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Executive Summary

Despite the inherent challenges associated with a 5-month return to restricted Judicial operations due to COVID-19 in Fiscal Year 2021, Maryland problem-solving court teams continued to uphold the mission of the Judiciary: to provide fair, efficient, and effective justice for all. Throughout all levels of operation, problem-solving court teams remained steadfast in their efforts to provide critical services to some of the most vulnerable individuals in our state. Equipped with innovations and strategies implemented during the first wave of COVID-19, and aided by a newfound awareness of pandemic-related increases in substance use, suicide risk, and negative mental and physical health effects; Maryland problem-solving court teams effectively anticipated and targeted responsivity to meet increased treatment needs. Even today, as the health emergency has been brought under relative control in Maryland, the tribulations of the earlier days of the pandemic continue to strongly impact many served by problem-solving courts.

Moreover, problem-solving courts continue to be the most intensive, community-based programs available to address aberrant behavior associated with substance use disorder and mental illnesses. During Fiscal Year 2021, 3,289 individuals participated in Maryland’s problem-solving courts. Judges and magistrates met with those program participants nearly 22,450 times in scheduled court hearings.

At the end of Fiscal Year 2021, there were 59 problem-solving courts in Maryland: 35 drug courts, eight truancy reduction courts, seven veterans’ courts, seven mental health courts, one re-entry court, and one Back-On-Track program.

Problem-solving courts vary considerably by jurisdiction and case type. However, all focus on collaborating with the service communities in their jurisdictions and stress a multidisciplinary, problem-solving approach to address the underlying issues of individuals appearing in court.

Using its Fiscal Year 2021 appropriation, the Judiciary provided nearly $7 million in grants to support problem-solving courts in circuit and District Court locations. These funds were used for staffing, treatment, drug testing, travel and training, remote court needs, and ancillary services that directly benefit court participants.

The Judiciary continues to provide direct assistance to both planned and operational programs to support continued positive outcomes and sustainability. Because of the COVID-19 health emergency, training and education for problem-solving court practitioners has continued through remote platforms and has been specific to the unique needs of the rapidly changing situation. The Judiciary continues to set high expectations for monitoring and evaluating problem-solving courts to maintain best practices.
Oversight

Administrative Office of the Court’s (AOC) Office of Problem-Solving Courts

The Office of Problem-Solving Courts (OPSC) assists problem-solving court programs to develop, maintain, and advance a collaborative therapeutic system on behalf of the Maryland Judiciary. OPSC has overseen the creation of problem-solving courts in 22 of the 24 jurisdictions in Maryland and works with public and private stakeholders to develop and establish best practices in problem-solving courts.

OPSC oversees the financial support for Maryland’s problem-solving courts, enforces programmatic guidelines, maintains a statewide management information system, and identifies new and expanding populations for problem-solving courts. Working with justice partners, OPSC continues to serve as the courts’ liaison to sustain and advance problem-solving courts in Maryland.

Direct Assistance

OPSC provides direct assistance, expertise, and guidance to court programs, helping them to improve operations, client services, and team communication. Problem-solving court teams may address protocol development, ancillary services, treatment service/types, funding opportunities, court proceedings, and role clarification through this assistance. Teams also discuss and devise plans to institute new research and evidence-based practices into their current operations.

Direct assistance to Maryland’s problem-solving courts includes guidance to improve drug testing policies, enhance sanction and incentive responses, rework and expand program entrance criteria, develop therapeutic responses to relapse, and understand the roles and responsibilities of each team member. The teams also review staffing processes and court proceedings to help their programs operate more efficiently, effectively, and consistently.

Monitoring and Evaluation

The Statewide Maryland Automated Record Tracking (SMART) system is a web-based data management system that allows the collection and standardization of data related to problem-solving court outcomes. SMART provides problem-solving court team members with direct access to information needed for making informed decisions about participants and the court. SMART is a multi-purpose tool used for identifying and prioritizing participant needs, developing knowledge about services available across agencies, and obtaining immediate access to information about participant status. In addition, individual problem-solving courts use SMART data to generate presentations for local community and oversight boards, to report mandated data to state or federal stakeholders, to provide outcome information and continuous quality improvement activities to accrediting bodies, and to evaluate program and service effectiveness.

In Fiscal Year 2021, OPSC staff had 809 face-to-face or virtual contacts with programs in the field ranging from attending events such as graduations, completing programmatic site visits, attending program staffing and court hearings, and completing financial (grant) visits.

Maryland’s problem-solving court judges met with participants 22,432 times in court hearings during FY 2021.
Through an agreement with the University of Maryland’s Institute for Governmental Services and Research (IGSR), problem-solving court programs across Maryland are supported in maintaining their data. In addition to responding to thousands of technical assistance and training questions, IGSR’s project team developed a SMART Case Management training curriculum for all problem-solving court case managers. IGSR also modified several components of SMART to better capture data relating to the Adult Drug Court Performance Measures as well as participant employment and education.

**Research in Action**

In Fiscal Year 2021, as part of OPSC’s continued collaboration with the AOC’s Research and Analysis (R&A) department, and in recognition of the growing importance of research-based data collection and its uses for measuring and improving the performance and outcomes of treatment courts, the Judiciary established a senior researcher position dedicated exclusively to problem-solving courts. The problem-solving court researcher (PSC senior researcher) is overseen by the Research and Analysis director with guidance provided by the OPSC director.

Leveraging Research to Provide Technical Assistance

In contemplating the PSC senior researcher role, a key priority for OPSC and R&A was to leverage existing OPSC evaluations and research as a means to provide support and technical assistance for Maryland’s problem-solving court programs as they pursue performance measure implementation and improved adherence to national best practice standards. Over the past five years, OPSC, in partnership with R&A, and through contracts with external research service providers, have developed and adopted adult drug and mental health court performance measures and are nearing the completion of an adult drug court cost-benefit recidivism study. As part of the current cost-benefit study, Maryland’s adult drug courts were evaluated for adherence to more than 70 best practice standards. The results of this research, provided to OPSC in the spring of 2021, assessed best practice adherence to each standard for each Maryland adult drug court, and they indicated many areas of strength and improvement.

Prior to the addition of a PSC senior researcher, best practice evaluations represented a report card, a point-in-time evaluation, rather than an action plan. With the support and expertise provided by the PSC senior researcher, the data and findings from the adult drug court best practice evaluation were operationalized to create active monitoring and evaluation data tools for use by OPSC program managers in their work to identify and prioritize program-specific areas of strength and needed improvement (Figure 1). Transforming “research into action”, OPSC program managers are now using these data tools to set goals and create action plans; increase collaboration and communication with
their problem-solving court teams; and facilitate knowledge sharing between programs. Most importantly, these tools, and the collaborations they are inspiring, are helping programs to understand how data can be a powerful instrument in identifying how to make their programs better for the people they serve; which means more people overcoming addiction and more lives changing for the better.

**Adult Drug Court Performance Measure Implementation**

Also, in Fiscal Year 2021, to facilitate the implementation of Adult Drug Court Performance Measure 6, Procedural Justice, the PSC senior researcher collaborated with adult drug courts to facilitate the collection and analysis of participant survey data. The surveys, which utilize a Likert scale\(^1\), are designed to assess participants’ perceptions of fairness based on their interactions with critical members of the drug court team with whom the participant has substantial ongoing interaction. The surveys have so far been administered to participants in Frederick, Wicomico, and Carroll County adult circuit drug courts. An analysis of survey results was provided to teams and utilized graphs and tables to highlight areas where perceptions of fairness were strong and where improvement was indicated (Figure 2). Following the distribution of survey results, presentations were provided to the teams to help facilitate a discussion about this performance measure.

**Monitoring Emerging Research Opportunities**

The PSC senior researcher also provides project coordination and management for external research evaluations and studies and reviews emerging research in the field for practical application in Maryland’s problem-solving court programs. This year, the problem-solving court researcher has provided project management and coordination for an adult drug court cost-benefit study and mental health court performance measure implementation technical assistance and training. Regarding emerging research, an evidence-based data tool used to measure race and gender equity and inclusion in treatment courts was tested and reviewed for potential application in adult drug, mental health, and veterans courts.

In the year ahead, the problem-solving court senior researcher will spend some time in the field with program managers and their teams to identify technical assistance needs with the goal of improving data collection, best practice adherence, and performance measure monitoring in Maryland’s adult drug and mental health courts.

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\(^1\) A Likert scale is a type of psychometric response scale in which responders specify their level of agreement to a statement typically in five points: (1) Strongly disagree; (2) Disagree; (3) Neither agree nor disagree; (4) Agree; (5) Strongly agree. Springer Link, [https://link.springer.com/referenceworkentry/10.1007%2F978-0-387-78665-0_6363](https://link.springer.com/referenceworkentry/10.1007%2F978-0-387-78665-0_6363)
COVID-19’s Second Wave: Ready to Respond, Lessons Learned

Lessons Learned
When the second wave of the COVID-19 public health emergency hit in early November of 2020, after a brief period of unrestricted operations, problem-solving court teams were prepared and ready to respond. Having developed strategies to deliver remote treatment, case management and supervisory services during the first wave of the pandemic, teams quickly pivoted, this time keenly aware, and ready to respond to, the many added challenges problem-solving court participants were facing in the context of the pandemic.

Maryland’s problem-solving courts were some of the first court programs to operate remotely during the pandemic. Within days of courthouse closures, court functions such as meetings, hearings, case management, telehealth services, and court supervision were operating remotely with tremendous success. Maintaining close contact with program participants assures a higher degree of successful outcomes for participants and their families. Despite the hardships caused by the pandemic, the Maryland Judiciary was able to keep courts operating smoothly and saw many successful outcomes. In fact, for mental health courts, virtual status hearings and other contacts that would have normally occurred face-to-face, actually proved to be more beneficial in a virtual space. This is because in-person status hearings often involve transporting participants from treatment facilities to courthouses, a process which for many can trigger former traumas and interrupt treatment. With virtual status hearings, mental health court participants in treatment facilities were able to attend status hearings with little additional impact on their mental health.

Ever important during the pandemic was to continue to find meaningful ways to recognize drug court graduates and celebrate their tremendous accomplishments. Drug court teams used a variety of approaches using remote technology or appropriately social-distance formats. Judge Powell of Somerset County Circuit Adult Drug Court used a combination of social-distanced and virtual graduation ceremonies so that teams could be together to honor graduates (Figure 3).

Judge Fred S. Hecker, Administrative Judge for the Carroll County Circuit Court, and presiding Judge over the Adult Drug Treatment Court, created virtual graduation ceremony formats using PowerPoint and Zoom, and when the weather cooperated, held ceremonies outside during the pandemic (Figure 4).
In Program Deaths
Despite many successes and the continued efforts by problem-solving court teams to overcome pandemic-related treatment and case management limitations, program coordinators reported 28 deaths in Fiscal Year 2021. Nearly 40%, (11) of those deaths occurred from October 2020 through January of 2021, during the peak of the second wave of the pandemic. Although the exact cause of these deaths is not known to the Judiciary, there is little doubt that the extreme vulnerability of this population intensified significantly during the worst months of the pandemic. For many participants, problem-solving courts represented their sole lifeline, the one constant which they could rely upon, and their reason for continuing to have hope. With this knowledge, the Judiciary remains evermore committed in its support for problem-solving courts and their mission to provide life-changing treatment services to those in need, no matter what the obstacle; no matter what the challenge.

New Problem-Solving Courts in Fiscal Year 2021
Maryland Rule 16-207 provides a formal process for problem-solving courts to become operational and be recognized as such by the Court of Appeals. Applicants are expected to provide a completed application and any supporting materials to provide the most accurate detail of the proposed problem-solving court.

The prospective problem-solving court leadership confers with OPSC and each state, local, or federal agency or official whose participation in the program will be required under the plan. Examples of officials to be consulted, depending on the nature of the proposed program, include, but are not limited to the Office of the State's Attorney, Office of the Public Defender; Department of Juvenile Services; health, addiction, and education agencies; the Department of Parole and Probation; and the Department of Human Services.
The Judicial Council’s Specialty Courts and Dockets Committee reviews the application to:

- Determine whether the program is comprehensible;
- Identify potential program weaknesses or areas of concern; and
- Determine whether the application has adequate facilities, staff, and management capacity.

The Committee may request clarification and offer recommendations or corrections as necessary.

In Fiscal Year 2021, the Court of Appeals, under Maryland Rule 16-207, and with the recommendation from the Judicial Council’s Specialty Courts and Dockets Committee, approved two new adult drug courts: Baltimore County Circuit, and Baltimore County District Adult Drug Courts. Both of Baltimore County’s new adult drug courts are a result of funding provided through The HOPE Act, a multi-agency emergency bill that consolidated several funding and policy provisions intended to respond to the opioid crisis in Maryland, including the expansion and enhancement of Maryland drug courts. The Hope Act was signed into law by Governor Hogan in May of 2017. Baltimore County’s new adult drug courts will offer defendants with substance use disorders an opportunity to obtain an array of services, from evaluations to a judicially supervised treatment plan. Participants obtain a positive criminal disposition and aftercare/support plan upon successful program completion.

Figure 5: Operational Problem-Solving Courts in Maryland
Funding

Over the past several years, the Judiciary has recognized and responded to state budget trends by accessing resources from federal, state, and local partners to sustain programs. State agencies with common missions often join to fund and support problem-solving courts. In September 2020, the Baltimore City Family Recovery Program celebrated the groundbreaking of five new townhomes that will serve as affordable long-term housing solution for families progressing through the program (Figure 6). Financing for these new townhomes leveraged public and private funds including the Episcopal Housing Corporation, the Maryland Department of Social Services and the Maryland Department of Housing and Community Development.

The Judiciary also continues to collaborate with state partners such as, the Behavioral Health Administration (BHA), Department of Public Safety and Correctional Services (DPSCS), Maryland Highway Safety Administration (MDOT, SHA), and Governor's Office of Crime Control & Prevention (GOCCP) to maximize access to existing resources.

**HOPE Act**

In addition to providing for the establishment of new adult drug courts in Baltimore County, The HOPE Act’s funding provisions paved the way for existing drug courts to enhance and increase the reach of their programs “in a manner sufficient to meet each county’s needs,” through the disbursement of grants based on the population of each county.

In order to expand services and reach more individuals affected by the opioid epidemic, over the last three years, the Judiciary has led local drug courts to consider changing or eliminating specific offense or offender disqualifications utilized to screen eligibility of potential drug court participants. National research indicates that drug using offenders considered to be high-risk according to the criminological Risk and Need Principle paradigm are also some of the most successful in terms of drug court program graduation and in contributing to the beneficial societal effects of drug courts such as reduction in crime and substance abuse, improved family relationships, and earning potential.²

Prior to this, many of Maryland’s drug court eligibility guidelines included several offenses that disqualify drug using offenders from being referred to drug court programs. In many programs, these disqualifying offenses are also applied to an individual’s criminal history, so even in instances where the current offense does not disqualify an individual from being referred to a drug court program, they were disqualified due to their criminal history.

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² Marlowe, Douglas B. J.D., Ph.D. Research Update on Adult Drug Courts. December 2010
By expanding the drug court eligibility criteria, more individuals with substance use disorder will have access to treatment and expanded services such as drug testing (higher costs for fentanyl and carfentanyl), transportation, housing, case management, and other ancillary services.

**Problem-Solving Court Grants and Budget Requests**

In Fiscal Year 2021, the Judiciary solicited grant applications from circuit courts and budget requests from District Court programs to support and maintain the capacity of existing and planned problem-solving courts across Maryland. The Problem-Solving Court Discretionary Grant and Problem-Solving Court Budget Request processes address staffing needs within the Judiciary and collaborating agencies, provide support for needed ancillary services, cover critically needed drug and alcohol testing costs, support trainings, and fund services that are deemed non-reimbursable by managed care. See Table 1 for a list of problem-solving court grant and budget requests funded by the Maryland Judiciary.

Table 1: Problem-Solving Court Grant/Budget Request Awards Fiscal Year 2021

<table>
<thead>
<tr>
<th>Problem-Solving Court Jurisdiction</th>
<th>OPSC Grant/Budget Request Awards FY 2021</th>
<th>Total by County</th>
</tr>
</thead>
<tbody>
<tr>
<td>Allegany Circuit Court</td>
<td>$202,169.00</td>
<td>$202,169.00</td>
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<tr>
<td>Anne Arundel Circuit Court</td>
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<td>Anne Arundel District Court</td>
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<tr>
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<td>Problem-Solving Court Jurisdiction</td>
<td>OPSC Grant/Budget Request Awards</td>
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<td>Montgomery Circuit Court</td>
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<td><strong>TOTAL</strong></td>
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<td><strong>$6,827,906.32</strong></td>
</tr>
</tbody>
</table>

**Behavioral Health Administration (BHA) Grant for Non-Reimbursable Services**

In Fiscal Year 2021, BHA provided $1 million and the Judiciary provided $800,000 for a total of $1.8 million in combined resources to provide drug court grant awards allowing local drug court treatment providers to purchase non-reimbursable services delivered in ambulatory treatment settings. Jurisdictions used these funds for service providers’ time spent in court on behalf of the client such as at status hearings, pre-court meetings, and case consultation meetings with drug court personnel; non-reimbursable clinical case management associated with substance use disorder treatment services; correspondence with court officials on behalf of participants; and transportation as needed for substance use disorder treatment.

**Training and Education**

Professional development among problem-solving courts remains a priority for the Judiciary. On an annual basis, Judiciary staff and the Judicial Council’s Specialty Courts and Dockets Committee plan and fulfill pre-implementation trainings, continuing education workshops, and tutorials for new staff to stay up on today’s best practices in problem-solving courts. Having a well-trained team means learning new skills that can improve outcomes, reduce mistakes, build confidence in your team, and create a better working environment.
In Fiscal Year 2021, OPSC hosted monthly “Lunch & Learn” virtual sessions to better accommodate court schedules and minimize service delivery disruptions. These virtual trainings sessions also provided access to training and education that normally would have occurred during OPSC’s Annual Problem-Solving Court Symposium, cancelled due to COVID safety restrictions. OPSC’s Lunch & Learn series filled the void for hundreds of problem-solving courts practitioners across Maryland and reflected topics relevant to all of OPSC problem-solving courts, including, “Equity and Inclusion in Problem-Solving Courts”, “Conflict Resolution in Problem-Solving Courts”, “Dispelling Drug Testing Myths”, and “Trauma Informed Courts (Figure 7).”

**Mental Health Court Performance Measure Implementation Training**

In July of 2018, the Maryland Judiciary contracted with the National Center for State Courts (NCSC) to create Mental Health Court Performance Measures. The performance measures were developed through a series of visits to mental health courts in Maryland to gather data and engage mental health court programs in the creation of performance measures. In 2019, the Mental Health Performance Measures were formally adopted.

Mental Health Performance Measures are used to gauge the efficacy of current policies and highlight any areas that may benefit from a change. They also give courts the ability to examine the effects of newly implemented policies to determine if they are functioning as intended or if further revision is needed. Performance measurement is also important because mental health courts compete for resources with other facets of the criminal justice system. Mental health courts must demonstrate that the limited resources provided to them are used efficiently and that this expenditure of resources produces the desired outcomes for participants. To this end, mental health court performance measures permit stakeholders to demonstrate that: (1) participants are identified and linked to services in a timely manner; (2) participation improves the capability of participants to function effectively in society; (3) recidivism is reduced; and (4) participants have access to resources in the community to maintain their mental health stability after their program participation ends.

![Figure 7: Vanessa Price, Director, National Drug Court Institute leads an “Equity and Inclusion in Problem-Solving Courts” Lunch and Learn virtual training session.](image)
The final component to the performance management system is to provide a comprehensive training to mental health court teams on how to use the performance measure framework to assess performance and make any necessary modifications. Following a nearly 12-month delay caused by COVID-19 restrictions, in May of 2021, NCSC, in collaboration with the Maryland Judiciary, provided a court-based virtual training using realistic scenarios that represent performance issues and challenges frequently encountered by mental health courts (Figure 8). These scenarios also demonstrated how performance measures can be used to address an issue. The training was provided in 4-hour segments over three Fridays in May to all mental health court teams members including judges, court administration, community-based treatment providers, and staff from local state’s attorney’s offices and the Office of the Public Defender, parole and probation, and local law enforcement. All participants left the training with a framework for mental health court performance measure implementation.

Figure 8: Mental Health Court Performance Measure Virtual Training, May 2021
Drug Courts

Drug courts constitute a Judiciary-led, coordinated system that demands accountability of staff and court participants and provides immediate, intensive, and comprehensive drug treatment, supervision, and support services using a variety of incentives and sanctions to encourage participant compliance. Drug courts represent the coordinated efforts of criminal justice, behavioral health, and social service agencies, along with treatment communities that actively intervene in, and break the cycle of substance abuse, addiction, and crime. As an alternative to less effective interventions, such as incarceration or general probation, drug courts quickly identify substance-abusing offenders and place them under strict court monitoring and community supervision coupled with effective, individually assessed treatment, and ancillary services. Table 2 provides a comprehensive list and key statistics of all Maryland adult, family, and juvenile drug courts, and DUI courts.

Table 2: Drug Court Statistical Summary

<table>
<thead>
<tr>
<th>County</th>
<th>Location</th>
<th>Type of Program</th>
<th>Year Est.</th>
<th>Entered Program</th>
<th>Graduated</th>
<th>Neutral*</th>
<th>Terminated</th>
<th>Total Served in FY 2021</th>
</tr>
</thead>
<tbody>
<tr>
<td>Allegany</td>
<td>Circuit</td>
<td>Adult</td>
<td>Jun-18</td>
<td>15</td>
<td>7</td>
<td>2</td>
<td>4</td>
<td>48</td>
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<tr>
<td>Anne Arundel</td>
<td>Circuit</td>
<td>Adult</td>
<td>Dec-05</td>
<td>32</td>
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<td>0</td>
<td>22</td>
<td>121</td>
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<td>Anne Arundel</td>
<td>District</td>
<td>Adult DUI</td>
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<td>21</td>
<td>250</td>
</tr>
<tr>
<td>Baltimore City</td>
<td>Circuit</td>
<td>Adult</td>
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<td>25</td>
<td>27</td>
<td>5</td>
<td>1</td>
<td>143</td>
</tr>
<tr>
<td>Baltimore City</td>
<td>Circuit</td>
<td>Family</td>
<td>Aug-05</td>
<td>47</td>
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<td>Adult</td>
<td>Aug-07</td>
<td>6</td>
<td>3</td>
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<td>6</td>
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<td>501</td>
<td>359</td>
<td>50</td>
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<td>1,752</td>
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*Neutral is defined as administratively discharged during the reporting period (e.g., death, probation expired, movedjurisdictions).
**Adult Drug Court Performance Measures**

The Maryland Adult Drug Court Performance Measures report, completed by NCSC in September 2017, documents the performance measures selected for Maryland adult drug courts. The Ten Key Components of Drug Courts (National Association of Drug Court Professionals: NADCP, 1997) and the Adult Drug Court Best Practice Standards (NADCP, 2013; 2015) provide the basis for the NCSC model. Based on these NADCP Best Practices and the overall goal of reducing recidivism, NCSC recommended 10 supporting objectives for Maryland’s adult drug courts (see Appendix C). These objectives guided NCSC’s development of the adult drug court performance measures. Each recommended performance measure includes a benchmark that sets a quantitative goal to inform courts about their current performance, and over time can be used to measure their progress (see Appendix D for a full list of all 24 performance measures).

Full implementation of a performance management system and all performance objectives, measures, and benchmarks is heavily reliant upon the regular collection and input of data in the SMART system, a web-based tool created by IGSR that provides consent-driven tracking and analysis of drug court program and participant data. Due to this requirement, some benchmarks, and their corresponding measures will need to be implemented in stages to accommodate the collection of new data elements necessary to measure performance.

Full implementation will occur in three tiers and on a rolling basis as relationships and data collection systems are established: (1) benchmarks implemented for measures and data collection already in place; (2) benchmarks implemented for measures following the data collection of new court data; and (3) benchmarks implemented for measures following the establishment of data collection and sharing by entities outside of the court system.

**Implementation Status by Tier**

**Tier 1: Implementation of measures from data collection already in place**

Although SMART data collection for performance measures has been in place for several years, implementation of these measures requires the accurate application of the data to the NCSC performance measurement tool. In March 2019, drug court coordinators and their teams were trained to use the new SMART system performance measure reporting and data-capture capabilities as part of the NCSC performance measure implementation training. To ensure that performance metrics are accurate, continuous data quality review and oversight will be ongoing throughout the implementation of all Tier 1 measures. Of note, over the past year, drug courts implemented the following new performance measures and benchmarks through the application of currently collected (existing) data:

- **Processing Time Measures and Benchmarks:** Time from Arrest to First Treatment (measure 3) and Time from Referral to First Treatment Episode (measure 4).
- **Social Functioning Measures and Benchmarks:** Quality of Residency Status (measure 15) and Employment and Education Status (measure 17).
- **Sanction and Incentives Measures and Benchmarks:** Sanctions (measure 8); Incentives (measure 9); Ratios of Incentives to Sanctions (measure 10) and; Response Time to Negative Behavior (measure 11)

Since launching SMART in 2003, adult drug courts have routinely collected the following data elements to measure areas of program performance: (1) status hearing measures (number of hearings attended); (2) sanctions and incentive measures (average number of
sanctions and incentives administered across participants); (3) program retention measures (percentage of participants admitted who have successfully completed the program); (4) dosage measures (length of time in program); (5) drug testing and sobriety measures (number of drug and alcohol tests, and percent positive); (6) in-program reoffending measures (the percentage of participants who have a case filed for a new jail-eligible offense while in the program) and; (7) processing time measures (time from arrest to referral and time from referral to first treatment episode).

**Tier 2: Implementation of benchmarks and measures following the data collection of new court data**

**Procedural Fairness (measure 6):** In order to implement the procedural fairness measure, the Judiciary developed a survey that elicits feedback from drug court participants about their experiences related to access and fairness during their time in the program. In January 2020, the Judiciary trained all drug court coordinators to implement this measure and piloted the survey in Wicomico and Frederick adult circuit drug courts. Following the successful administration of the Access and Fairness Survey to drug court participants in both pilot courts, Judiciary staff summarized and packaged survey results with data visualizations for program teams to review and evaluate performance using the measure’s benchmark. Implementation of this performance measure will be rolled out in all drug courts as the Judiciary enters Phase IV of reopening under the COVID-19 emergency court operational environment in Fiscal Year 2021.

**Target Population (measure 1):** Facilitation of data collection for this measure is a priority for the Judiciary. As outlined in NCSC’s report, the objective of this measure is to target high risk, high need populations, with a benchmark of achieving 100% target population admissions. To enable drug courts to meet this benchmark, NCSC recommends the application of a validated risk-need assessment tool for use in identifying this population. Per this recommendation, the Judiciary has provided grant funding to drug courts to procure and implement a validated risk-needs assessment tool with about half of Maryland’s drug courts currently using the tool. The Judiciary anticipates remaining drug courts will procure and begin using an assessment tool over the next 18 months.

**Tier 3: Implementation of benchmarks following the establishment of data collection and sharing by entities outside of the court system**

There are several additional new data requirements specific to the implementation of NCSC performance measures that necessitate the sharing and collection of data by entities outside of the court system. Progress in the implementation of new data collection currently held by entities outside of the courts (Tier 3).

**Technical Assistance for Adult Drug Courts**

The Judiciary secured technical assistance from NCSC to support courts in continuing their implementation of the drug court performance measures. Technical assistance will focus on courts that are having difficulty implementing the performance measure standards as well as those that meet most standards but are seeking support in fully implementing others. In the coming year, OPSC and NCSC will engage drug court teams through remote meetings and webinars on the use of the goals and benchmarks, and to identify obstacles facing specific courts. These webinars will allow OPSC and NCSC to better target specific courts for follow-up. Following these sessions, OPSC and NCSC will be conducting multi-site virtual meetings to allow adult drug courts facing similar issues (e.g., data collection efforts, implementation, and management considerations regarding specific measures, interpreting results) to develop
best practice ideas. From this multi-site collaboration, coordinators and teams will have the ability to continuously make necessary adjustments in process, resource allocation, and other operational elements to move towards meeting performance benchmarks and improving outcomes. Further, the Judiciary is partnering with NCSC to develop a guidebook to accompany the drug court performance measures training manual. This guidebook will include standards for implementation of performance measures, all performance measures tools and materials, and practical lessons that highlight real-world obstacles in drug court performance measurement and how to overcome them.

**Mental Health Courts**

In Maryland, as in other states, those with mental health are increasingly becoming involved in the criminal justice system. Mental health courts were established in response to the increased numbers of individuals with mental health disorders found caught in the revolving door of the criminal justice system. See Table 3 for a comprehensive list and basic information of all mental health courts.

A mental health court is a specialized court docket established for defendants with a primary mental health diagnosis. A problem-solving approach substitutes for the traditional adversarial criminal court process. Participants are identified through mental health screenings and assessments, and they voluntarily participate in a judicially supervised treatment plan developed jointly by a team of court staff and mental health professionals. The overarching goal of the mental health court is to decrease the frequency of participants’ contact with the criminal justice system by providing judicial oversight to improve their social functioning with respect to employment, housing, treatment, and support services in the community.

Mental health courts rely on individualized treatment plans and ongoing judicial monitoring to address mental health needs and public safety concerns. These courts also seek to address the underlying problems that contribute to criminal behavior and the overall recidivism rate of this population.
Table 3: Mental Health Court Statistical Summary

Mental Health Court Statistical Summary
July 1, 2020- June 30 2021

<table>
<thead>
<tr>
<th>County</th>
<th>Location</th>
<th>Year Est.</th>
<th>Entered Program</th>
<th>Graduated</th>
<th>Neutral&lt;sup&gt;a&lt;/sup&gt;</th>
<th>Terminated</th>
<th>Total Served in FY 2021</th>
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</thead>
<tbody>
<tr>
<td>Baltimore City</td>
<td>Circuit</td>
<td>May-17</td>
<td>58</td>
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<td>113</td>
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<td>379</td>
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<tr>
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<td>District</td>
<td>Jul-20</td>
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<td>0</td>
<td>0</td>
<td>0</td>
<td>4</td>
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<td>District</td>
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<td>6</td>
<td>7</td>
<td>2</td>
<td>4</td>
<td>17</td>
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<td>Circuit</td>
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<td>5</td>
<td>5</td>
<td>1</td>
<td>0</td>
<td>18</td>
</tr>
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<td>28</td>
<td>19</td>
<td>2</td>
<td>2</td>
<td>75</td>
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<td>Prince George's</td>
<td>District</td>
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<td>78</td>
<td>53</td>
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<td>25</td>
<td>226</td>
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<td><strong>292</strong></td>
<td><strong>103</strong></td>
<td><strong>99</strong></td>
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<td><strong>1,006</strong></td>
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</table>

<sup>a</sup> Neutral is defined as administratively discharged during the reporting period (e.g., death, probation expired, moved jurisdiction).

Veterans Courts

Veterans courts provide services to those who served in the military and suffer from conditions such as post-traumatic stress disorder, traumatic brain injuries, other mental health issues, and/or substance use disorders. Veterans can resolve outstanding criminal offenses, obtain the treatment and services they need, and stabilize their lives. A veterans court connects eligible participants to U.S. Department of Veterans Affairs (VA) benefits, long-term supportive housing, and other benefits for participants whose service-related disabilities prevent their return to the workforce. The veterans court can also access local resources where the veteran does not qualify for VA benefits. See Table 4 for a comprehensive list and basic characteristics of all veterans courts.

Table 4: Veterans Court Statistical Summary

Veterans Court Statistical Summary
July 1, 2020-June 30, 2021

<table>
<thead>
<tr>
<th>County</th>
<th>Location</th>
<th>Year Est.</th>
<th>Entered Program</th>
<th>Graduated</th>
<th>Neutral&lt;sup&gt;b&lt;/sup&gt;</th>
<th>Terminated</th>
<th>Total Served in FY 2020</th>
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<td>14</td>
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<tr>
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<td>14</td>
<td>2</td>
<td>3</td>
<td>40</td>
</tr>
<tr>
<td>Dorchester&lt;sup&gt;a&lt;/sup&gt;</td>
<td>District</td>
<td>June-18</td>
<td>9</td>
<td>10</td>
<td>0</td>
<td>3</td>
<td>28</td>
</tr>
<tr>
<td>Prince George's</td>
<td>Circuit</td>
<td>Apr-15</td>
<td>4</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>12</td>
</tr>
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<td><strong>45</strong></td>
<td><strong>4</strong></td>
<td><strong>8</strong></td>
<td><strong>122</strong></td>
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</table>

<sup>a</sup> Dorchester Regional Veterans Treatment Court consists of Dorchester, Somerset, Wicomico, and Worcester Counties.

<sup>b</sup> Neutral is defined as administratively discharged during the reporting period (e.g., death, probation expired, moved jurisdiction).
Truancy Reduction Pilot Program

In accordance with § 2-1546 of the State Government Article, established under Chapter 718, Acts of 2009, this section of the report provides the status of the Truancy Reduction Pilot Program. The purpose of the Truancy Reduction Pilot Program is to improve school attendance and positively affect the youth’s attitude about education through a nurturing approach that ultimately will build a relationship between the family, the school, and the court. The program is an alternative to punitive measures such as having parents prosecuted in criminal court or stigmatizing the child and further souring their outlook on education and the criminal justice system. A social worker, counselor, or case manager works with families to determine reasons for poor attendance and makes referrals to community-based services when appropriate.

As Maryland’s schools continued remote learning throughout the 2020-2021 school year, identifying new students who were truant continued to be challenging. Factors such as varied attendance tracking among schools, enforcement leniency, and use of assignment completion as means for tracking attendance, contributed to this challenge. Nonetheless, Maryland’s Truancy Reduction programs welcomed 241 new students and their families into their programs and continued to make contact with current participants; providing needed resources and motivation to continue with their lessons.

In late Fiscal Year 2021, the Truancy Reduction Court for Prince George’s County held its first in-person social activity since the COVID-19 public health emergency began. A group of participants traveled to Bladensburg Waterfront Park for a 45-minute boat tour of the Anacostia River. The group enjoyed beautiful weather and a brief history of the area as they floated along the shore in a large pontoon boat (Figure 10). Administrative Judge Sheila R. Tillerson Adams, Circuit Court for Prince George’s County and the Seventh Judicial Circuit of Maryland, underscored the need to maintain truancy reduction services during the pandemic, “It is critical that the Truancy Reduction Court program remains consistent for students during these trying times, and when families need us most. With the transition from in-person to remote learning platforms, we continue to focus on the participants’ progress and seek to cultivate an environment where they can be most successful. Despite the challenges the pandemic has imposed upon the Truancy Reduction Court, I am extremely proud of our team’s resilience and tenacity.”

<table>
<thead>
<tr>
<th>County</th>
<th>Location</th>
<th>Year Est.</th>
<th>Entered Program</th>
<th>Graduated</th>
<th>Neutral</th>
<th>Terminated</th>
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<td>Circuit</td>
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<td>2</td>
<td>2</td>
<td>19</td>
</tr>
<tr>
<td>Kent</td>
<td>Circuit</td>
<td>Sep-14</td>
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<td>31</td>
<td>6</td>
<td>5</td>
<td>68</td>
</tr>
<tr>
<td>Prince George's</td>
<td>Circuit</td>
<td>May-09</td>
<td>34</td>
<td>1</td>
<td>6</td>
<td>15</td>
<td>58</td>
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<td>Jan-11</td>
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<td>0</td>
<td>0</td>
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</tr>
<tr>
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<td></td>
<td>241</td>
<td>76</td>
<td>35</td>
<td>103</td>
<td>409</td>
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* Neutral is defined as administratively discharged during the reporting period (e.g., death, probation expired, moved jurisdiction).
Conclusion

Although the COVID-19 health emergency continued to challenge Maryland’s problem-solving courts and the people they serve throughout most of Fiscal Year 2021, problem-solving court teams — now adept at providing services through the use of remote technology — were ready, determined to stay one step ahead of logistical barriers to ensure contact with participants was never disrupted. In fact, in Fiscal Year 2021, OPSC face-to-face or virtual contacts more than doubled with local programs — from 327 in Fiscal Year 2020, to over 800 in Fiscal Year 2021. Problem-solving court teams also used experience from the first wave of the pandemic to anticipate and meet the increased treatment needs of problem-solving court participants.

With funding and resources provided through the HOPE Act of 2017, the Judicial Council’s Specialty Courts and Dockets Committee, recommended two new adult drug courts to be approved by the Chief Judge of the Court of Appeals: Baltimore County Circuit and Baltimore County District adult drug courts.

This year also brought a new resource to problem-solving court teams and their program managers as they continue to seek adherence to best practices and performance measure implementation. The addition of a problem-solving court senior researcher has helped problem-solving courts and their managers create “research in action” by transforming valuable research and evaluations into data tools that offer insight into areas of strength and where best practice improvement is indicated. The problem-solving court senior researcher has also assisted in the technical research aspects of adult drug court performance measure implementation through the facilitation of participant surveys (Measure 6, Procedural Justice) and through helping teams to understand survey results as they relate to meeting performance benchmarks, and potential program modifications.

In the year ahead, whatever challenges may arise, Maryland’s problem-solving courts will continue to be ready to respond. More than ever, there is a shared commitment to be undeterred by circumstance, to remain focused on solutions, and to recognize and apply the learning opportunities afforded through providing services under the extreme circumstance of the pandemic.

For more information, please contact Gray Barton, OPSC Director at 410-260-3617 or richard.barton@mdcourts.gov.
Appendix A: Problem-Solving Courts in Maryland: History and Governance

In 1994, one of the first drug courts in the country was initiated in Baltimore City to address substance use issues for those involved in the criminal justice system. In 2002, the Maryland Judiciary established the Drug Treatment Court Commission, which led the Judiciary’s effort to implement and maintain drug court programs statewide. Commission members included circuit and district court judges, legislators, and representatives from all appropriate executive branch agencies.

In December 2006, then-Chief Judge Robert M. Bell issued an administrative order establishing a Judicial Conference Committee on Problem-Solving Courts to institutionalize the work of the Commission and to expand its scope to include all problem-solving courts.

In 2015, then-Chief Judge Mary Ellen Barbera revamped the Judiciary’s committee structure by appointing a new Judicial Council and a new set of Judicial Council committees including a Committee on Specialty Courts and Dockets. The Judicial Council continues to serve as the principal policy advisory body to the Chief Judge of the Court of Appeals. The Specialty Courts and Dockets Committee continues to promote and oversee the development, implementation, and evaluation of specialty courts and dockets statewide. The committee advances best practices in areas such as substance abuse, mental health, and alcoholism. The committee monitors and directs the evaluation of the delivery of evidence-based training, direct assistance, research, funding, and support for specialty courts and dockets. See Appendix B for more information on the Judicial Council, this committee, and its membership.

The above-mentioned committee has a Problem-Solving Courts Subcommittee to assist courts and provide a comprehensive and collaborative approach to assist each program in employing best practices, including providing performance measurement, evidence-based training, direct assistance, research, and funding.

In addition, the Behavioral Health Subcommittee explores trial court sentencing alternatives for the treatment and rehabilitation of individuals with mental health needs and those with substance use disorder not enrolled in specialty courts. This subcommittee works closely with the Maryland Department of Health (MDH) and other governmental agencies to monitor and provide information regarding community and residential-based treatment.
Appendix B: Maryland Judicial Council - An Overview

The Judicial Council serves as the principal policy advisory body to the Chief Judge of the Court of Appeals. In 2013, Chief Judge Mary Ellen Barbera, then the administrative head of the Maryland Judiciary, commissioned a comprehensive review of the governance and operational structure of the Maryland Judiciary, which led to the reconstitution of the Judicial Council, as well as the restructuring of the Judiciary’s myriad committees, subcommittees, and workgroups. The reconstituted Judicial Council and the new committee structure became effective January 1, 2015. Since that time, the Council and its committees have worked to advance the Judiciary’s mission to provide fair, efficient, and effective justice for all, with the strategic plan and eight key goals as their guide.

The Judicial Council consists of twenty-two members, including the Chief Judge of the Court of Appeals, the Chief Judge of the Court of Special Appeals, the Chair and Vice Chair of the Conference of Circuit Judges, the Chief Judge of the District Court, the State Court Administrator, the Chair and Vice Chair of the Conference of Circuit Court Clerks, the Chair and Vice Chair of the Conference of Circuit Court Administrators, the Chair of the Court of Appeals Standing Committee on Rules of Practice and Procedure, the Chief Clerk of the District Court, the Chair of the Retired and Recalled Judges Committee, three Circuit Court judges, four District Court judges, and two District Administrative Clerks. The Deputy State Court Administrator serves as Secretary to the Judicial Council. The Judicial Council’s Executive Committee, which meets at the request and direction of the Chief Judge of the Court of Appeals to provide input to the Chief Judge on matters that arise between sessions of the Judicial Council, consists of the Chief Judge of the Court of Appeals, the Chief Judge of the Court of Special Appeals, the Chair of the Conference of Circuit Court Judges, the Chief Judge of the District Court, and the State Court Administrator.

As indicated above, several of the members serve by virtue of their position, while the remaining members are appointed by the Chief Judge of the Court of Appeals. Each appointed member of the Judicial Council is appointed to a two-year term but can be reappointed to one additional consecutive two-year term as the Chief Judge deems necessary and appropriate. Unless otherwise directed by the Chief Judge, the Judicial Council meets bi-monthly.

As the highest governance body, the Judicial Council is the central hub for all Judiciary-wide policy changes, judicial reforms, legislative issues, and other internal and external developments that impact the administration of justice. To that end, the committees develop recommendations for the Judicial Council’s consideration and the Chief Judge’s approval that address policies, programs, and initiatives that help to ensure the effective and efficient administration of justice in Maryland. In addition, the Judicial Council takes up external matters that impact the Maryland Judiciary.

The diverse and focused members of the Judicial Council and its committees, including judges, magistrates, trial court clerks and administrators, and commissioners, represent all areas of the State. It is through their collective work that the Maryland Judiciary is fulfilling its mission and achieving its goals, all for the betterment of those who enter the courts and utilize the services the Judiciary offers.
2021 Judicial Council
*Honorable Joseph M. Getty, Chair
Chief Judge, Court of Appeals

Honorable Keith A. Baynes
Chair, Conference of Circuit Judges Circuit Court for Cecil County
Term: January 1, 2021 – December 31, 2021

Honorable Pamila J. Brown
District Court in Howard County
Term: January 1, 2021 – December 31, 2022

Honorable Donine Carrington Martin
Circuit Court for Charles County
Term: January 1, 2021 – December 31, 2022

Honorable Audrey J. S. Carrion
Vice-Chair, Conference of Circuit Judges
Term: January 1, 2021 – December 31, 2021

Honorable Karen Christy Holt Chesser
District Court in St. Mary’s County
Term: January 1, 2021 – December 31, 2022

Honorable Angela M. Eaves
Circuit Court for Harford County
Term: January 1, 2020 – December 31, 2021

*Honorable Matthew J. Fader
Chief Judge, Court of Special Appeals

Marina R. Fevola
Chair, Conference of Circuit Court Administrators
Circuit Court for Wicomico County
Term: January 1, 2021 – December 31, 2021

Honorable Jeffery S. Getty
Circuit Court for Allegany County
Term: January 1, 2021 – December 31, 2022

Markisha Gross
Administrative Clerk
District Court in Montgomery County
Term: January 1, 2021 – December 31, 2022

Honorable Katherine Hager
Chair, Conference of Circuit Court Clerks

*Pamela Harris
State Court Administrator Administrative Office of the Courts

Honorable James A. Kenney III
Chair, Senior Judges Committee

*Honorable John P. Morrissey
Chief Judge, District Court of Maryland

Honorable Bonnie G. Schneider
District Court in Cecil County
Term: January 1, 2020 – December 31, 2021

Honorable Kathy Smith
Vice-Chair, Conference of Circuit Court Clerks

Mary K. Smith
Administrative Clerk
District Court in Howard County
Term: January 1, 2020 – December 31, 2021

Roberta Warnken
Chief Clerk, District Court of Maryland

Honorable Alan M. Wilner
Chair, Standing Committee on Rules of Practice and Procedure

Honorable Dorothy J. Wilson
District Court in Baltimore County
Term: January 1, 2020 – December 31, 2021

Burgess Wood
Vice-Chair, Conference of Circuit Court Administrators
Term: January 1, 2021 – December 31, 2021

Faye D. Gaskin, Secretary
Deputy State Court Administrator
Administrative Office of the Courts

*Executive Committee Member
The Judicial Council’s Specialty Courts and Dockets Committee

Purpose

The Specialty Courts and Dockets will promote and oversee the development, implementation and evaluation of specialty courts and dockets in the courts.

Scope of Activity

The Committee will ensure the utilization of best practices by specialty courts and special dockets, in areas such as substance abuse, mental health and alcoholism. It will monitor and direct the evaluation of the delivery of evidence-based training, technical assistance, research, funding and support for specialty courts and special dockets. The Committee will report on its initiatives and other activities, at least annually, to the Judicial Council.

Committee Membership

Hon. Nicholas E. Rattal, Chair

<table>
<thead>
<tr>
<th>Committee Member</th>
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<tbody>
<tr>
<td>Hon. Nicholas E. Rattal, Chair</td>
<td>December 2021</td>
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<tr>
<td>Hon. Louis A. Becker</td>
<td>December 2021</td>
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<tr>
<td>Hon. Karen Friedman</td>
<td>December 2022</td>
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<td>Hon. Andrea M. Leahy</td>
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<td>Hon. Holly D. Reed III</td>
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<td>Hon. Ann Wagner-Stewart</td>
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<td>Hon. Halee F. Weinstein</td>
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Gray Barton, Staff
Appendix C: NCSC Maryland Adult Drug Court Performance Measures: Objectives

1. To target defendants for admission who are addicted to illicit drugs or alcohol and are at substantial risk for reoffending or failing to complete a less intensive disposition, such as standard probation or pretrial supervision.

2. To identify eligible participants early and place them promptly in drug court.

3. To provide ongoing judicial interaction with each drug court participant.

4. To conduct all drug court team interactions with participants in a manner that is consistent with procedural justice.

5. To provide community supervision to hold participants accountable and protect public safety.

6. To employ graduated sanctions and rewards to hold participants accountable, promote recovery and protect public safety.

7. To provide appropriate evidence-based alcohol, drug, and other related treatment and rehabilitation services to drug court participants in sufficient dosages as to reasonably expect impacts on participant behavior.

8. To monitor abstinence by frequent alcohol and drug testing.

9. To improve the ability of participants to function effectively in society.

10. To provide all defendants the same opportunities to participate and succeed in the drug court regardless of race, ethnicity, gender, and age.
Appendix D: NCSC Maryland Adult Drug Courts Performance Measures and Benchmarks

**Target Population Measures**

1. **Admissions Classified as High Risk/High Needs (Measure 1):** The percent of participants who fall into the high-risk/high-needs category as determined by a validated risk-needs tool. (Benchmark = 100%)

2. **Admissions Classified as Low Risk (Measure 2):** The percent of participants who fall into the low risk categories as determined by a validated risk-needs tool. (Benchmark = 0%)

**Processing Time Measures**

3. **Time From Arrest to First Treatment Episode (Measure 3):** The average processing time (i.e., number of days) between the date of arrest leading to first treatment episode.

4. **Time From Referral to First Treatment Episode (Measure 4):** The average number of days between the date of referral in drug court until the participant is engaged in treatment. (Benchmark = Less Than 50 Days)

**Status Hearing Measures**

5. **Drug Court Status Hearings Attended (Measure 5):** The average number of status hearings attended by participants per month during each phase of program participation, by type of discharge. (Benchmark = More Than Twice Per Month During Phase One)

**Procedural Justice Measures**

6. **Procedural Fairness (Measure 6):** Procedural justice is measured by administering a procedural fairness survey designed to assess participants’ perceptions of fairness of their interactions with critical members of the drug court team with whom the participant has substantial ongoing interaction (including the judge and treatment providers, possibly probation and the coordinator, where appropriate). Another set of survey questions measure similar attributes for the court. (Benchmark = Score Greater Than 4)

**Supervision Measures**

7. **Accountability Contacts (Measure 7):** Average number of monthly accountability contacts conducted with participants face-to-face while in phase 1. (Benchmark = Greater Than 4 Times Per Month During Phase 1)

**Sanctions and Incentive Measures**

8. **Sanctions (Measure 8):** The average number of sanctions administered across participants. These include increases in requirements, jail or detention, reprimands, additional meetings with supervision agents, community service, writing assignments, or additional restrictions (e.g., home electronic monitoring, curfew imposed).

9. **Incentives (Measure 9):** The average number of incentives administered to participants. Incentives include praise or acknowledgement, rewards, reduced requirements, phase promotions, and other recognition (e.g., offender of the month award).

10. **Ratio of Incentives to Sanctions (Measure 10):** Measure 10 combines Measures 8 Sanctions and 9 Incentives. For each participant, compute a ratio of incentives to sanctions and then calculate the average across participants.
11. **Response Time to Negative Behavior (Measure 11):** Measure 11 is the average response time (in days) between the date of the precipitating negative behavior (i.e. violation of the program rules) and the date of the response. (Benchmark = Less Than or Equal To 7 Days)

**Dosage Measures**

12. **Units of Treatment (Measure 12):** The average number of units of service attended by participants, reported by treatment type, and by type of discharge (Successful Completion, Unsuccessful, and Neutral). (Benchmark = More Than or Equal To 200 Hours)

13. **Length of Time in Program (Measure 13):** The average length of time (days) participating in drug court, measured from admission to discharge and reported by type of discharge. (Benchmark = 15-21 Months)

**Drug Testing Measures**

14. **Drug/Alcohol Testing (Measure 14):** The average number of drug and alcohol tests administered is measured per week. This measure will be reported by type of test (drug or alcohol test) and by phase in the program. Tests are counted by specimen rather than by the number of substances tested. (Benchmark = Greater Than or Equal To 2 Times Per Week)

**Social Functioning Measures**

15. **Quality of Residency Status (Measure 15):** Programs will assess the quality of housing status by calculating the percentage of participants with an improved quality in residency status between time of admission and time of discharge. (Benchmark = Greater Than 75%)

16. **Residential Stability (Measure 16):** Improvement in residential stability compares the number of residency changes in the year prior to discharge as compared to the year prior to admission. Stability is defined as less than two residential changes in a one-year time frame. (Benchmark = Greater Than 60%)

17. **Employment/Education Status (Measure 17):** Rate of enrollment in educational and employment status and identifies improvements between admission and discharge. (Benchmark = Greater Than 60%)

**Access and Fairness Measures**

18. **Access and Fairness (Measure 18):** At each of three processing points, the percentage of each demographic group of the referral cohort are examined to identify changes in its composition, as members drop out and/or change status from previous processing steps. (Benchmark = Less Than or Equal To 5% For Race, Ethnicity, And Gender; Less Than 10% For Age)

**Improve Retention in Program Measures**

19. **Successful Completion (Measure 19):** The percentage of participants in the admissions cohort who have successfully completed the program. (Benchmark = Greater Than 60%)

**Sobriety Measures**

20. **Positive Discrete Drug and Alcohol Tests (Measure 20):** Average percentage of total
scheduled drug and alcohol tests that return positive for an illegal or banned substance (e.g., alcohol, prescription drugs used for non-medical purposes or without a valid prescription, etc.) or have results that the program considers positive (e.g. admissions of use, late or missed test, diluted test, or tampered sample). (Benchmark = Less Than Or Equal To 10%)

21. Positive Continuous Monitoring Tests (Measure 21): Average percentage of days for which a participant had a positive result on continuous monitoring drug or alcohol tests of total days monitored. Positive results include indication of use, admissions of use, and tampering with the monitoring device. (Benchmark = Less Than or Equal To 10%)

22. Time From Last Positive Drug Test to Program Discharge (Measure 22): Average number of days between the last positive drug test and discharge by type of discharge. (Benchmark = Greater Than 90 Days)

Reducing In-Program Reoffending Measures

23. In-Program Reoffending (Measure 23): The percentage of participants who have a case filed for a new jail-eligible offense with an offense date occurring between admissions and discharge. (Benchmark = Less Than or Equal To 20%)

Reducing Post-Program Recidivism Measures

24. Post-Program Reoffending (Measure 24): The percentage of participants who were convicted of at least one jail-eligible offense within three years from time of discharge from drug court, reported by type of discharge. Post-program recidivism for drug court participants is defined as any new arrest that results in a conviction for a jail-eligible offense following discharge from the program. (Benchmark = Less Than or Equal To 20% Within 1 Year; Less Than or Equal To 30% Within 3 Years)