

**FIRST YEAR PROCESS EVALUATION OF
THE MADISON COUNTY (ANDERSON, IN) DRUG COURT PROGRAM**

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OVERVIEW OF DRUG COURTS

In 1989, the first drug court program emerged in Dade County, Florida as a means to expedite the flow of drug-related cases through overburdened court systems and to better address the treatment needs of its clientele: the drug-involved offender (NIJ, 1995). Since 1995, the United States Department of Justice's Drug Courts Program Office (DCPO) has made approximately 650 grants supporting the development and maintenance of local drug courts, totaling more than \$125 million in funding. As of May 2001, 483 adult, 158 juvenile, 38 family, and 9 combination adult/juvenile/family drug courts were in operation for a total of 688 drug court programs (Belenko, 2001). There are reportedly over 430 programs in the planning process, with all 50 states having drug courts in operation or in the planning stages (American University, 2001).

Court systems have pursued three primary strategies to address the volume of drug-related cases in the criminal justice system and break the "cycle of addiction." Current judicial strategies incorporate tactics involving expedited case management, specialized courts and caseloads for drug cases, and alternative sentencing and diversionary programs (Smith, et al., 1991). According to the Center for Court Innovation, drug courts are a prime example of a growing judicial reform movement known as "problem-solving courts." Problem-solving courts and courts with specialized caseloads (e.g., domestic violence court or family court) seek to broaden the focus of court intervention from simply adjudicating past and current legal issues to changing future behavior to achieve tangible results for victims, offenders and the community at-large (Berman & Feinblatt, 2001). In general, drug court programs strive to reduce drug-related and non-drug-related criminal activity, promote sobriety and long-term sober

living, and improve the quality of life for program participants. Through early intervention, frequent judicial contact, and informed decision-making, the drug court model serves as a mechanism for the provision of intensive, long-term supervision and treatment to offenders whose substance abuse and criminal behavior intersect (Belenko, 2001; Berman & Feinblatt, 2001).

Drug courts are one of the more successful modalities of coercive treatment (Satel, 2000). Data consistently show that when treatment is lengthy in duration (beyond 90 days), and when it is completed, treatment recipients are more successful at maintaining sobriety and committing fewer crimes (Satel, 2000). Drug courts help offenders with addictions enter and stay in treatment. It is estimated that, nationally, “about 60% of those who enter drug courts were still in treatment after one year” (Belenko, 1998). In comparison, eighty to ninety percent of participants who voluntarily enter treatment programs leave treatment by the end of the first year; about half of those who voluntarily seek treatment drop out of their program in the first three months (Satel, 2000). In a meta-review of 37 published and unpublished drug court evaluations produced between 1999 and April 2001 from programs around the nation, The National Center on Addiction and Substance Abuse at Columbia University (CASA) found that, on-average, forty-seven percent of drug court participants successfully graduate from drug court programs (Belenko, 2001). This figure is consistent with estimates from the United States General Accounting Office’s 1997 report on drug courts which found that, on-average, a minimum of forty-eight percent of participants who enter drug court graduate (U.S. General Accounting Office, 1997). These figures do not include those who were still active at the time the evaluations were conducted, so completion rates

from drug court programs across the nation may be higher than currently reported (Belenko, 1999).

While drug courts vary widely in regards to their structure and jurisdiction, the U.S. Department of Justice and the National Association of Drug Court Professionals (NADCP) have identified the following key elements of the drug court model, and most drug courts attempt to integrate these components into their program (Gebelein, 2000):

- Early identification and prompt placement of eligible participants.
- Participant access to a continuum of treatment, rehabilitation, and related services.
- Integration of substance abuse treatment with justice system case processing.
- Use of a nonadversarial approach, in which prosecutors and defense attorneys promote public safety while protecting the right of the accused to due process.
- A coordinated strategy among judge, prosecution, defense, and treatment providers to govern offender compliance.
- Ongoing judicial interaction with each participant.
- Abstinence is monitored through frequent testing for alcohol and illicit drugs.
- Monitoring and evaluation to measure achievement of program goals and gauge effectiveness.
- Continuing interdisciplinary education to promote effective planning, implementation, and operation.
- Partnerships with public agencies and community-based organizations to generate local support and enhance drug court effectiveness.

THE MADISON COUNTY DRUG COURT PROGRAM

The consensus among Madison County criminal justice officials has been that the U.S. Interstate 69 corridor is a main conduit for drug traffic from Detroit, Michigan to Indianapolis, Indiana. Interstate 69 runs through the heart of Madison County and the county seat, The City of Anderson, which is approximately 25 miles northeast of Indianapolis. Estimates from the law enforcement agencies in Madison County place the percentage of arrests being drug-related at 75 to 80 percent. Madison County has six state trial courts (one Circuit Court, three Superior Courts and two County Courts) and four Town Courts that have misdemeanor jurisdiction. The Superior and County Courts

have voluntarily joined together for purposes of budgeting and administration; the union of the five courts is known as the Unified Courts. The Unified Courts is the drug court grant recipient. Prior to the establishment of the drug court program, misdemeanor and felony drug-related cases were processed in the same manner as other criminal charges; drug-related cases in Madison County proceeded from investigation, to arrest, to preliminary hearing and trial in the same linear progression as non-drug-related criminal cases.

Under the supervision of the Honorable David W. Hopper, the Madison County Drug Court Program went into operation on March 3, 2000, with the general goal of lessening drug-related criminal activity and substance abuse among program participants through the implementation of specially designed court procedures that are programmatically integrated with community resources that provide effective substance abuse and offender services. The Madison County Drug Court team consists of an assigned judge, prosecutor, probation officer, public defender, court administrator, case manager from the Community Justice Center (CJC), and treatment provider, the Center for Mental Health, Inc. (CMH).

For pre-dispositional defendants, the Madison County prosecutor and defense counsel initiates referrals and judicial assessments for the drug court program. The Courts (and their probation staffs) make referrals and assessments for post-dispositional defendants. This process includes initial determination of the pending or dispositional charges as to eligibility under the criteria for entry into the Drug Court process, and an investigation of the criminal history of the offender. The Madison County Drug Court Program does not accept violent offenders, or those possessing lethal weapons, offenders

with a history of violent crime, or prior Drug Court participants. A listing of Program admission and exclusion criteria is provided in Appendix I.

Written materials describing the program rules, regulations, and potential rewards and sanctions are provided to every drug court candidate (see Appendix II for Participant's Handbook). Within 14 days after the first substantive meeting between the candidate and the Court the drug court candidate notifies the Court of their desire to enter the program. Upon recommendation from the prosecutor or the probation department, and agreement by the defendant and his counsel, the case is forwarded to a treatment professional for determination of chemical dependency. After the offender has been deemed eligible to enter the Drug Court Program by the prosecutor or probation staff, and has been identified as chemically dependent by the treatment professional, interested offenders are presented to the judge for final determination for admission.

The remainder of this report will describe the methodology and findings of the process evaluation for the Madison County Drug Court Program.

RESEARCH QUESTIONS

The primary focus of this evaluation report is an assessment of the characteristics of those participating in the drug court program and drug court processes. The following research questions were developed to examine the Madison County Drug Court Program:

1. What are the characteristics of offenders referred to the drug court?
2. How many offenders are referred to the court each month? How many are accepted? How many are placed in which types of drug treatment? How many complete treatments?
3. What are the characteristics of offenders who complete treatment, and how do they compare with those who fail to complete treatment?
4. What do drug court participants like most about the drug court? Least?

METHODOLOGY

Sample

The period of observation for this evaluation covers the first eighteen months of the Madison County Drug Court Program, March 3, 2000 to September 30, 2001. During this time, approximately 171 defendants were referred to drug court and 97 defendants were accepted into the drug court program. Evaluations for program suitability were conducted on 139 defendants, with 123 comprising clinical evaluations. On average, 4 defendants are entered into the program each month. Program staff rejected approximately 19 defendants, 16 defendants referred to drug court failed to appear to the program and were not admitted, and six defendants were admitted but voluntarily withdrew from the program. The Madison County Drug Court program has graduated 9 defendants, and 26 defendants were unsuccessfully terminated from the program. A comparison group of defendants from the Madison County Unified Court System who met the legal criteria for drug court admission was created; the comparison group did not undergo clinical evaluations for drug court suitability. The total number in the comparison group is 26.¹

Data Collection and Data Analysis

Data collection was performed and maintained by the Madison County Drug Court Program. The University of Cincinnati provided an evaluation database system, data collection instruments to compliment the database system, a detailed protocol for data collection and technical support throughout the evaluation period (see Appendix III for *Data Collection Protocol*). Much of the data required to address the established

¹ The comparison group was identified on September 1, 2000, and the initial data collection was done on this date.

research questions and the information common in a process evaluation are incomplete or missing. Files made available to University of Cincinnati staff were reviewed in an effort to complete the data collection.

Where the nature and quality of the data allowed, statistical analyses were conducted. Independent sample t-tests were used to assess differences between drug court participants and the comparison group on various personal characteristics, prior criminal histories and court processing time. Where data were unavailable for statistical analysis, descriptive statistics were used to examine the characteristics of drug court participants and the comparison group.

Limitations

The quantity and quality of the data made available through the data collection process limits the statistical techniques available for analysis, as well as limits the stability and interpretability of the findings. This analysis involves a small number of cases. Consequently, the small sample sizes used in this analysis fail to produce stable parameter estimates. The results of the statistical analysis are unstable in that they are susceptible to significant changes due to the addition of a small number of cases, or the completion of more information on existing cases. Therefore, the results and their generalizability should be interpreted with caution.

RESULTS

Table 1 compares the drug court and comparison group on several demographic characteristics: age, sex, race/ethnicity, academic achievement, employment status, child dependents and residential stability over the last year.

Table 1. Comparison of Demographic Data

	DRUG COURT		COMPARISON GROUP	
	N	%	N	%
AGE				
18-24	28	29.8	8	30.8
25-31	24	25.5	4	15.4
32-38	25	26.6	3	11.5
39-45	13	13.8	7	26.9
46+	4	4.3	4	15.4
Mean	31.01		34.44	
SEX				
Male	55	61.8	15	57.7
Female	34	38.2	11	42.3
RACE/ETHNICITY				
White	62	66.0	19	73.1
Black	27	28.7	5	19.2
Unknown	5	5.3	2	7.7
YEARS OF SCHOOLING COMPLETED				
0 - 8 th Grade	20	21.3	9	36.6
9 th – 11 th Grade	17	18.1	5	19.2
12 th Grad/GED	53	56.4	11	42.3
Some College/Vocational Training	4	4.3	1	3.8
EMPLOYMENT STATUS				
35+ Hours Weekly	38	40.4	7	26.9
16 to 34 Hours Weekly	16	17.0	2	7.7
1 to 15 Hours Weekly	3	3.2	1	3.8
Unemployed	37	39.4	16	61.5
MARITAL STATUS				
Single	63	67.0	14	53.8
Married	18	19.1	4	15.4
Unknown	13	13.8	8	30.8
NUMBER CHILD DEPENDENTS*				
0 (Unknown)	52	55.3	21	80.8
1	17	18.1	2	7.7
2	14	14.9	2	7.7
3+	11	11.7	1	3.8
Mean	.92			.38
RESIDENCE CHANGE IN LAST 12 MONTHS**				
0 (Unknown)	35	37.2	19	73.1
1	14	14.9	3	11.5
2	30	31.9	4	15.4
3+	15	16.0	0	0
Mean	1.29			.42

*Significant at the $p < 0.05$ level. **Significant at the $p < 0.01$ level.

T-tests revealed non-significant differences between these groups in regards to age. Both the number of child dependents ($t= 2.357$, $sig.= 0.02$) and the number of residential moves over the last year ($t= 4.540$, $sig.= 0.0005$) are significant at the $p < 0.05$ level. Drug court participants had a significantly larger number of child dependents than the comparison group, and they changed residences more frequently than the comparison group.

Figure 1 presents the risk and needs classifications for drug court participants only. Scores from the Level of Service Inventory-Revised (LSI-R) were available for 64 drug court participants, and on two members of the comparison group. The mean LSI-R score was 26.28, with a minimum score value of eight and a maximum score value of 48. Among those receiving LSI-R assessment, fifty percent can be classified as moderate in criminogenic risk and needs, with LSI-R scores ranging between 24 and 33.

Figure 1. LSI-R Risk and Needs Level of Drug Court Participants

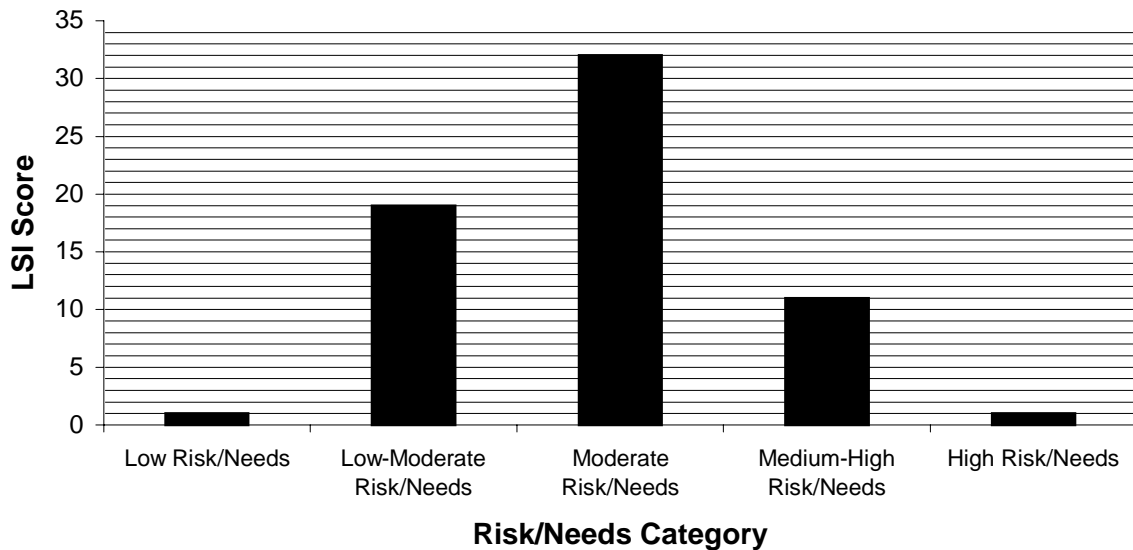


Table 2. Prior Criminal Histories

	DRUG COURT					COMPARISON GROUP				
	Mean	Std. Dev	N	Min	Max	Mean	Std. Dev	N	Min	Max
Delinquent Arrests	.4255	1.5062	94	.00	9.00	.2308	.7104	26	.00	3.00
Delinquent Convictions	.1915	.8833	94	.00	5.00	.1538	.4641	26	.00	2.00
Misdemeanor Arrests*	1.7021	3.1241	94	.00	13.00	4.2308	5.4649	26	.00	25.00
Misdemeanor Convictions	1.0000	1.9344	94	.00	9.00	2.0769	2.2436	26	.00	9.00
Felony Arrests*	1.5000	2.5684	94	.00	18.00	2.8077	2.9123	26	.00	12.00
Felony Convictions	2.1489	5.2465	94	.00	38.00	1.6538	1.8098	26	.00	6.00
Arrest on Drug Charge	.7872	.7742	94	.00	2.00	1.4615	.7606	26	.00	3.00
Sentences to Community Supervision	1.1596	1.8854	94	.00	9.00	1.8846	1.7280	26	.00	6.00
Unsuccessful Terminations from Supervision in Community**	.2234	.6248	94	.00	4.00	.9615	1.1482	26	.00	4.00
Sentences to a Secure Facility	.5957	.9981	94	.00	4.00	.9231	1.2304	26	.00	4.00

*Significant at the $p < 0.05$ level. **Significant at the $p < 0.01$ level.

Table 3. Comparison of Case Processing

	DRUG COURT					COMPARISON GROUP				
	Mean	Std. Dev	N	Min	Max	Mean	Std. Dev	N	Min	Max
Pre-Drug Court Arrest Group: Arrested Before Start of Drug Court Program (March 3, 2000)										
Days from Arrest to Disposition	279.62	240.96	13	75	840	264.00	89.63	6	160	392
Days from Arrest Drug Court Screening	274.38	218.92	13	58	729	N/A	N/A	N/A	N/A	N/A
Post Drug Court Arrest Group: Arrested After Start of Drug Court Program (March 3, 2000)										
Days from Arrest to Disposition*	40.16	45.43	43	2	222	80.31	92.46	13	5	285
Days from Arrest Drug Court Screening**	44.04	44.06	45	4	215	N/A	N/A	N/A	N/A	N/A

*Significant at the $p < 0.05$ level. **Significant at the $p < 0.01$ level.

Table 2 provides data regarding prior criminal histories for both groups. The two groups differed significantly in terms of prior misdemeanor arrests and felony arrests. The mean number of prior misdemeanor arrests ($t = -2.259$, $sig. = 0.031$) and prior felony arrests ($t = -2.231$, $sig. = 0.028$) are significantly higher for the comparison group. The comparison group also had more unsuccessful terminations from supervision in the community ($t = -3.151$, $sig. = 0.004$) than the drug court participants. Whether these findings are due to differences in the accuracy of the available data or actual differences in criminality is unknown.

As shown in Table 3, the average number of days between arrest and disposition for the comparison group is double that of those in the drug court program. Due to the lack of information on treatment referral or screening dates for the comparison group, no comparison or analysis was conducted. The data available on case processing was divided into cases entering the criminal justice system before the start date of the drug court program (Pre-Drug Court Arrest Group) and those initiated after the program was in operation (Post-Drug Court Arrest Group). Categorizing the defendants in this manner highlights the potential influence the drug court program has had on case processing time.

A One-Way Analysis of Variance was used to compare the Pre- and Post-Drug Court Arrest Groups. Defendants arrested before the start of the drug court program spent significantly more time in the court system. Pre-drug court arrestees who were admitted into the drug court program averaged 230 more days in processing time than their counterparts who entered the system after the drug court program was established ($F = 4.490$, $sig. = 0.037$). The amount of time from arrest to disposition for members of the comparison group who were arrested before the start of the drug court program was also significant, as their average processing time was more than 180 days longer than members of the comparison group who were arrested after the

start of the drug court. The average number of days between the two groups from arrest to admission into the drug court program is also significant ($F = 6.451$, $sig. = 0.014$). Program participants who were arrested before March 3, 2000, averaged 274.38 days from arrest to program admission, while those arrested after the program was created averaged 44.04 days from their arrest to program admission.

Again, it should be noted that this analysis involves a small number of cases and that the results of this statistical analysis of case processing time are not stable. Only thirteen drug court participants (22 percent) and 6 members of the comparison group (32 percent) were arrested before the start of the drug court program. Many of the arrest dates for members of the both groups are some six or more months before the start date for the drug court program, resulting in larger values for days between arrest and disposition. Examination of the records for the Pre-Drug Court defendants indicates that several of these defendants pursued or had jury trials and/or changed defense counsel, both of which increase the amount time between arrest and disposition and arrest and program admission. Therefore, these results should be cautiously interpreted.

Table 4. Drug Testing Results

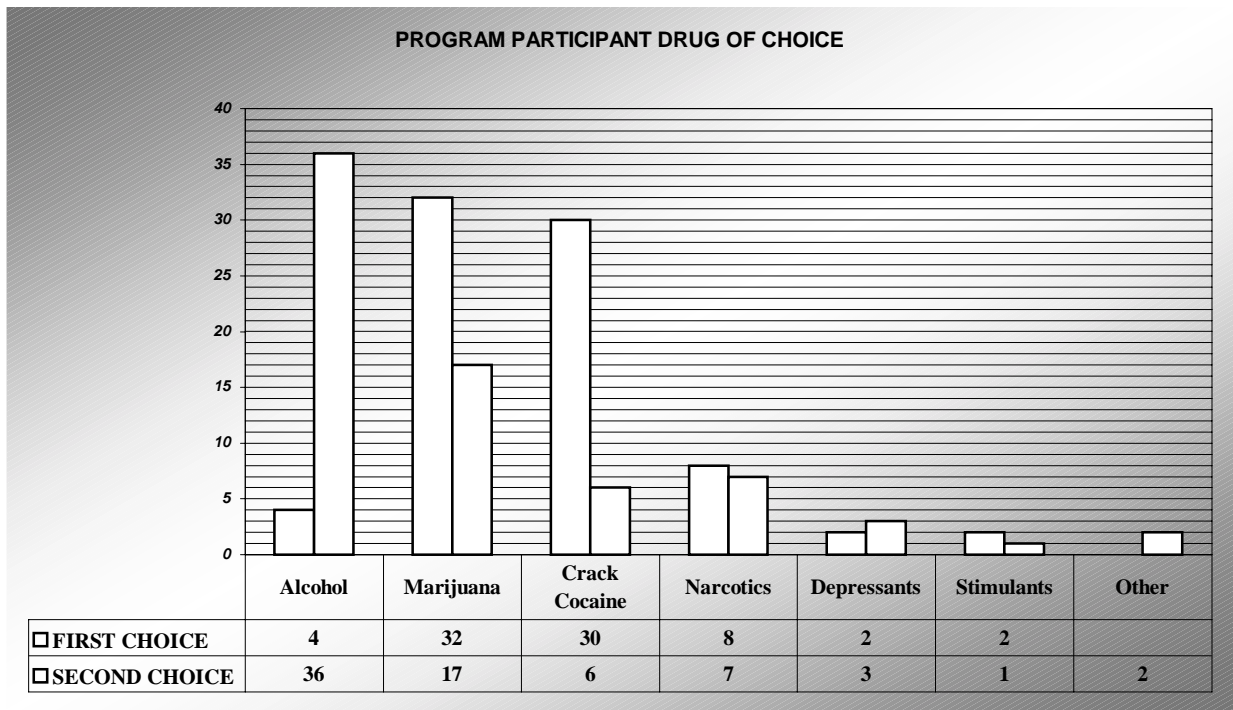
	Number		Percentage		Percentage	
	Drug Tests Taken**		Negative Drug Tests**		Positive Drug Tests*	
	Drug Court	Comparison	Drug Court	Comparison	Drug Court	Comparison
Mean	40.17	5.04	80.597	9.299	7.331	0.16
Std. Dev.	33.38	19.65	30.635	27.306	16.429	0.817
N	92	26	94	26	92	26
Minimum	0	0	0	0	0	0
Maximum	134	96	100	97	100	4.2

*Significant at the $p < 0.05$ level. **Significant at the $p < 0.01$ level.

Drug testing results are presented in Table 4. As would be expected, there is a significant difference in the average number of drug tests administered to drug court participants ($t = 6.767$, $sig. = 0.0005$). There is also a significant difference in drug testing results. On average, 80

percent of the drug tests administered to those in the drug court program were negative ($t = 10.740$, $\text{sig.} = 0.0005$), compared to a rate of 9 percent for the non-drug court group. However, the average number of positive drug screens was higher for drug court participants ($t = 2.218$, $\text{sig.} = 0.028$). Figure 2 highlights the drugs of first and second choice for members of the drug court group.

Figure 2. Drugs of Choice



Tables 5 through 12 present the available data regarding the first four treatment placements for drug court participants, the outcomes of those placements, and the reason for noncompletion. The personal characteristics and criminal history information on program participants are presented for each phase of treatment.

Table 5. Phase I Treatment Placement—Personal Characteristics

	OUTCOME OF PHASE I TREATMENT PLACEMENT			REASON FOR NONCOMPLETION OF PLACEMENT				
	Phase Completed	Phase Uncompleted	Total	Noncompliance	Absconded	Active	Other	Total
SEX								
Male	31 (70%)	13 (30%)	44	9 (69%)	3 (23%)	1 (8%)	0	13
Female	20 (80%)	5 (20%)	25	3 (60%)	1 (20%)	N/A	1 (20%)	5
AGE								
18 to 24	10 (56%)	8 (44%)	18	8 (100%)	N/A	N/A	N/A	8
25 to 31	14 (82%)	3 (18%)	17	2 (67%)	1 (33%)	N/A	N/A	3
32 to 38	15 (79%)	4 (21%)	19	2 (50%)	2 (50%)	N/A	N/A	2
39 to 45	11 (85%)	2 (15%)	13	N/A	1 (50%)	N/A	1 (50%)	2
46+	1 (50%)	1 (50%)	2	N/A	N/A	1 (100%)	N/A	1
RACE/ETHNICITY								
White	34 (69%)	15 (31%)	49	11 (73%)	3 (20%)	N/A	1 (7%)	15
Black	17 (85%)	3 (15%)	20	1 (33.3%)	1 (33.3%)	1 (33.3%)	N/A	3
SCHOOLING COMPLETED								
0-8th Grade	4 (36%)	7 (64%)	11	4 (57%)	3 (43%)	N/A	N/A	7
9th-11th Grade	11 (100%)	N/A	11	N/A	N/A	N/A	N/A	N/A
12th Grade/GED	33 (77%)	10 (23%)	43	7 (70%)	1 (10%)	1 (10%)	1 (10%)	10
> H.S. (Voc. Training/College)	3 (75%)	1 (25%)	4	1 (100%)	N/A	N/A	N/A	1
EMPLOYMENT STATUS								
Unemployed	18 (64%)	10 (36%)	28	6 (60%)	3 (30%)	1 (10%)	N/A	10
1 to 15 Hours Weekly	1 (50%)	1 (50%)	2	1 (100%)	N/A	N/A	N/A	1
16 to 34 Hours Weekly	9 (90%)	1 (10%)	10	N/A	N/A	N/A	1 (100%)	1
35+ Hours Weekly	23 (79%)	6 (21%)	29	5 (83%)	1 (17%)	N/A	N/A	6
PREVIOUS DRUG/ALCOHOL TX								
Yes	32 (80%)	8 (20%)	40	5 (62.5%)	1 (12.5%)	1 (12.5%)	1 (12.5%)	8
No	16 (84%)	3 (16%)	19	3 (100%)	N/A	N/A	N/A	3

Table 6. Phase I Treatment Placement—Criminal History Characteristics

	OUTCOME OF PHASE I TREATMENT PLACEMENT			REASON FOR NONCOMPLETION OF PLACEMENT					
	Phase Completed	Phase Uncompleted	Total	Noncompliance	Absconded	Active	Other	Unknown/ Data Missing	Total
LSI-R CLASSIFICATION									
Low Risk/Needs	1 (100%)	N/A	1	N/A	N/A	N/A	N/A	N/A	N/A
Low-Moderate Risk/Needs	18 (95%)	1 (5%)	19	1 (100%)	N/A	N/A	N/A	N/A	1
Moderate Risk/Needs	22 (73%)	8 (27%)	30	5 (62.5%)	1 (12.5%)	1 (12.5%)	1 (12.5%)	N/A	8
FELONY ARRESTS									
0	22 (71%)	9 (29%)	31	4 (44.4%)	4 (44.4%)	1 (11%)	N/A	N/A	9
1	10 (71%)	4 (29%)	14	4 (100%)	N/A	N/A	N/A	N/A	4
2	7 (78%)	2 (22%)	9	2 (100%)	N/A	N/A	N/A	N/A	2
3+	12 (71%)	5 (29%)	17	4 (80%)	N/A	N/A	1 (20%)	N/A	5
MISDEMEANOR ARRESTS									
0	24 (63%)	14 (37%)	38	8 (57%)	4 (29%)	1 (7%)	1 (7%)	N/A	14
1	7 (78%)	2 (22%)	9	2 (100%)	N/A	N/A	N/A	N/A	2
2	9 (90%)	1 (10%)	10	1 (100%)	N/A	N/A	N/A	N/A	1
3+	11 (79%)	3 (21%)	14	3 (100%)	N/A	N/A	N/A	N/A	3
SUPERVISION TERMINATIONS									
0	44 (77%)	13 (23%)	57	7 (54%)	4 (30%)	1 (8%)	1 (8%)	N/A	13
1	6 (50%)	6 (50%)	12	6 (100%)	N/A	N/A	N/A	N/A	6
2	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
3+	1 (50%)	1 (50%)	2	1 (100%)	N/A	N/A	N/A	N/A	N/A

Table 7. Phase II Treatment Placement—Personal Characteristics

	OUTCOME OF PHASE II TREATMENT PLACEMENT			REASON FOR NONCOMPLETION OF PLACEMENT			
	Phase Completed	Phase Uncompleted	Total	Noncompliance	Other	Unknown/ Data Missing	Total
SEX							
Male	13 (59%)	9 (41%)	22	8 (89%)	N/A	1 (11%)	9
Female	8 (50%)	8 (50%)	16	7 (87.5%)	1 (12.5%)	N/A	8
AGE							
18 to 24	3 (50%)	3 (50%)	6	3 (100%)	N/A	N/A	3
25 to 31	4 (36%)	7 (64%)	11	7 (100%)	N/A	N/A	7
32 to 38	8 (73%)	3 (27%)	11	2 (67%)	N/A	1 (33%)	3
39 to 45	6 (67%)	3 (33%)	9	2 (67%)	1 (33%)	N/A	3
46+	N/A	1 (100%)	1	1 (100%)	N/A	N/A	1
RACE/ETHNICITY							
White	16 (64%)	9 (36%)	25	8 (89%)	1 (11%)	N/A	9
Black	5 (38%)	8 (62%)	13	7 (87.5%)	N/A	1 (12.5%)	8
SCHOOLING COMPLETED							
0-8th Grade	1 (33%)	2 (67%)	3	2 (100%)	N/A	N/A	2
9th-11th Grade	5 (71%)	2 (29%)	7	2 (100%)	N/A	N/A	2
12th Grade/GED	13 (50%)	13 (50%)	26	11 (85%)	1 (7.6%)	1 (7.6%)	12
> H.S. (Voc. Training/College)	2 (100%)	N/A	2	N/A	N/A	N/A	N/A
EMPLOYMENT STATUS							
Unemployed	10 (67%)	5 (33%)	15	5 (100%)	N/A	N/A	5
1 to 15 Hours Weekly	N/A	1 (100%)	1	1 (100%)	N/A	N/A	1
16 to 34 Hours Weekly	4 (57%)	3 (43%)	7	3 (100%)	N/A	N/A	3
35+ Hours Weekly	7 (47%)	8 (53%)	15	6 (75%)	1 (12.5%)	1 (12.5%)	8
PREVIOUS DRUG/ALCOHOL TX							
Yes	13 (54%)	11 (46%)	24	9 (82%)	1 (9%)	1 (9%)	11
No	8 (67%)	4 (33%)	12	4 (100%)	N/A	N/A	4

Table 8. Phase II Treatment Placement—Criminal History Characteristics

	OUTCOME OF PHASE II TREATMENT PLACEMENT			REASON FOR NONCOMPLETION OF PLACEMENT					
	Phase Completed	Phase Uncompleted	Total	Noncompliance	Absconded	Active	Other	Unknown/ Data Missing	Total
LSI-R CLASSIFICATION									
Low Risk/Needs	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Low-Moderate Risk/Needs	10 (62.5%)	6 (37.5%)	16	6 (100%)	N/A	N/A	N/A	N/A	6
Moderate Risk/Needs	9 (56%)	7 (44%)	16	6 (86%)	N/A	N/A	N/A	1 (14%)	7
Medium-High Risk/Needs	1 (25%)	3 (75%)	4	3 (100%)	N/A	N/A	N/A	N/A	3
High Risk/Needs	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
FELONY ARRESTS									
0	10 (62.5%)	6 (37.5%)	16	5 (83%)	N/A	N/A	N/A	1 (17%)	6
1	5 (62.5%)	3 (37.5%)	8	3 (100%)	N/A	N/A	N/A	N/A	3
2	4 (80%)	1 (20%)	5	1 (100%)	N/A	N/A	N/A	N/A	1
3+	3 (33%)	6 (67%)	9	6 (100%)	N/A	N/A	N/A	N/A	6
MISDEMEANOR ARRESTS									
0	10 (62.5%)	6 (37.5%)	16	5 (83%)	N/A	N/A	N/A	1 (17%)	6
1	2 (29%)	5 (71%)	7	5 (100%)	N/A	N/A	N/A	N/A	5
2	4 (50%)	4 (50%)	8	4 (100%)	N/A	N/A	N/A	N/A	4
3+	6 (86%)	1 (14%)	7	1 (100%)	N/A	N/A	N/A	N/A	1
SUPERVISION TERMINATIONS									
0	21 (68%)	10 (32%)	31	9 (90%)	N/A	N/A	N/A	1 (10%)	10
1	1 (17%)	5 (83%)	6	5 (100%)	N/A	N/A	N/A	N/A	5
2	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
3+	N/A	1 (100%)	1	1 (100%)	N/A	N/A	N/A	N/A	N/A

Table 9. Phase III Treatment Placement—Personal Characteristics

	OUTCOME OF PHASE III TREATMENT PLACEMENT			REASON FOR NONCOMPLETION OF PLACEMENT			
	Phase Completed	Phase Uncompleted	Total	Noncompliance	Other	Unknown/ Data Missing	Total
SEX							
Male	9 (90%)	1 (10%)	10	N/A	1 (100%)	N/A	1
Female	4 (100%)	N/A	4	N/A	N/A	N/A	N/A
AGE							
18 to 24	1 (50%)	1 (50%)	2	N/A	1 (100%)	N/A	1
25 to 31	4 (100%)	N/A	4	N/A	N/A	N/A	N/A
32 to 38	4 (100%)	N/A	4	N/A	N/A	N/A	N/A
39 to 45	4 (100%)	N/A	4	N/A	N/A	N/A	N/A
46+	N/A	N/A	0	N/A	N/A	N/A	N/A
RACE/ETHNICITY							
White	11 (92%)	1 (8%)	12	N/A	1 (100%)	N/A	1
Black	2 (100%)	N/A	2	N/A	N/A	N/A	N/A
SCHOOLING COMPLETED							
0-8th Grade	1 (100%)	N/A	1	N/A	N/A	N/A	N/A
9th-11th Grade	2 (67%)	1 (33%)	3	N/A	N/A	1 (100%)	1
12th Grade/GED	8 (100%)	N/A	8	N/A	N/A	N/A	N/A
> H.S. (Voc. Training/College)	2 (100%)	N/A	2	N/A	N/A	N/A	N/A
EMPLOYMENT STATUS							
Unemployed	6 (100%)	N/A	6	N/A	N/A	N/A	N/A
1 to 15 Hours Weekly	N/A	N/A	N/A	N/A	N/A	N/A	N/A
16 to 34 Hours Weekly	1 (100%)	N/A	1	N/A	N/A	N/A	N/A
35+ Hours Weekly	6 (86%)	1 (14%)	7	N/A	1 (100%)	N/A	1
PREVIOUS DRUG/ALCOHOL TX							
Yes	7 (87.5%)	1 (12.5%)	8	N/A	N/A	1 (100%)	1
No	6 (100%)	N/A	6	N/A	N/A	N/A	N/A

Table 10. Phase III Treatment Placement—Criminal History Characteristics

	OUTCOME OF PHASE III TREATMENT PLACEMENT			REASON FOR NONCOMPLETION OF PLACEMENT					
	Phase Completed	Phase Uncompleted	Total	Noncompliance	Absconded	Active	Other	Unknown/ Data Missing	Total
LSI-R CLASSIFICATION									
Low Risk/Needs	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Low-Moderate Risk/Needs	6 (86%)	1 (14%)	7	N/A	N/A	N/A	1 (100%)	N/A	1
Moderate Risk/Needs	6 (100%)	N/A	6	N/A	N/A	N/A	N/A	N/A	N/A
Medium-High Risk/Needs	1 (100%)	N/A	1	N/A	N/A	N/A	N/A	N/A	N/A
High Risk/Needs	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
FELONY ARRESTS									
0	7 (100%)	N/A	7	N/A	N/A	N/A	N/A	N/A	N/A
1	4 (80%)	1 (20%)	5	N/A	N/A	N/A	1 (100%)	N/A	1
2	3 (100%)	N/A	3	N/A	N/A	N/A	N/A	N/A	N/A
3+	1 (100%)	N/A	1	N/A	N/A	N/A	N/A	N/A	N/A
MISDEMEANOR ARRESTS									
0	7 (100%)	N/A	7	N/A	N/A	N/A	N/A	N/A	N/A
1	1 (100%)	N/A	1	N/A	N/A	N/A	N/A	N/A	N/A
2	3 (75%)	1 (25%)	4	N/A	N/A	N/A	1 (100%)	N/A	1
3+	3 (75%)	1 (25%)	4	1 (100%)	N/A	N/A	N/A	N/A	1
SUPERVISION TERMINATIONS									
0	13 (93%)	1 (7%)	14	N/A	N/A	N/A	N/A	1 (100%)	1
1	1 (100%)	N/A	1	N/A	N/A	N/A	N/A	N/A	N/A
2	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
3+	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

Table 11. Phase IV Treatment Placement—Personal Characteristics

	OUTCOME OF PHASE IV TREATMENT PLACEMENT			REASON FOR NONCOMPLETION OF PLACEMENT			
	Phase Completed	Phase Uncompleted	Total	Noncompliance	Other	Unknown/ Data Missing	Total
SEX							
Male	6 (86%)	1 (14%)	7	N/A	N/A	1 (100%)	1
Female	2 (67%)	1 (33%)	3	N/A	N/A	1 (100%)	1
AGE							
18 to 24	N/A	N/A	N/A	N/A	N/A	N/A	N/A
25 to 31	1 (33%)	2 (67%)	3	1 (50%)	N/A	1 (50%)	2
32 to 38	3 (100%)	N/A	3	N/A	N/A	N/A	N/A
39 to 45	4 (100%)	N/A	4	N/A	N/A	N/A	N/A
46+	N/A	N/A	N/A	N/A	N/A	N/A	N/A
RACE/ETHNICITY							
White	7 (78%)	2 (22%)	9	1 (509%)	1 (50%)	N/A	2
Black	1 (100%)	N/A	1	N/A	N/A	N/A	N/A
SCHOOLING COMPLETED							
0-8th Grade	1 (100%)	N/A	1	N/A	N/A	N/A	N/A
9th-11th Grade	N/A	1 (100%)	1	N/A	1 (100%)	N/A	1
12th Grade/GED	8 (100%)	N/A	8	N/A	N/A	N/A	N/A
> H.S. (Voc. Training/College)	N/A	1 (100%)	1	1 (100%)	N/A	N/A	1
EMPLOYMENT STATUS							
Unemployed	5 (83%)	1 (17%)	6	N/A	N/A	1 (100%)	1
1 to 15 Hours Weekly	N/A	N/A	N/A	N/A	N/A	N/A	N/A
16 to 34 Hours Weekly	1 (100%)	N/A	1	N/A	N/A	N/A	N/A
35+ Hours Weekly	3 (75%)	1 (25%)	4	N/A	N/A	1 (100%)	1
PREVIOUS DRUG/ALCOHOL TX							
Yes	5 (100%)	N/A	5	N/A	N/A	N/A	N/A
No	4 (67%)	2 (33%)	6	1 (50%)	N/A	1 (50%)	2

Table 12. Phase IV Treatment Placement—Criminal History Characteristics

	OUTCOME OF PHASE IV TREATMENT PLACEMENT			REASON FOR NONCOMPLETION OF PLACEMENT					
	Phase Completed	Phase Uncompleted	Total	Noncompliance	Absconded	Active	Other	Unknown/ Data Missing	Total
LSI-R CLASSIFICATION									
Low Risk/Needs	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Low-Moderate Risk/Needs	3 (60%)	2 (40%)	5	1 (50%)	N/A	N/A	1 (50%)	N/A	2
Moderate Risk/Needs	4 (100%)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Medium-High Risk/Needs	1 (100%)	N/A	1	N/A	N/A	N/A	N/A	N/A	N/A
High Risk/Needs	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
FELONY ARRESTS									
0	5 (83%)	1 (17%)	6	1 (100%)	N/A	N/A	N/A	N/A	1
1	1 (50%)	1 (50%)	2	N/A	N/A	N/A	1 (100%)	N/A	1
2	2 (67%)	1 (33%)	3	N/A	N/A	N/A	N/A	1 (100%)	1
3+	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
MISDEMEANOR ARRESTS									
0	6 (86%)	1 (14%)	7	1 (100%)	N/A	N/A	N/A	N/A	1
1	1 (100%)	N/A	1	N/A	N/A	N/A	N/A	N/A	N/A
2	1 (50%)	1 (50%)	2	N/A	N/A	N/A	1 (100%)	N/A	1
3+	1 (50%)	1 (50%)	2	N/A	N/A	N/A	N/A	1 (100%)	1
SUPERVISION TERMINATIONS									
0	9 (82%)	2 (18%)	11	1 (50%)	N/A	N/A	1 (50%)	N/A	2
1	1 (100%)	N/A	1	N/A	N/A	N/A	N/A	N/A	N/A
2	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
3+	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

Table 13. Comparison of In-Program Processing

Status At Termination	Mean	Std. Dev.	Minimum	Maximum
GRADUATED (N = 9)				
Case Hearings	37.77	29.69	22	116
FTAs for Case Hearings	0.22	0.66	0	2
Status Review Hearings	127.88	42.81	24	171
FTAs for Status Review Hearings	3.44	4.24	0	9
Total Days Spent Confined	2.44	3.12	0	7
UNSUCCESSFULLY TERMINATED (N = 26)				
Case Hearings	20.15	11.95	3	44
FTAs for Case Hearings	1.96	3.75	0	19
Status Review Hearings	54.07	49.58	0	158
FTAs for Status Review Hearings	6.00	6.65	0	25
Total Days Spent Confined	18.19	30.63	0	133
VOLUNTARY WITHDRAWAL (N = 6)				
Case Hearings	19.83	9.57	8	33
FTAs for Case Hearings	0.33	0.51	0	1
Status Review Hearings	39.50	45.99	0	105
FTAs for Status Review Hearings	4.66	5.50	0	13
Total Days Spent Confined	8.83	7.62	0	23

Table 14. Participant Attitudes Toward Program

Program Participant Attitudes Toward Drug Court					
SURVEY QUESTIONS	Unknown	Strongly Agree	Agree	Disagree	Strongly Disagree
RESPECT					
Judge treated me with respect	2	1	N/A	N/A	N/A
Probation Officer treated me with respect	1	2	N/A	N/A	N/A
Treatment Staff Treated me with respect	3	N/A	N/A	N/A	N/A
FAIRNESS					
Judge was fair	2	1	N/A	N/A	N/A
Probation Officer was fair	1	2	N/A	N/A	N/A
Treatment Staff was fair	3	N/A	N/A	N/A	N/A
CONCERNED					
Judge was concerned about me	3	N/A	N/A	N/A	N/A
Probation Officer was concerned about me	1	2	N/A	N/A	N/A
Treatment Staff was concerned about me	3	N/A	N/A	N/A	N/A
DRUG-FREE					
Judge visits helped me stay drug free	1	2	N/A	N/A	N/A
Probation Officer visits helped me stay drug free	1	2	N/A	N/A	N/A
Treatment Staff visits helped me stay drug free	2	1	N/A	N/A	N/A
EXPECTATIONS					
Judge expected too much from me	N/A	N/A	2	1	N/A
Probation Officer expected too much from me	N/A	N/A	2	1	N/A
Treatment Staff expected too much from me	N/A	N/A	2	1	N/A

Table 13 presents the data on the number of case hearings and status reviews. Compared to those who were unsuccessfully terminated from the drug court program, program graduates averaged significantly more case hearings ($t = 2.539$, $\text{sig.} = 0.016$) and more status review hearings ($t = 3.974$, $\text{sig.} = 0.0005$). This finding may be due to differences in length of time in the drug court program; graduates may spend more time in the program in order to complete the requirements necessary for graduation.

Information on participant attitudes toward the drug court program was available for only three respondents (see Table 14). In regard to what participants liked the most and the least about the drug court program, no survey data was available for program graduates. The three comments on what was best about the drug court program from respondents who were unsuccessfully terminated involve the positive level of concern exhibited by the treatment staff, the level of supervision provided by the program, and the opportunity to have their criminal charges reduced. The complaints about the program were that it consumes a lot of the participant time and the imposition of jail time.

RECOMMENDATIONS

Like many drug court programs around the nation, complete and accurate data collection is a concern. Failure to accurately collect and record data relevant to process evaluation questions seriously limited the ability to assess the impact of the drug court on processing time. At this time, the quality and quantity of the recorded data also limits the ability to fully understand whom the Madison County Drug Court is serving, and what are the effects and outcomes of the interventions provided by the drug court program. If the current data collection issues are not addressed, if the attention and resources dedicated to data collection remains the same, then future process and outcome evaluations of the Madison County Drug Court Program will also yield limited findings on the effects of the drug court.

The following recommendations can be offered to enhance future evaluations of the Madison County Drug Court Program:

- Interviews with the drug court team and review of the technical assistance provided over the duration of the evaluation period suggests that the lack of a Drug Court Coordinator with clear, dedicated responsibilities and control over data collection was an issue. The establishment (or re-establishment) of a Drug Court Coordinator would enhance the Program's ability to monitor and evaluate itself.
- Establish a support staff position with data collection and entry into an evaluation database or management information system being a primary responsibility of the position.
- Establish and adhere to a data collection protocol to ensure relevant information is accurately collected in a timely fashion. This protocol should make clear what is to be collected or made available and by whom on the drug court team.
- As part of the protocol, individuals responsible for data collection need to have full access to information relevant to future evaluation questions.
- As part of the protocol, quarterly reviews of the information being collected should be performed to enhance the timely collection of data. If at all possible, retroactive data collection should be avoided.

SUMMARY OF FINDINGS AND RECOMMENDATIONS

The results of this process evaluation indicate the following:

FINDINGS

- The quantity and quality of the data made available through the data collection process limits the stability and interpretability of the findings described in this report. The numbers of cases involved in this evaluation were very small. Consequently, the results of the tests for significance are unstable and sensitive to the addition of new cases or the completion of more information on existing cases. Therefore, the results and their generalizability should be interpreted with caution.
- Among those receiving LSI-R assessment, 50 percent can be classified as moderate in criminogenic risk and needs, with LSI-R scores ranging between 24 and 33. The mean LSI-R score was 26.28.
- The average number of prior misdemeanor arrests and prior felony are significantly higher for the comparison group. The comparison group also had more unsuccessful terminations from supervision in the community than the drug court participants.
- Defendants arrested before the start of the drug court program spent significantly more time in the court system. Program participants who were arrested before March 3, 2000, averaged 274.38 days from arrest to program admission, while those arrested after the program was created averaged 44.04 days from their arrest to program admission.
- Pre-drug court arrestees who were admitted into the drug court program averaged 230 more days in processing time than their counterparts who entered the system after the drug court program was established.
- The amount of time from arrest to disposition for members of the comparison group who were arrested before the start of the drug court program was more than 180 days longer than members of the comparison group who were arrested after the start of the drug court.
- On average, 80 percent of the drug tests administered to those in the drug court program were negative, compared to a rate of 9 percent for the non-drug court group.
- Compared to those who were unsuccessfully terminated from the drug court program, program graduates averaged more case hearings and more status review hearings.

RECOMMENDATIONS

- The Drug Court Program should re-establish the role of the coordinator with clear, dedicated responsibilities and control over data collection.
- Establish and adhere to a data collection protocol to ensure relevant information is accurately collected in a timely fashion. This protocol should make clear what is to be collected or made available and by whom on the drug court team.
- Responsibilities for data collection should be assigned to a specific individual

who is authorized to have access to information needed for evaluation questions.

- Quarterly reviews of the information being collected should be performed to enhance the timely collection of data. If at all possible, retroactive data collection should be avoided.

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APPENDIX I

Drug Court Treatment Admission and Exclusion Criteria.

Admission Criteria

1. The individual must be screened by the judicial system and be deemed eligible by the Drug Court Judge
2. The individual must meet the DSM IV criteria for Chemical Dependency
3. The individual must agree to abide by all CMH and Drug Court guidelines and rules

Exclusion Criteria

1. The individual exhibits predatory behavior, potentially placing others at risk
2. The individual threatens or commits acts of violence
3. The individual exhibits symptoms of mental health disorders that interfere with their ability to benefit from Drug Court Treatment. (Recommendations for appropriate treatment will be made and re-evaluation for Drug Court may occur upon remediation of the symptoms)
4. The individual is a poor candidate for treatment, based on data from assessment tools and/or clinical interviews.

Drug Court Eligible Crimes

1. I.C. 35-48-4-6 Possession of Cocaine or a Narcotic Drug (as a Class D Felony, and possibly in some circumstances the C Felony enhancement).
2. I.C. 35-48-4-7 Possession of a Controlled Substance (as a Class D Felony, and possibly in some circumstances the C Felony enhancement).
3. I.C. 35-48-4-3 Possession of Paraphernalia (as a Class A Misdemeanor and in some circumstances the Class D Felony enhancement).
4. I.C. 35-48-4-11 Possession of Marijuana, Hash Oil, or Hashish (as a Class A misdemeanor and in some circumstances the Class D Felony enhancement).
5. I.C. 35-48-4-13 Visiting or Maintaining a Common Nuisance (as an B misdemeanor and possibly the D Felony for unlawfully keeping Controlled Substances).
6. I.C. 35-48-4-14 Obtaining Controlled Substances by Fraud, etc., (as a Class D Felony and in some instances the Class C Felony enhancement).
7. I.C. 16-42-19-13 Possession of Use of Legend Drug (as a Class D Felony and in some cases the C Felony enhancement).
8. I.C. 16-42-19-16 Obtaining a Legend Drug by Fraud (as a Class D Felony and in some cases the C Felony enhancement).
9. I.C. 16-42-19-17 Possession of Smoking Instrument (as a Class D Felony).
10. I.C. 16-42-19-18 Possession of Syringe (as a Class D Felony).
11. I.C. 16-42-19-24 Nuisance (used for keeping, using legend drug as a Class B Misdemeanor).
12. Any other non-violent crime, if it can be shown that the crime was the direct result of the accused's drug addiction and the crime was committed in an effort to satisfy the accused's addiction.

Violent Offender being defined as a person who either:

1. Is charged with or convicted of an offense during the course of which
 - A. The person carried, possessed, or used a firearm or other dangerous weapon; or
 - B. There occurred the use of force against the person of another; or
 - C. There occurred the death of, or serious bodily injury to, any person, without regard to whether any of the circumstances described above is an element of the offense or conduct or which or for which the person is charged or convicted.
2. Has one or more prior convictions of a felony crime of violence involving the use or attempted use of force against a person with the intent to cause death or serious bodily harm.

Participant Handbook

Madison County Drug Court

Treatment Location:

The Center for Mental Health, Inc.

2020 Brown Street
Anderson, Indiana 46016
765-649-8161

Revised 10/19/01

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Welcome to the *Madison County Drug Court program.*

This handbook is designed to answer questions, address concerns, and provide overall information about

the drug court program. As a participant, you will be expected to follow the instructions given in drug

court by the judge and comply with the treatment plan developed for you by your counselor. This

handbook will detail what is expected of you as a drug court participant and review general program

information. All participants are encouraged to share this handbook with family and friends.

Program Description

The Madison County Drug Court program is a court-supervised, comprehensive treatment program for non-violent defendants. This is a voluntary program, which includes drug testing, case management, individual and group counseling and requires regular attendance at 12-step meetings (Narcotics Anonymous or Alcoholics Anonymous) or other recovery-conducive groups. Treatment is provided by The Center for Mental Health, Inc. (CMH). The Community Justice Center will assist with obtaining education and skills assessments and will provide referrals for vocational training, education and/or job placement services. The program length is a minimum of one year. The judge may extend treatment length if requirements have not been met for graduation from drug court. The program concludes after a maximum of eighteen months. Following arrest, if you are eligible, you will be offered a choice between drug court and prosecution of the pending charge(s). A public defender or private counsel will advise you of your choices and discuss the drug court program with you. If you are accepted into the program, your attorney or public defender will continue to represent you throughout your participation in drug court. Successful completion and graduation from the program will result in having the charges dismissed. Withdrawal or dismissal from the program will result renewed prosecution of the original charge(s) in the original court.

As a result of being in violation of probation, Madison County judges may refer other eligible participants to drug court. These probationers must be accepted by the drug court for participation, and once accepted, it is expected that they abide by all drug court program rules. In addition, because participation in drug court is a condition of probation for these participants, all original terms of probation will remain in effect, and any violation of their terms will result in a new violation being filed. Violation of program rules, such as missed treatment sessions, missed appointments with the probation officer, dirty urine screens, or new criminal charges, will result in sanctions being imposed by the drug court judge or termination from the program. If the probationer is removed from or withdraws from the drug court for any reason, he or she will be returned to the court of original jurisdiction for sanctioning on the pending probation violation.

Madison County Court Judge David Hopper serves as the drug court judge. Judge Hopper will oversee your progress and have full jurisdiction of the entire process. The judge shall make final determination of entry into the program with input from the appropriate agencies, attorney and treatment staff.

Drug Court Supervision

As a drug court participant, you will initially be required to appear in drug court on a weekly basis. The judge will be given a progress report prepared by the drug court team regarding your drug test results, payment of fees, attendance, participation, and progress toward your treatment goals in the CMH drug court treatment program. The judge may ask you, and/or the drug court team, questions about your progress and discuss any specific problems you have been experiencing. If you are doing well, you will be encouraged to continue with the program and work with your counselor toward success. If you are not doing well, the judge will discuss this with you and CMH staff to determine further action. The goal of the drug court program is to help you achieve total abstinence from all mood-altering chemicals. The judge may change the

condition of your treatment program based on your needs in the CMH treatment program. Failure to appear in court on the date and time you are scheduled will result in a warrant being issued for your arrest and your being placed in custody. New criminal charges could result in your being terminated from the drug court program and prosecution of your original charges or probation violation. Other violations that could result in termination include failing drug screens, failing to cooperate with the treatment program requirements, and directing violence or threats of violence at treatment staff or other clients. All decisions regarding termination from the program will be made by the drug court judge.

Drug Court Program Rules

As a drug court participant, you will be required to abide by the following rules:

1. **Attend all treatment sessions.**
This includes individual and group counseling, case management sessions, education sessions, NA/AA meetings or other recovery-conducive meetings. This also includes appointments for other services that are arranged as part of your program (doctor appointments, job interviews, etc.).
2. **Be on time.**
If you are late, you may not be allowed to attend and will be considered non-compliant.
3. **Do not make threats towards other participants or staff or behave in a violent manner.**
Violence or threats will not be tolerated and will be reported to the Court. This will result in termination from the drug court program.
4. **Do not bring any drugs, alcohol, or weapons onto the treatment center grounds or into the treatment center or court. This could result in immediate termination.**
As a participant, you will be expected to wear a shirt or blouse, pants, dress, skirt, or shorts of reasonable length. Shoes must be worn at all times. Clothing bearing drug or alcohol related themes, promoting, or advertising alcohol or drug use is considered inappropriate. Sunglasses are not to be worn inside the Court or treatment center unless medically approved. Speak with your treatment counselor/case manager if you need assistance with clothing.

Drug Court Participation Fees

Drug Court Participation Fees

\$20.00 fee for the initial evaluation - payable at the time of the evaluation

\$20.00 per week (to the client). **Insurance and other 3rd party payors, if the client has it, will be billed for the remainder of treatment costs. If the client does not have insurance, the CMH has agreed to donate the amount normally covered by insurance, resulting in no additional out-of-pocket cost to the client. \$1,040.00 total for a 12-month drug court program (\$20.00 per week for 52 weeks **or** until completion of the program.)

The drug court expects all fees to be paid weekly. Under extreme circumstances, payment plans may be arranged at The Center for Mental Health. The drug court judge must approve any alternative payment schedule. The following guidelines will be followed:

1. The accrued fees must never be more than **\$40.00** in order to remain active in the program.
2. All accrued fees must be paid in full in order to move from one phase to the next.
3. All drug court fees must be paid in full in order to graduate.
4. In the event of dismissal or withdrawal from the drug court program, the participant will be responsible for paying the balance of all accrued fees.

Payments shall be made at The Center for Mental Health, 2020 Brown St., Anderson, IN.

Payment records will be reported to the judge as part of your regular progress report. Clients are **strongly** encouraged to keep a file of payment receipts to document payment history.

Drug Screen Fees

Random Urine Drug Screens (UDS) will be administered at no cost to the participant. If the participant challenges the result of the UDS, the UDS will be sent to a laboratory for conclusive testing. If the results are negative, there will be no charge to the drug court participant. However, if the lab results are positive, the **\$25.00 lab fee** will be charged to the participant.

Treatment Procedures

The Center for Mental Health Addiction services has established a drug court treatment program. A multi-component outpatient program has been developed that includes:

Assessment and Treatment Planning

You and the drug court team following an overall assessment of your problems and needs will develop your treatment plan. The plan will act as a guide through your year-long treatment. This plan will help you set goals, select methods for meeting those goals, and develop target date for achieving those goals. The plan will be kept in your treatment file for regular review and necessary updates as you progress through the program. Any revisions to the plan will be made and signed by you and your counselor/case manager and approved by the drug court team.

Chemical Testing (UDS/Breathalyzer)

You will be tested throughout the entire treatment process. Clients call in each day to determine if they are in that day's screening group. You will be subject to random drug screens at least twice per week. As you progress through the program, testing will be required on a less frequent basis. The drug court judge will have access to all drug test results, including any failures to test and may order a drug test at any time. You may be asked to provide a specimen for a UDS at any meeting you attend with members of the drug court team. Diluted screens will be considered positive for substances. The goal of the drug court program is to help you achieve total abstinence from all mood-altering substances. The judge will be reviewing you overall performance in the program.

Addiction Services

Substance abuse treatment is comprised of several types of services: individual, intensive

outpatient program (IOP), group, and case management. As part of your treatment plan, you will be required to participate in all types of services. Together they are designed to develop self-awareness, realize self-worth, and practice self-discipline. The individual, IOP, counseling sessions may include problem identification, alternative solutions, videos, lectures and question/answer sessions.

Family/significant other participation is required in IOP (Refer to IOP contract).

Family/ significant other involvement in treatment is **strongly** encouraged throughout the year-long program. Attendance will be required at 12-step meetings such as Narcotics and/or Alcoholics. Anonymous or other approved recovery conducive meetings. Your counselor will provide you with information regarding the time and location of 12-step meetings and other approved recovery conducive meetings. You will be required to turn in meeting slips, signed by the group leader/speaker, at your first CMH group meeting each week. Your counselor will also direct you to special interest and recovery events in the community.

TREATMENT PHASES

Madison County Drug Court treatment program is comprised of an evaluation/pre-treatment stabilization followed by a four-phase, highly structured outpatient treatment program lasting a minimum of one year. It may be longer depending upon your individual progress. To be eligible to graduate, you must complete the program within 18 months. Each phase consists of specified treatment objectives, including therapeutic and rehabilitative actions. The components are described as follows:

Pre-Treatment Stabilization - 3-5 days

Some individuals will require initial detoxification or inpatient stabilization to assess medical and/or psychiatric disorders. An eight-panel urine screen will be done at initial contact to establish a baseline for type(s) of substance(s) used upon entry into drug court treatment.

Phase I Intensive Outpatient Services - 10-12 weeks

Intensive Outpatient Program (IOP)
3 times a week, 3 hours a day

Case Management
Minimum - once a week

12-Step Program
Minimum - 4 times per week

Urine Drug Screen
Minimum - twice a week

Individual Treatment
Minimum - twice week

Judicial Supervision
Weekly drug court appearance

Phase II Relapse Prevention - 10-12 weeks

Relapse Prevention Group
Twice a week, 2 hours per day

Case Management
Minimum - once a week

12-Step Program
Minimum - 4 times per week

Urine Drug Screen
Minimum - twice a month

Individual Treatment
Minimum - one time

Judicial Supervision
Minimum - bi-monthly drug court appearance

Phase III - Aftercare - 10-12 weeks

Aftercare Group Therapy
Once a week for 1 ½ hours

Case Management
Minimum - twice a month

12-Step Program

Minimum - 4 times per week
Urine Drug Screen
Once a month

Individual Treatment
Minimum - one time

Judicial Supervision
Minimum - once a month

Phase IV Continuing Care (Until Graduation)

Aftercare Group Therapy
Once a week for 1 ½ hours

Case Management
Minimum - once a month

12-Step Program
Minimum - twice a week

Urine Drug Screen
Minimum - once a month

Individual Treatment
Minimum - 1 time weekly or as scheduled with counselor

Judicial Supervision
Minimum - once a month

Education, Vocation and Employment Programs

Recovery from substance addiction means developing self-sufficiency and becoming a productive and responsible member of society. Prior to graduation, you will be expected to be employed or involved in an educational or vocational training program. Your counselor will work to assist you in obtaining an assessment of your needs and skills and will refer you to the proper agencies for education, training, and job placement.

Social Services

Upon your entry into the drug court program, your counselor will assess your housing, transportation, family and general living needs, and when appropriate, refer you to a local, state, and/or county agency for assistance.

Graduation Criteria

Graduation Requirements

- a. Provide clean screens for at least the last 6 months of the program
- b. Completion of treatment requirements
- c. Payment of fees in full
- d. Completion of employment and education goals

After Care

The drug court strongly encourages continuation of recovery through participation in 12-step programs. It also appreciates your willingness to provide ongoing feedback about the effectiveness of the program.

Confidentiality

State and Federal law requires that your identity and privacy be protected. In response to these regulations, the Madison County Drug Court and The Center for Mental Health have developed policies and procedures that guard your confidentiality. You will be asked to sign a statement releasing appropriate information to the drug court.

Conclusion

The drug court program has been developed to help you achieve total abstinence from mood-altering substances. The program is designed to promote self-sufficiency and to return you to the community as a productive and responsible member. The program is voluntary and is your personal choice. The judge, the court staff, and your treatment counselor are present to guide and

assist you, but the final responsibility is yours. You must be motivated to make this change and commit to a drug free life. Good luck to you.

We hope this Handbook has been helpful to you and answered most of your questions. If you have any additional questions or concerns about your participation in the drug court program, please feel free to contact your counselor/case manager. Important drug court telephone numbers have been listed for easy reference.

IMPORTANT TELEPHONE NUMBERS

Madison County Drug Court

Monday - Friday 8:00 am to 4:00pm	(765) 608-9716
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The Center for Mental Health

Access Center	(765) 641-8247
Addiction Dept.	(765) 641-8259
Monday, Tuesday, Thursday	8:00 am to 9:00 pm
Wednesday, Friday	8:00 am to 5:00 pm
24-Hour Emergency Service	(765) 649-8161

Community Justice Center

(765) 649-7341

Appendix

Drug Court 10/19/01

Sanctions / Incentives Menu

Increase/decrease required 12-step meetings.

Increase/decrease frequency and/or type and/or level of services, add individual session, Recovery Wellness, Life Enhancement, OP groups (individualize based on persons needs).

Increase/decrease frequency of urine screens.

Increase/decrease frequency of contact - case management / check in points on weekends, group home / CJC.

Increase/decrease residential, 1 day to 1 year +
Christian Center, House of Hope, Dove Harbor, Alternative, Work Release, Electronic Monitoring, jail weekend and more.....

Increase/decrease frequency of court appearances
sit in the box
early turn on docket and dismissed
sit through Drug Court on days not included

Increase/decrease community service
connect to non-payment
connect to missed appointments
connect to no employment

Increase/decrease fees \$\$\$.

Increase/decrease time in program (extensions), set maximum time in program to 18 months.

Drug Court CMH Service Options (10/19/01)

Intensity / Level of Continuum

Treatment Options

Chemical Dependency

SAFE - 6 sessions

INDIVIDUAL - 1 time per week or PRN

IOP - 3 times per week, 3 hours per day, AM/PM (8 weeks)

Relapse Prevention - 2 times per week, 2 hours per day (10 weeks)

Aftercare - 1 time per week, 1 ½ hours (12 weeks)

Dual Mental Health/Chemical Dependency

Recovering Wellness - 1 time per week, 2 ½ hours (Dual DXS, MI/CD)

Life Enhancement - 1-4 times per week, 2 ½ hours per, 3-6 months

Life Basics- MI/CD/CC- 1-3 times per week, 2-4 ½ hours per

Mental Health

Anger Management Group- 1 time per week, 1 ½ hours, 8-10 weeks

Cognitive Behavior Treatment Group - 1 time per week, 1 ½ hours, 8-10 weeks,
ongoing

Family / Individual Counseling

Financial Counseling

Residential

Respite 1-7 days

Short term 7-60 days

Transitional 60-180 days

Long Term 1-2 years

HUD cluster apartments/group home 1 year +

Case Management

Case Management- 1-5 times per week, PRN

GRIP - (Intensive Case Management)- 1 to multiple contacts daily, 1-7 days per
week

Vocational

Supported Employment - works in conjunction with Vocation Rehabilitation;
services

range from testing/occupational/vocational assessment to education/training/ job
placement/job coaching/follow-along

Inpatient/Detox

Detox - 3-5 days, medical necessity (Inpatient)

2-10 days, Outpatient detox, Residential/GRIP, medically
monitored

Richmond State Hospital - 2 weeks to 3 months inpatient

Inpatient Stabilization - 1-5 days

PERSONAL Calendar for :

Sun.	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.

I, _____, have reviewed the Madison County Drug Court Participant's Handbook. I understand and agree to follow all of the drug court Guidelines as outlined in the handbook.

Participants Name

Date

Witness

Date