate concern for participants, treating each one as an individual while preserving the ability to be an authoritative voice in the courtroom. Regarding this universally held perception, one drug court participant explained, "She treats us all like we mean something in this world."

Recommendations/Suggestions

- Because time is often a scarce resource for drug court team members, as well as participants, it may be prudent for the team to explore how interactions in the courtroom could be more streamlined. Nationally, optimal averages for court interaction are generally 2 to 3 minutes for each participant. In these courts, rather than have team members repeat

their progress reports (which are already provided in the pre-court meeting), drug court judges typically offer a synopsis of each participant's progress as gleaned from the team meeting. Furthermore, once the program's capacity goal is reached, there will be a greater need to streamline the court process.

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

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

National Research

Carey, Finigan, & Pukstas, in press, found that programs with evaluation processes in place had better outcomes. Four types of evaluation processes were found to save the program money with a positive effect on outcome costs: 1) maintaining paper records that are critical to an evaluation, 2) regular reporting of program statistics that lead to modification of drug court operations, 3) modifying drug court operations as a result of program evaluations, and 4) participation of the drug court in more than one evaluation by an independent evaluator. Graduation rates were associated with some of the evaluation processes used. The second and third processes were associated with higher graduation rates, while the first process listed was associated with lower graduation rates.

Local Process

The coordinator for the WCADTC program keeps information on drug court participants, including demographic data, electronically (in an Excel spreadsheet) and in hard copy files. Court and drug testing information is tracked electronically for each participant using the state's Uniform Court System. The parole/probation agent tracks information concerning non-compliant behaviors and sanctions imposed on individual participants. The coordinator tracks drug

testing-related activities using an electronic flow chart. The treatment provider also tracks information regarding alcohol and drug court session attendance, assessment and mental health information using the SMART system. The team was trained to use the SMART system in November 2007 and is in the process of transferring existing participant data into that system.

Recommendations/Suggestions

- Drug court staff members are encouraged to discuss the findings from this process evaluation as a team, to identify areas of potential program adjustment and improvement.
- The program should continue the task of transferring all data into the SMART database so that team members can more conveniently access and input information into a centralized data management system.
- The drug court should keep all prior records for future outcome evaluation purposes, including paper files and electronic records.

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

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

National Research

The Carey, Finigan, & Pukstas, in press, study found the following characteristics of drug court programs to be associated with positive outcome costs and higher graduation rates: 1) requiring all new hires to complete formal training or orientation, 2) ensuring that all team members receive training in preparation for implementation, and 3) providing all drug court team members with training.

It is important that all partner agency representatives understand the key components and best practices of drug courts, and that they are knowledgeable about behavior change, substance abuse, and mental health issues.

### Local Process

All WCADTC team members have attended formal drug court training, with the exception of the newest members—the APD and the resource manager. It is imperative that all drug court team members possess a clear understanding of their particular role in the program and how they can best meet program needs. Involvement in ongoing training is key to drug court success.

In January 2006, the coordinator, parole/probation agent, resource manager and a law enforcement representative attended “Drug Court 101” training. Team members have also attended various winter symposia in Annapolis in 2005, 2006 and 2007. In March 2007, the drug court coordinator attended the “Ensuring Sustainability” training through NDCI. Most of the team attended the National Drug Court Training Conference in June 2007. Finally, the previous APD attended job-specific training in Reno, Nevada, in April 2007.

### Recommendations/Suggestions

- It is advised that the program keep a training log and ensure that new staff members are trained shortly after joining the drug court team and that everyone is participating in ongoing training activities.
- Team members participated in cultural awareness training in Winter 2006. The team should update its knowledge and resources with regard to cultural awareness and responsiveness, to ensure that it is appropriately addressing the needs of its diverse participant population. In order to ensure that services offered through the drug court are culturally

specific/ sensitive, staff members working directly with participants need to have experience with and understanding of the cultural characteristics of the populations being served (e.g., African Americans).

- In order to fully develop a non-adversarial team environment, attorneys are encouraged to attend training specific to the drug court model, seek support from the Maryland Office of Problem-Solving Courts and/or consider mentoring opportunities through another adult drug court program that has been identified as having successfully implemented this key component.

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

*Research Question: Has this court developed effective partnerships across the community?*

### National Research

Responses to American University’s National Drug Court Survey (Cooper, 2000) showed that most drug courts are working closely with community groups to provide support services for their drug court participants. Examples of community resources with which drug courts are connected include self-help groups such as Alcoholics Anonymous and Narcotics Anonymous, medical providers, local education systems, employment services, faith communities, and Chambers of Commerce.

### Local Process

This particular drug court has forged a number of meaningful connections with community organizations. The resource manager maintains a list of organizations available to participants for fulfilling community service hours, including Goodwill Industries, Habi-

tat for Humanity, the local food bank, and area homeless shelters. The program also keeps an active referral list that includes transitional housing, medical services, career development and legal services. Additionally, the drug court has made important connections with the city and county councils, faith-based organizations and local businesses that have donated gifts and services.

Finally, all participants are required to develop a business plan using a community partner, Cans for Humanity. Teams of five participants meet every other week to discuss financial goals, develop timelines and contact area businesses in order to execute their plan. Several team members noted that

one of the most promising practices of the program was the availability of services and the persistence in offering them to participants.

Recommendations/Suggestions

- The program has done an outstanding job of recruiting and engaging community partners. They should continue in this manner by maintaining an ongoing list of common participant need areas, and conduct outreach to new community partners to find ways to creatively meet those needs.



## WICOMICO COUNTY ADULT DRUG TREATMENT COURT: A SYSTEMS FRAMEWORK FOR PROGRAM IMPROVEMENT

**D**rug courts are complex programs designed to deal with some of the most challenging problems that communities face. Drug courts bring together multiple—traditionally adversarial—roles, and stakeholders from different systems with different training, professional language, and approaches. They take on groups of individuals that frequently have serious substance abuse treatment needs.

The challenges and strengths found in the WCADTC can be categorized into community, agency, and program-level issues. By addressing issues at the appropriate level, change is more likely to occur and be sustained. In this section of the report, we provide an analytic framework for the recommendations in the prior section

### COMMUNITY LEVEL

Adults with substance abuse issues who are also involved in the criminal justice system must be seen within an ecological context; that is, within the environment that has contributed to their self-destructive attitudes and behaviors. This coercive environment includes the neighborhoods in which they live, their family members and friends, and the formal or informal economies through which they support themselves. In an effort to better address the needs of these individuals, then, it is important to understand the various social, economic and cultural factors that affect them.

Social service and criminal justice systems are designed to respond to community needs. To be most effective, it is important that these systems clearly understand the components and scope of those needs. System partners must analyze and agree on the specific problems to be solved, as well as what the contributing factors are, who is

most affected, and what strategies are likely to be most successful when addressing the problem. A formal/informal needs analysis will help to define what programs and services should look like, who the stakeholders are, and what role each will play.

### *Summary of Community-Level Recommendations*

WCADTC should continue to maintain and develop community resources as they relate to the most common participant needs. The program should examine the underlying causes for the overrepresentation of African Americans in the program.

### AGENCY LEVEL

Once community and participant needs are clearly defined and the stakeholders identified, the next step is to organize and apply resources to meet the needs. No social service agency or system can solve complicated community problems alone. Social issues—compounded by community-level factors, such as unemployment, poverty, substance abuse, and limited education—can only be effectively addressed by agencies working together to solve problems holistically. Each agency has resources of staff time and expertise to contribute. At this level, partner agencies must come together in a common understanding of each other's roles and contributions. They must each make a commitment to their common goals.

This level of analysis is a place to be strategic, engage partners and advocates, leverage resources, establish communication systems (both with each other and with external stakeholders, including funders), and create review and feedback loop systems for program monitoring and quality improvement activities. Discussions at this level can soli-

dify a process for establishing workable structures for programs and services, as well as identify key individuals who will have ongoing relationships with the program and with other participating agencies and key stakeholders.

#### *Summary of Agency-Level Recommendations*

The WCADTC's relationship with local law enforcement is exceptional and should be maintained. Ensure that caseloads are manageable and that parole/ probation agents are able to balance their drug court caseload with their non-drug court caseload. The program should look into the reasons behind turnover in the Office of the Public Defender in an effort to increase team cohesiveness and key stakeholder buy-in. The program should ensure that all drug court services are culturally appropriate, especially given the racial/ethnic composition of WCADTC's participant population. A mandatory after-care plan that offers support to participants as they transition back into the community should be implemented by the drug court.

#### **PROGRAM LEVEL**

Once a common understanding of need exists and partner agencies and associated re-

sources are at the table, programs and services can be developed or adjusted as needed to ensure that the program is meeting the identified needs and utilizing public funds as efficiently and effectively as possible. Program policies and procedures should be reviewed to ensure that they create a set of daily operations that works best for the community.

#### *Summary of Program-Level Recommendations*

The program should consider accepting pre-plea individuals into the program to reduce the timeframe from the actual violation to receipt of critical services (through the program). A history of behavioral problems should not automatically disqualify a person from participation in the program, but should be seen as an opportunity to positively engage those who would benefit from the enhanced structure of drug court, ultimately benefitting the community. Team members should identify additional opportunities to acknowledge participant progress and offer incentives while relying less on the levying of sanctions to control behavior.

## SUMMARY AND CONCLUSIONS

The Wicomico County Adult Drug Treatment Court seems to possess a thorough understanding of the 10 key components and has been successful at implementing their drug court program.

Some particular findings (also included in the 10 key components summary) are:

### Unique and/or Promising Practices:

- Extraordinary support and involvement of law enforcement
- Cultivation of a vast network of community partners and resources
- Longstanding involvement by a judge who is appreciated universally by team members and participants
- Frequent (i.e., monthly) policy meetings
- Separate eligibility meetings comprised of law enforcement representatives and attorneys
- Resource manager on the team who is responsible for identifying financial management resources for participants
- Strong community service component, including monitoring and community partners
- Individualized sanctions and rewards
- Effective support from community leaders despite lack of steering committee meetings
- Beyond the Limits - a program promoting partnership between team members and participants
- Participants who have gone through the Residential Substance Abuse Treatment (RSAT) program are placed in a more advanced point of the program (i.e., a later phase) when they begin

### Policy changes implemented by the drug court team:

- More frequent, monthly policy meetings
- Eligibility meetings to promote objectivity
- Implementation of District Court Drug Court should have a positive impact on arrest to referral time for WCADTC
- Drug testing is now conducted only by parole/probation and corrections and not with the treatment provider
- RSAT graduates are not placed in the drug court program at the same starting point as other participants

### Areas that could benefit from more attention:

- Lack of mandatory aftercare treatment
- Barriers to reaching program capacity goal of 50 participants
- Use of incentives versus sanctions
- High proportion of African American participants
- Reasons behind high failure rate
- Staff turnover implications
- Relationship between attorneys
- Case manager caseload
- Total time spent in drug court hearings
- Incorporation of pre-plea cases
- Accepting individuals with undesirable behavioral issues
- Appearance of individualized treatment (i.e., sanctions and incentives)



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**APPENDIX A: DRUG COURT TYPOLOGY  
INTERVIEW GUIDE TOPICS**



## **Drug Court Typology Interview Guide Topics**

The topic/subject areas in the Typology Interview Guide were chosen from three main sources: the evaluation team's extensive experience with drug courts, the American University Drug Court Survey, and a paper by Longshore et al. (2001), which lays out a conceptual framework for drug courts. The typology interview covers a number of areas—including specific drug court characteristics, structural components, processes, and organizational characteristics—that contribute to a more comprehensive understanding of the drug court being evaluated. Topics in the Typology Interview Guide also include questions related to eligibility guidelines, specific drug court program processes (e.g., phases, treatment providers, urinalyses, fee structure, re-wards/sanctions), graduation, aftercare, termination, non-drug court processes (e.g., regular probation), identification of drug court team members and their roles, and a description of drug court participants (e.g., general demographics, drugs of use).

Although the typology guide is modified slightly to fit the context, process and type of each drug court (e.g., juvenile courts, adult courts), a copy of the generic drug court typology guide can be found at <http://www.npcresearch.com/materials.php> (see Drug Court Materials section).



## **APPENDIX B: FOCUS GROUP RESULTS SUMMARY**



## **Focus Group Summary**

As described in the methodology section of this report, NPC conducted one focus group in the offices of the Wicomico County Adult Drug Treatment Court in September 2007. The group was comprised of three current participants in the program. The focus group provided current participants with an opportunity to share their experiences and perceptions regarding the drug court process.

The topics discussed during the interviews and focus groups included how participants made the decision to enroll in drug court, what participants liked about the drug court program, what they disliked, general feelings about the program, community and educational services, and recommendations they have for the program.

### **What they liked/what worked**

- It has helped me stay clean. I have been clean now for 1 year and 3 months.
- I like the classes at the treatment program. I learned a lot that I did not know about using drugs.
- The support that we receive from the staff helps me to stay focused.
- I needed some structure in my life and drug court makes you have structure.
- Drug court has forced me to be accountable for my time and my actions. That has benefited me in the long run.
- I have a better relationship with my family because I am in drug court.

### **What they didn't like**

- I disliked having to go to the Annex at the jail to leave urine specimens for testing. I had to do this on the weekend and I did not have anyone to keep my children.
- I did not like having a curfew. It should at least be later; we are adults.
- The curfew and the police checks at my house cause neighbors to be suspicious of you.
- Sometimes it is hard making all of the appointments and sessions.
- I don't know of any obstacles. Only you can make your own obstacles by not doing what you are suppose to do.

### **Why they decided to participate in drug court**

- I did drug court instead of having to do 5 years in jail.

- I originally did drug court for my daughter. I knew she needed me. But now, it is for me. I see how it is changing me for the better.
- My family was worried about me, and everybody thought I should do drug court.

### **Family participation in drug court**

- My family is supportive of me being in drug court.
- Yea, my family is real happy that I am doing better for myself.
- My family feels that the schedule is hard and it makes it difficult to manage your time.

### **Community and educational support**

- They have all kinds of stuff you can do if you want to. Like the Goodwill classes.
- They will even help you to take college classes. I know someone doing that.
- You can definitely get your GED while you are here. All you have to do is ask.

### **Other comments**

- I want to stay clean and get a better job. Just continue improving my life.
- I want to keep becoming a better person and help some of the new people coming into the program
- It is a piece of cake, as long as you do what you are supposed to.
- Judge Beckstead is always nice and fair. You better believe that if you get a sanction, it is because you deserve it.

### **Recommendations**

- Asking for more input from the clients would make it even better. Being open to suggestions from us could help them come up with new ideas.
- Transportation would help. I know a lot of people who have trouble getting here because they do not have a car.