



ANYTOWN ADULT TREATMENT COURT BEST PRACTICE ASSESSMENT RESULTS

Adult Treatment Courts

This report has been created using the results of NPC's Treatment Court Assessment tool. The best practice ratings below are made based on how questions were answered on the assessment.

Treatment Court Background

▶ Implementation year	2002
▶ Current active caseload / current capacity	62 / 120
▶ Graduates (successful completions)	2143
▶ Non-graduates (unsuccessful completions)	273




The most commonly used substance(s) among participants is/are Methamphetamine (40%)

The treatment court serves high, moderate, and low risk and high and low need participants. The treatment court has separate tracks for participants of different risk/need levels.

Best Practices by Key Component - Quick Review:

The statistics in this summary table indicate the percentage of best practices (BPs) met within each Key Component (KC). The intention is to help identify which components need additional focus and support. Note, some practices are easier to implement than others (e.g., require less time or fewer resources) and some practices are restricted by local and state policies. This summary is not intended as a score or a grade indicating the quality of your program, but rather a navigational tool to aid in guiding your attention in the report to where you can celebrate best practices met and where you may require more assistance.

Key Component	Best Practices Met (%)
<i>KC1. Team Collaboration</i>	 50%
<i>KC2. Public Safety & Due Process</i>	 100%
<i>KC3. Participant Eligibility & Program Entry</i>	 78%
<i>KC4a. Treatment Practices</i>	 80%
<i>KC4b. Treatment & Auxiliary Services</i>	 38%
<i>KC5. Drug Testing</i>	 100%
<i>KC6. Responses to Participant Behavior</i>	 67%
<i>KC7. Role of the Judge</i>	 86%
<i>KC8. Monitoring & Evaluation</i>	 20%
<i>KC9. Team Training</i>	 20%
<i>KC10. Program Support & Sustainability</i>	 50%

KC Review Key:  Meeting most practices  In progress, room for improvement  Priority area for discussion

ANYTOWN ADULT TREATMENT COURT

Results as of March 2024

The tables below provide a list of treatment court best practices and whether your program is meeting that best practice, based on the answers in your assessment. The results for your treatment court on the key best practices listed in the table are meant to serve as a *starting point* for discussion about how you are implementing best practices in your program, including what you are doing well and what you would like to do better. We hope that it will be useful for beginning or continuing conversations with your team.

The answers to the best practices below are compiled based on the treatment court’s responses to one or more questions on NPC’s Treatment Court Assessment:

- “Yes” indicates that the treatment court reports performing the practice.
- “No” indicates that the treatment court reports not performing the practice.
- “Missing” indicates that the treatment court did not respond to the question, or set of questions, necessary to determine whether the treatment court is performing the practice.

Key Component 1:

Treatment courts integrate alcohol and other drug treatment services with justice system case processing

 **5 out of 10 practices met (50%)**

	Performing this practice?
1.1 The treatment court has a Memorandum of Understanding (MOU) in place between the treatment court team members (and/or the associated agencies)	No
i. MOU specifies team member roles	N/A
ii. MOU specifies what information will be shared	N/A
1.2 The treatment court has a written policy and procedure manual	Yes
1.3 All key team members ¹ attend pre-court team meetings (staffings)	No
1.4 All key team members ² attend court sessions/status review hearings	No

¹ Key team members include the judge, a prosecutor, a defense attorney, a substance use disorder treatment representative, the treatment court coordinator, and a representative from probation. Best practice research currently defines supervision as represented by someone from probation. However, treatment court programs where participants enter pre-plea or pre-conviction may not have a representative from probation on the team. Probation may not have legal authority or jurisdiction over participants in these situations, and the role of supervision monitoring may fall under a case manager or other team member. NPC recognizes that the role of supervision may be met by someone from an agency other than probation, and NPC commends programs who have this role identified and actively engaged in staffings and court sessions.

² See previous footnote.

	Performing this practice?
1.5 Law enforcement (e.g., police, sheriff) is a member of the treatment court team	Yes
1.6 Law enforcement attends pre-court team meetings (staffings)	Yes
1.7 Law enforcement attends court sessions (status review hearings)	Yes
1.8 Treatment communicates with court via email	Yes

Key Component 2:

Using a non-adversarial approach, prosecution and defense counsel promote public safety while protecting participants' due process rights

 **4 out of 4 practices met (100%)**

	Performing this practice?
2.1 A prosecuting attorney attends pre-court team meetings (staffings)	Yes
2.2 A prosecuting attorney attends court sessions (status review hearings)	Yes
2.3 A defense attorney attends pre-court team meetings (staffings)	Yes
2.4 A defense attorney attends court sessions (status review hearings)	Yes

Key Component 3:

Eligible participants are identified early and promptly placed in the treatment court

 **7 out of 9 practices met (78%)**

	Performing this practice?
3.1 The time between the eligible event (or the incident that prompts a referral) and treatment court entry is 50 days or less	Yes
<i>The average time between the eligible event and the referral is: 0 to 9 days</i>	
<i>The average time between referral and treatment court entry is: 10+ days</i>	
3.2 Other charges in addition to drug charges are eligible for treatment court entry	Yes
3.3 The treatment court accepts individuals with serious mental health diagnoses	No
3.4 The treatment court uses validated, standardized assessment tool(s) <u>to determine eligibility</u>	No
3.5 Participants are given a participant handbook upon entering the treatment court	Yes

	Performing this practice?
3.6 The treatment court accepts individuals who are using legally prescribed psychotropic medications	Yes
The treatment court accepts individuals who are using medications to treat a substance use disorder:	
3.7 Methadone	Yes
3.8 Naltrexone (Vivitrol)	Yes
3.9 Buprenorphine (Suboxone)	Yes

Key Component 4a: Treatment Practices

Treatment courts provide access to a continuum of alcohol, drug, and other treatment and rehabilitation services



8 out of 10 practices met (80%)

	Performing this practice?
4.1 The treatment court uses no more than two treatment agencies to provide treatment for a majority of participants or a single agency/individual provides oversight for any other treatment agencies treating treatment court participants	Yes
4.2 The treatment court uses validated, standardized assessment tool(s) <u>to determine level or type of services needed</u>	Yes
4.3 Participants with co-occurring mental health and substance use disorders are connected to coordinated treatment whenever possible	Yes
4.4 Treatment providers administer evidence-based, manualized behavioral or cognitive-behavioral treatments	Yes
4.5 Treatment providers are licensed or certified to deliver substance use disorder treatment	Yes
4.6 Treatment providers are licensed or certified to deliver mental health treatment	No
4.7 Treatment providers have training and/or experience working with a criminal justice population	Yes
4.8 The treatment court has processes in place to ensure the quality and accountability of the treatment provider	Yes
4.9 The treatment court requires participants to meet individually with a treatment provider or clinical case manager weekly in the first phase of the program	No
4.10 The minimum length of the treatment court program is 12 months or more	Yes

Key Component 4b: Available Services

Substance Use – 6 out of 7 services available (86%)


	Performing this practice?
<i>The treatment court offers or makes referrals to the following services:</i>	
S.1 Outpatient (group or individual)	Yes
S.2 Intensive outpatient	Yes
S.3 Residential	Yes
S.4 Relapse prevention services	No
Legally prescribed medication for substance use disorders:	
S.5 Methadone	Yes
S.6 Naltrexone (Vivitrol)	Yes
S.7 Buprenorphine (Suboxone)	Yes

Behavioral Health– 4 out of 7 services available (57%)

	Performing this practice?
<i>The treatment court offers or makes referrals to:</i>	
S.8 Mental health treatment	Yes
S.9 Peer support services	No
S.10 Trauma-related services	Yes
S.11 Training for participants in illness self-management	No
S.12 Crisis intervention services	Yes
S.13 Anger management classes	Yes
S.14 Criminal thinking interventions	No

 **Family and Children –0 out of 4 services available (0%)**

	Performing this practice?
<i>The treatment court offers or makes referrals to:</i>	
S.15 Parenting classes	No
S.16 Family/domestic relations counseling	No
S.17 Services for participants' children	No
S.18 Childcare while participants are in treatment or in court (or participating in other treatment court requirements)	No

 **Complimentary Services –0 out of 8 services available (0%)**

	Performing this practice?
<i>The treatment court offers or makes referrals to:</i>	
S.19 Health care	No
S.20 Dental care	No
S.21 Housing assistance	No
S.22 Supportive housing	No
S.23 Gender-specific services	No
S.24 Culturally specific services	No
S.25 Supported employment	No
S.26 Transportation assistance	No

Key Component 5:

Abstinence is monitored by frequent alcohol and other drug testing

 **9 out of 9 practices met (100%)**

	Performing this practice?
5.1 Drug testing is random/unpredictable	Yes
5.2 Drug testing occurs on weekends	Yes
5.3 Drug testing occurs on holidays	Yes
5.4 Collection of test specimens is witnessed directly by staff	Yes

		Performing this practice?
5.5	Staff members who collect drug testing specimens are trained in appropriate collection protocols	Yes
5.6	Drug test results are back in 2 days or less	Yes
5.7	Drug tests are collected at least 2 times per week	Yes
5.8	Participants are expected to have at least 90 days of sobriety, as determined by negative drug tests, before graduation	Yes
5.9	Participants receive regular drug testing to ensure they are using any prescribed and approved medications appropriately	Yes

Key Component 6:

A coordinated strategy governs treatment court responses to participants' compliance

 **6 out of 9 practices met (67%)**

		Performing this practice?
6.1	The treatment court has incentives for graduation such as avoiding a criminal record, avoiding incarceration, or receiving a substantially reduced sentence	Yes
6.2	Sanctions are imposed immediately after non-compliant behavior (e.g., treatment court will impose sanctions in advance of a participant's regularly scheduled court hearing)	No
6.3	Team members are given a written copy of the incentive and sanction guidelines	No
6.4	The treatment court has a range of response options which are individualized based on participant circumstances and proximal and distal behaviors	Yes
6.5	The treatment court has a range of options for responding to participant behavior (including alternatives such as praise and recognition from the judge, certificates, writing assignments, and community service)	Yes
6.6	In order to graduate, participants must have a job, be in school, or be involved in some qualifying positive activity	Yes
6.7	In order to graduate, participants must have a sober housing environment	Yes
6.8	The treatment court reports that the typical length of jail sanctions is 6 days or less	Yes
6.9	The treatment court retains participants with new possession charges (new possession charges do not automatically prompt termination)	No

Key Component 7:

Ongoing judicial interaction with each participant is essential



6 out of 7 practices met (86%)

	Performing this practice?
7.1 Participants have court sessions (status review hearings) every 2 weeks, or once per week, in the first phase	No
7.2 The judge spends an average of 3 minutes or more per participant during court sessions (status review hearings)	Yes
7.3 The judge's term is at least 2 years or indefinite	Yes
7.4 The judge was assigned to the treatment court on a voluntary basis	Yes
7.5 In the final phase of the treatment court, the participants appear before the judge in court at least once per month	Yes
7.6 The judge has received training on the treatment court model	Yes
7.7 The judge has had training on the legal and constitutional issues related to treatment courts	Yes

Key Component 8:

Monitoring and evaluation measure the achievement of treatment court goals and gauge effectiveness



1 out of 5 practices met (20%)

	Performing this practice?
8.1 The results of program evaluations have led to modifications in treatment court operations	Yes
8.2 The treatment court's review of its own data and/or regular reporting of program statistics has led to modifications in treatment court operations	No
8.3 The treatment court maintains data that are critical to monitoring and evaluation in an electronic database (rather than paper files)	No
8.4 The treatment court monitors data to assess whether there are disparities (e.g., gender, racial, etc.) in who <i>enters</i> the program	No
8.5 The treatment court monitors data to assess whether there are disparities (e.g., gender, racial, etc.) in who <i>graduates</i> from the program	No

Key Component 9:

Continuing interdisciplinary education promotes effective treatment court planning, implementation, and operations

 **1 out of 5 practices met (20%)**

		Performing this practice?
9.1	All new hires to the treatment court complete a formal training or orientation	No
9.2	All members of the treatment court team are provided with training in the treatment court model	Yes ³
9.3	All members of the treatment court team receive ongoing cultural competency training	No
9.4	All members of the treatment court team receive education in substance use disorders	No
9.5	All members of the treatment court team receive education in mental health disorders	No

Key Component 10:

Forging partnerships among treatment courts, public agencies, and community-based organizations generates local support and enhances treatment court effectiveness

 **1 out of 2 practices met (50%)**

		Performing this practice?
10.1	The treatment court has an advisory committee that includes community members	No
10.2	The treatment court has a steering committee or policy group that meets regularly to review policies and procedures	Yes

³Those marked as “not a member of the team” are not included in the scoring for this practice.