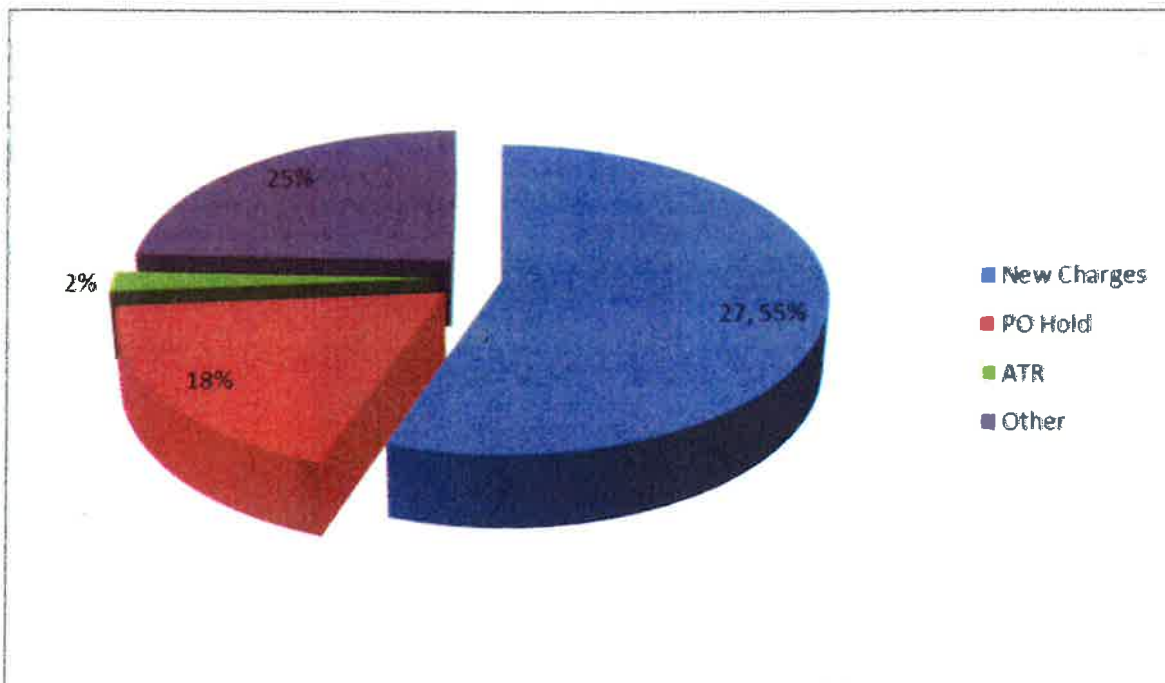
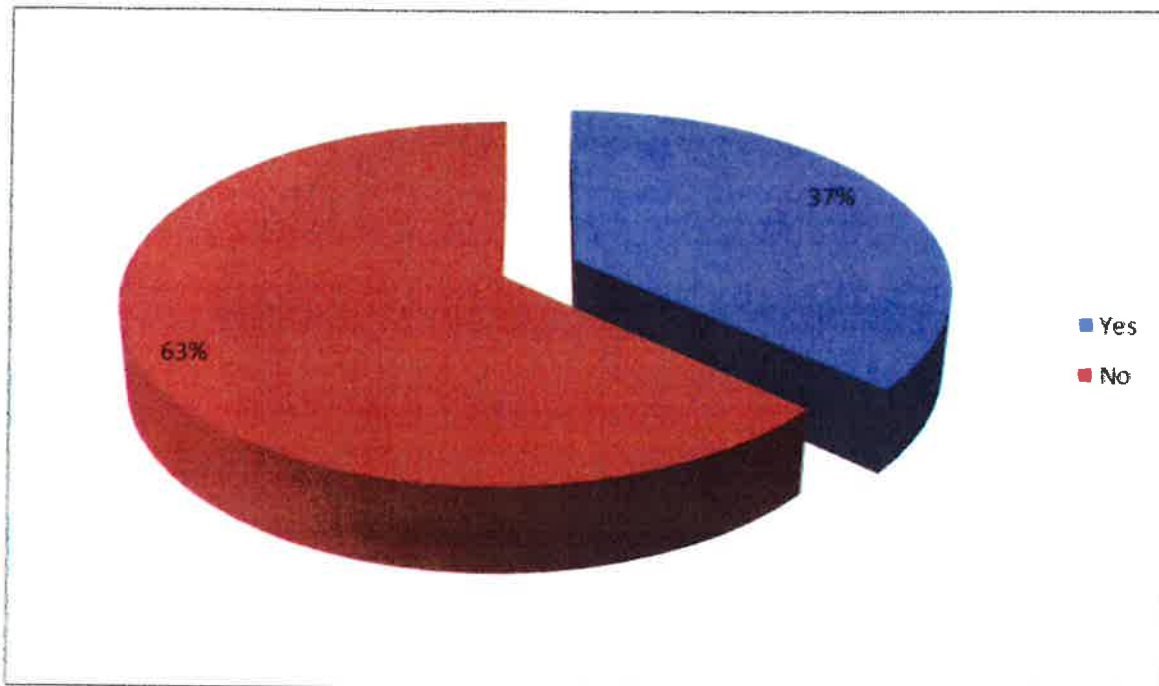


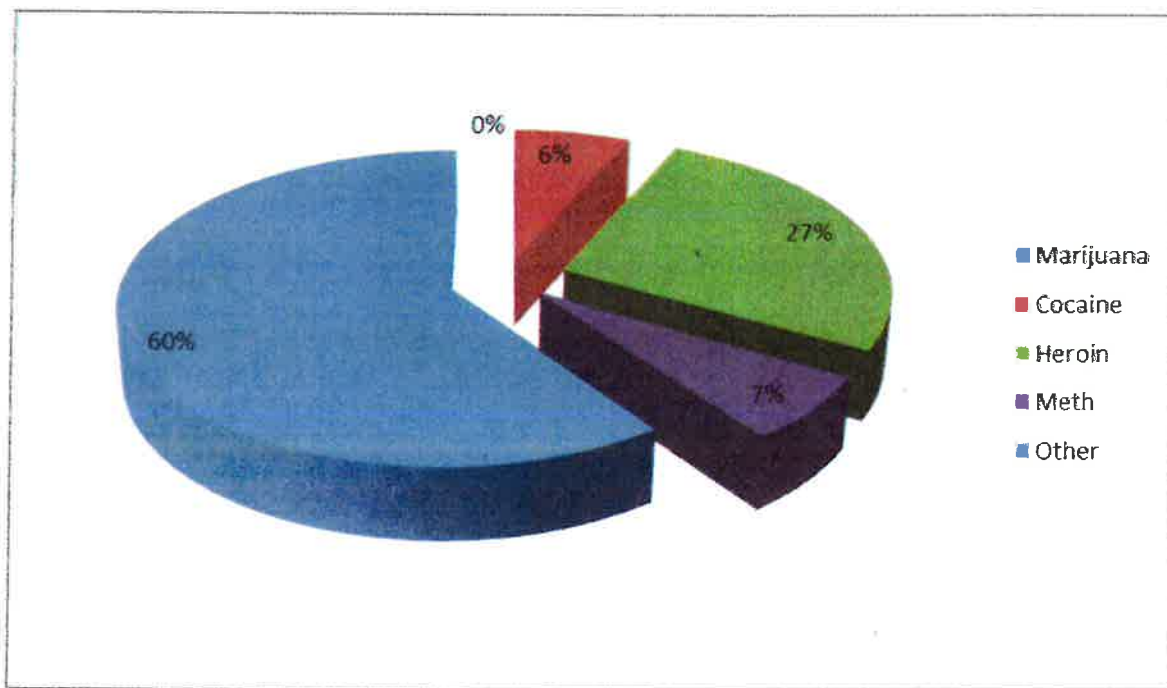
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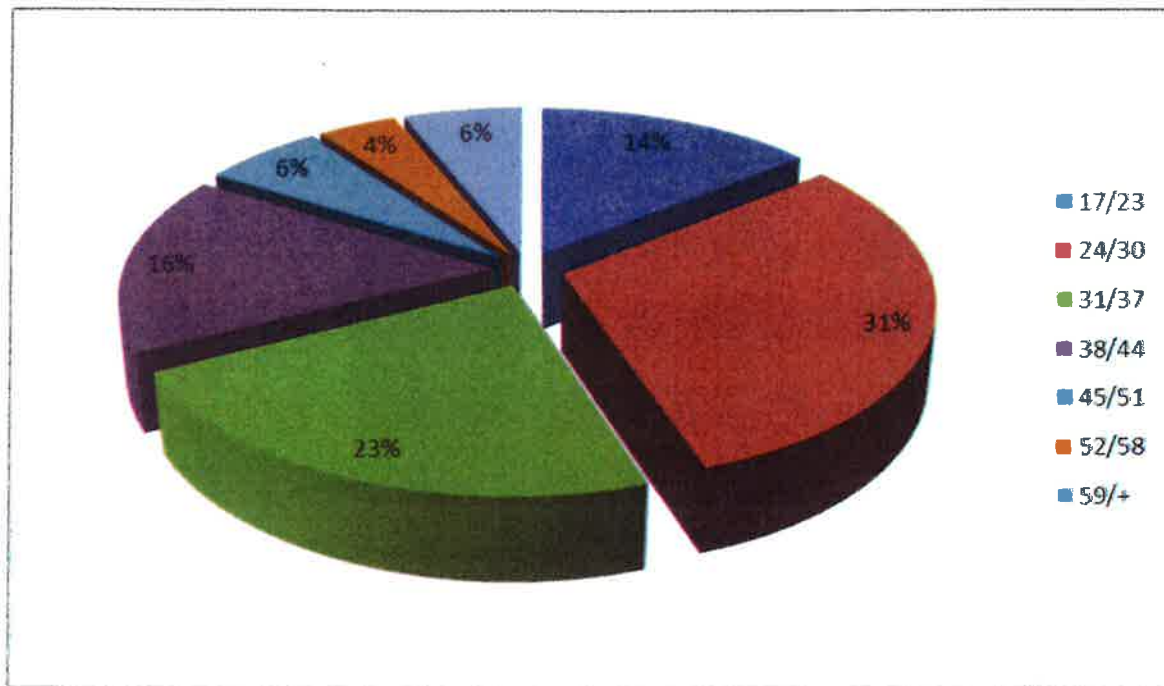
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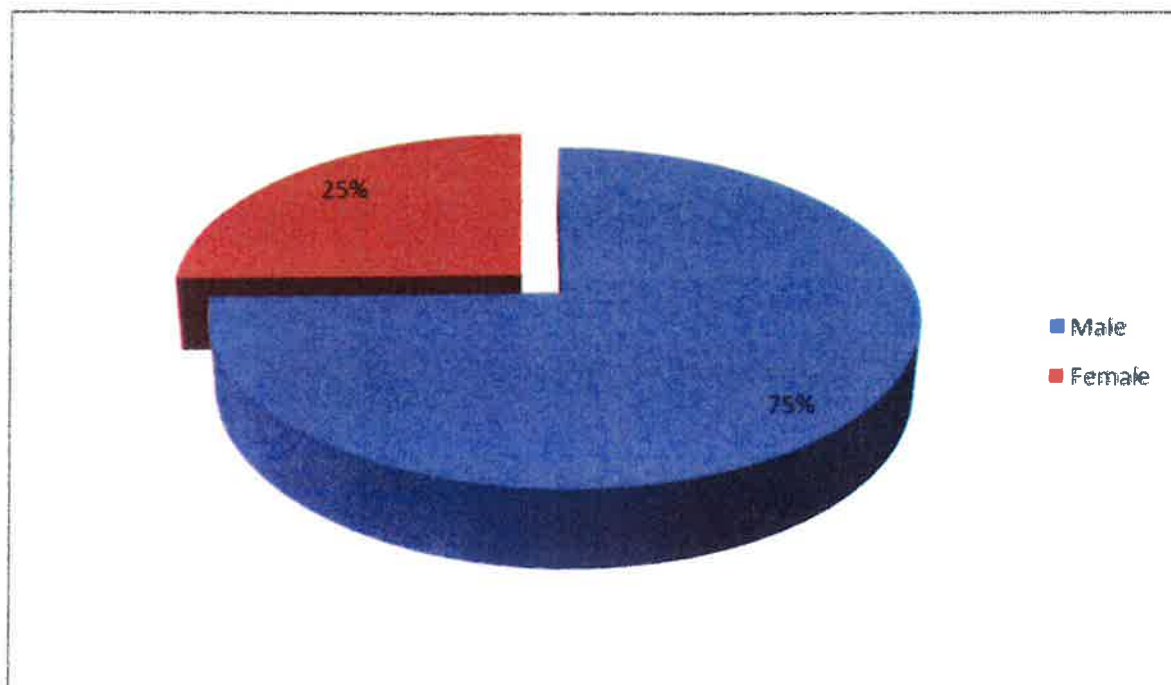
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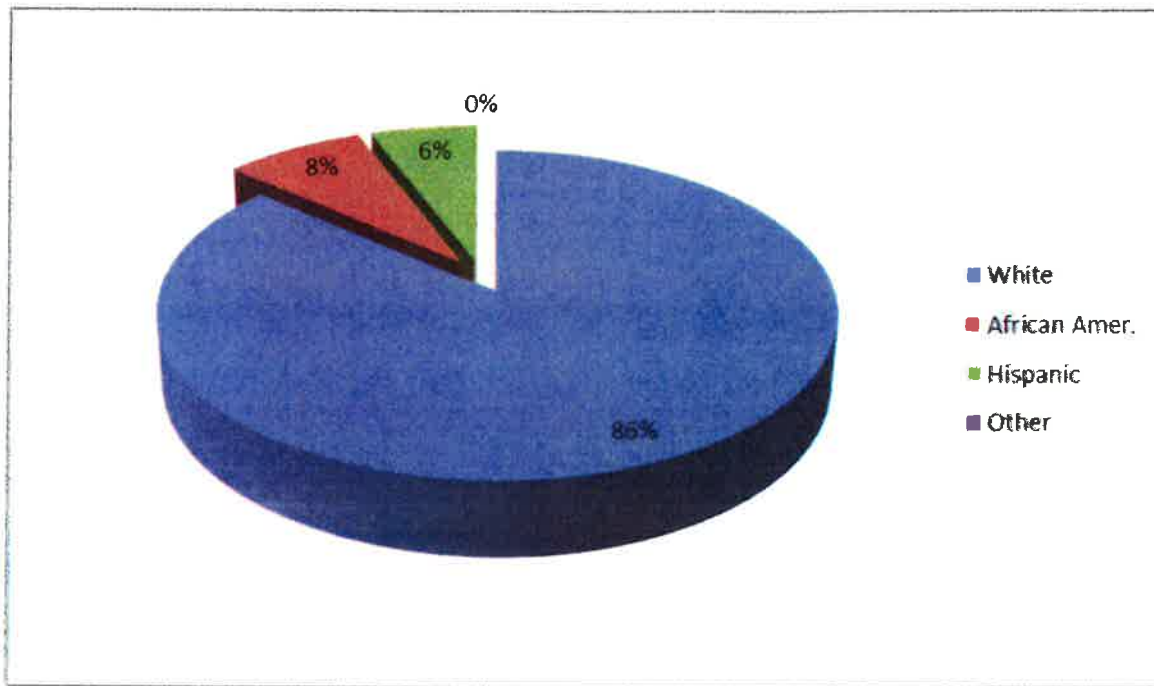
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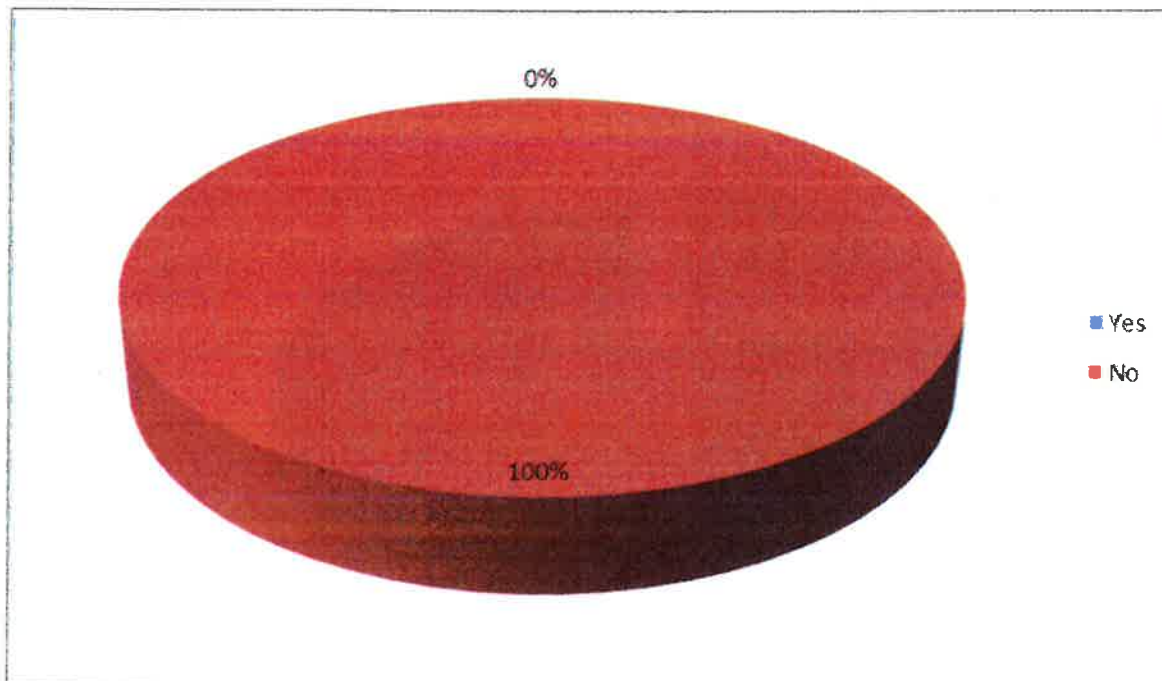
AGE PROFILE



GENDER PROFILE



ETHNIC PROFILE



WEAPONS USED



**JEFFERSON COUNTY ALCOHOL TREATMENT
COURT**

POLICIES & PROCEDURES MANUAL

JEFFERSON, WISCONSIN

Created _____ 2016

**Jefferson County Alcohol Treatment Court Policies &
Procedures Manual**

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I. Jefferson County Alcohol Treatment Court Steering Committee

The Executive Committee of the Criminal Justice Collaborating Council (CJCC) will serve as the Steering Committee for the Jefferson County Alcohol Treatment Court (JCATC). The Committee meets on a monthly, defined, basis and will regularly review program outcomes as well as resolve policy and operational issues if they arise and cannot be resolved by the JCATC staffing team. The CJCC Executive Committee consists of thirteen members:

- Jefferson County Administrator
- Chief or Presiding Circuit Court Judge
- Jefferson County Board Chair
- District Attorney
- Jefferson County Human Services Director
- State Public Defender
- Jefferson County Sheriff
- Jefferson County Clerk of Courts
- Mayor, City of Watertown
- Department of Corrections
- Jefferson County Corporation Counsel
- Literacy Council Executive Director
- Jefferson County Corporation Counsel
- Police Chief, City of Waterloo

II. The Jefferson County Alcohol Treatment Court Team

- Jefferson County Alcohol Treatment Court Judge – the circuit court judge who participates in weekly JCATC team staffings and presides over the treatment court sessions. The Judge plays a continuous active role in reviewing treatment progress, determining appropriate sanctions and incentives and responding to participants' positive efforts and noncompliant behavior.
- JCATC Case Managers – Wisconsin Community Services (WCS) case managers assigned to JCATC whose role is to assess potential participants for eligibility, oversee and monitor the participants' recovery and treatment program, and act as the link between the Court, the participant, and the treatment provider. Case manager's responsibilities also include: maintaining participant information (written record); providing the Court with current information about client progress; recommending treatment changes to the Court.
- Defense Attorney – a representative from the Jefferson County Public Defender's Office. A participant may have their individual attorney attend JCATC staffings and court sessions.
- District Attorney - a representative of the Jefferson County District Attorney's Office who attends JCATC staffings and court sessions. The District Attorney also

makes the initial eligibility determination of each participant.

- Probation and Parole - a representative from Department of Corrections who attends treatment court staffings and court sessions. Probation and Parole work closely with WCS in monitoring the supervision of all participants.
- Treatment Providers – the treatment providers have the primary responsibility for educating the participants and ensuring that participants are provided the treatment that they need.

III. Mission Statement

The mission of the JCATC Program is to reduce the number of repeat drunk drivers (OWI) by allowing OWI offenders to participate in alcohol and other substance abuse treatment under strict judicial and community supervision. The JCATC will use community and justice system resources in a cost effective and efficient manner while holding offenders accountable and enhancing public safety.

IV. Goals

The JCATC goals are to reduce recidivism rates for nonviolent OWI offenders thereby increasing public safety and reducing prison and jail populations by diverting nonviolent OWI offenders through the JCATC.

COMMUNITY IMPACT GOALS

1. Reduce the recidivism rate of OWI/PAC 3rd and subsequent offenders.
 - a) Measure the number/percent of participants that are rearrested for another alcohol-related driving offense within 18 months of discharge from the JCATC.
 - b) Measure program participants' recidivism rates compared to the rates of OWI/PAC 4th and subsequent offenders who do not participate in the program.
 - c) Decrease the number and percentage of citizens arrested for an OWI/PAC 4th or subsequent offense.
 - d) Decrease the number and percent of participants' new convictions(arrests?) for all alcohol/drug related offenses when examined against a comparison group.
2. Improve the integration of OWI 3rd or subsequent offenders into the legal driving community.
 - a) Decrease the number and percent of participants' new convictions for driving-related offenses, e.g., driving after revocation, driving while suspended, etc. The JCATC participants will be examined against a comparison group.
 - b) Increase the percent of participants who obtain or reinstate their driving privileges.

PROGRAM AND PROCESS GOALS

1. Graduate 66 percent of all participants entering the program.

- a) A goal will be that 66 percent of the graduates successfully discharge within 12 months of entering the program.
 - b) Program participants that terminate unsuccessfully do so in less average time than it takes graduates to complete. This is not the norm for other alcohol treatment courts.
- 2. Improve the health of participants compared when they entered the program.
 - a) Entry surveys will be conducted of all participants, along with the screening and assessment information and compared to exit surveys and re-assessment information of participants as they progress through the program.
- 3. Develop an understanding of local offenders' various characteristics that allow for more effective interventions based on those characteristics and identification earlier in the assessment process.
- 4. Promote operational collaboration between the treatment, law enforcement, courts, physical health, social services, and corrections.

V. Structure/Model

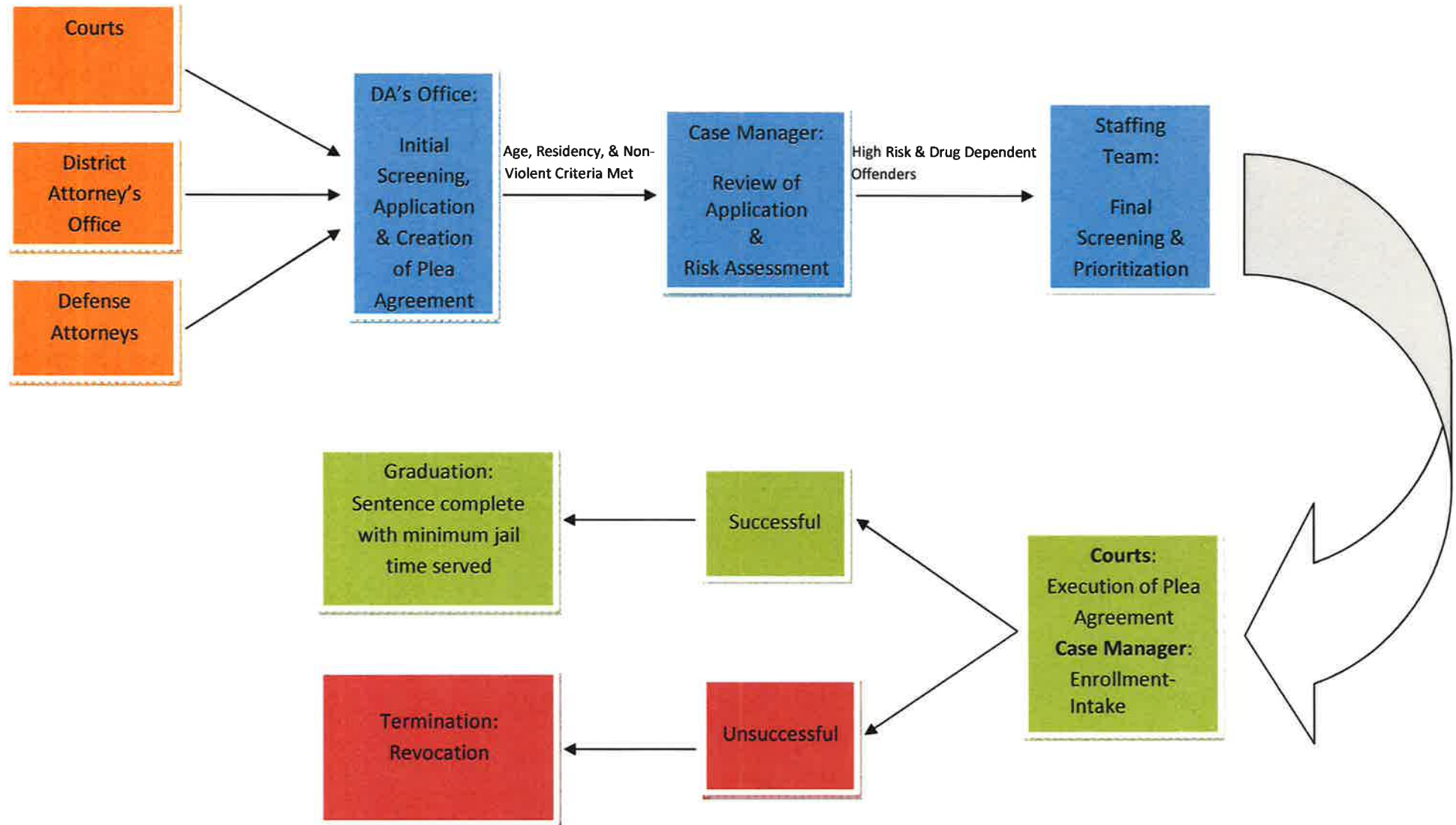
The JCATC is post-plea, post-judgement probation model for non-violent offenders charged with OWI 3-to-6. Potential participants are identified through referral, application, and eligibility screening process and agree to voluntarily participate in the JCATC program as a result of a negotiated plea agreement. Utilizing a collaborative, non-adversarial criminal justice approach to prosecutions of OWI offenses, JCATC employs partnership of intense court supervision to hold offenders accountable and comprehensive community based treatment interventions to change destructive behavior, ensure sobriety and reduce repeat OWI offenses.

Participants must meet the eligibility requirements for entry into the JCATC program (as defined under the section "Eligibility Criteria"), must go through the referral and application process (see section "Entry Process"), and must have a verifiable history of substance abuse and/or drug dependence. If the offender is determined to be ineligible for Alcohol Court enrollment, the case will be returned to the District Attorney's Office to resume traditional case prosecution.

Once enrolled in the JCATC program, participants should anticipate that they will remain enrolled in the program for at least 12 months while participating in a structured, four-phase program that involves treatment, urinalysis, breath analysis, case management, and other program-related requirements (see section X "Phases"). Upon successful completion of the JCATC and approval by the staffing team for graduation, the participant successfully completes their sentence with a reduced jail term. Discharge from the JCATC may result in probation revocation proceedings. The following flow chart depicts the JCATC program from referral through discharge:

JEFFERSON COUNTY ALCOHOL TREATMENT COURT PROGRAM FLOW CHART FROM REFERRAL TO DISCHARGE

Referral Sources



VI. Target Population

The JCATC target population is adult criminal court offenders charged with offense levels of OWI-3rd through OWI-6th, as it is well known that by the time an individual reaches the offense level of OWI-3, there has either been unsuccessful application of information and insight gleaned from prior AODA assessment and treatment or a lack of assessment and treatment to address alcohol or drug misuse coupled with OWI conduct. The JCATC utilizes written eligibility criteria that provide clear assessment criteria for intake workers to assess JCATC candidates.

JCATC targets non-violent offenders where there is a reasonable assumption that the offender's criminal activity is connected directly to the ongoing, chronic, and habitual alcohol and/or drug use. Offenders enrolled in the JCATC program have social histories hallmarked by prior convictions for OWI, previous exposure to alcohol and drug treatment systems, and a history of relapse into substance abuse. Absent an interruption in their cycle of drunk driving and substance abuse, it is likely that criteria-eligible offenders will continue to commit drunk-driving crimes, re-enter the criminal justice system and be exposed to long-term incarceration and other negative consequences that often result from traditional, less resource-intensive approaches to case disposition. The JCATC targets high-risk offenders who require more intensive focus on treatment, monitoring, and judicial intervention.

VII. Eligibility Criteria

Offenders entering the JCATC program must meet the following eligibility criteria:

- o Offender is a Jefferson County resident with a pending Jefferson County criminal OWI 3-6 court case, unless otherwise approved. Non-county residents may participate if they are able to provide the ability to successfully complete the program.
- o Offender is 18 years of age or older.
- o Offender is not alleged to have committed a violent crime and does not have a history of violent crime.
- o There is evidence that offender meets High-risk/High-need threshold.
- o There is evidence that offender is alcohol and/or drug dependent.
- o Approved by the Jefferson County District Attorney's Office.
- o Offender voluntary consents to the participation in the JCATC Program as part of a binding plea agreement in the criminal OWI 3-6 case.

A "violent offender" who is not eligible to participate in JCATC is defined as a person who either:

1. Is charged with or convicted of an offense that is punishable by a term of imprisonment exceeding 1 year, during the course of which:
 - a) the person carried, possessed, or used a firearm or a dangerous weapon,
 - b) the person used force against another person, or
 - c) there occurred the death of, or serious bodily injury to, any person, without regard to whether any of the circumstances described is an element of the offense or conduct of which or for which the person is charge or convicted;

2. Has one or more prior convictions for a felony crime of violence involving the use or attempted use of force against another person with the intent to cause death or serious bodily harm.

VIII. Termination Criteria

Participation in JCATC is an opportunity for an offender to overcome his/her dependence on drugs and/or alcohol. Through successful completion of the JCATC program, offenders will overcome their addiction and avoid repeat drunk driving. Offenders may be discharged from the program if it is in the interests of the community and/or the credibility of the JCATC program to do so. The following are some examples of circumstances that may result in termination. However, this list is not all-inclusive, as it is difficult to identify every circumstance that may lead to discharge.

- New OWI arrest
- Arrest on probable cause for a felony
- Arrest on probable cause for a violent misdemeanor
- Arrest for any aggravated OWI charge (e.g. causing injury or death, with a minor passenger, etc.)
- Repeated patterns of non-compliance in which the staffing team and ultimately the JCATC Judge deems that termination will occur
- Tampering with a drug test

IX. Eligibility Screening and Entry Process

The eligible participant pool for the JCATC, those arrested for OWI-3rd through OWI-6th, will flow through custodial intake court within 24-48 hours from arrest. Eligible participants can be promptly advised about the program and eligibility screening, based on established written guidelines and criteria and accomplished by trained professionals, can be completed quickly. Upon the participant agreeing to JCATC participation, the court can also quickly order that participants enroll in AODA services. The Jefferson County District Attorney's office is the gatekeeper of the JCATC program and all referrals must go through their office. The District Attorney screens candidates to ensure they meet the established eligibility requirements and comply with program requirements. If the District Attorney determines the offender to be eligible for JCATC, the District Attorney will make a referral to WCS.

The defense attorneys work with offenders to inform them of the JCATC process, protect JCATC participants' due process rights, and encourage participants' commitment to JCATC. Defense counsel shall review all relevant JCATC materials and counsel eligible candidates. Treatment court is a serious commitment for participants so it is essential that defense counsel review and speak with offenders about case and treatment court documents. Treatment court eligible participants should also be made aware of court rules, the benefits of treatment court participation, what rights will be temporarily relinquished, the benefits of long term sobriety, non-treatment court alternative courses of action, and the need to be honest with the court and treatment providers about alcohol and controlled substance use.

Defendants must fill out an application and send it to WCS. A WCS case manager reviews application and conducts an interview during which the defendant undergoes risk assessment to confirm eligibility for the JCATC. The case manager will share the results of the risk assessment with the JCATC staffing team. The staffing team makes the final determination about admission to JCATC.

Entry into the JCATC program is effectuated through a binding plea agreement in a criminal OWI 3 - 6 case. A prospective JCATC participant, as part of the plea agreement, agrees to participate in the JCATC. The offender, his/her Defense Counsel, and the District Attorney must agree to the terms of the plea agreement. No JCATC participant will be enrolled in the JCATC over the objection of the District Attorney's Office. Prospective participants must be referred and approved for admission to the JCATC before the plea and sentencing hearing. Criteria-eligible offenders are admitted to the JCATC upon sentencing.

X. Phases

The JCATC is a four-phase treatment model, designed to last 12 months, depending on each participant's treatment needs, progress and compliance with the program requirements as the participant moves through the four phases. Graduation may occur within one year, but JCATC participants should expect to be in the program longer if setbacks prevent them from being promoted to subsequent phases.

Each phase of the program has specific elements and program criteria that must be completed prior to moving to the next phase, such as routine court appearances, case management appointments that include both office and home visits, treatment requirements and random alcohol and drug testing, etc. In some cases, participants may be returned to a lower phase as part of a sanction or if the staffing team decides that he or she could benefit from the more intensive requirements of a lower phase.

Intensive case management is a critical component to provide support and monitoring, assisting participants in reaching their goals. Treatment for participants consists of: assessment and treatment planning, individual and/or group counseling for substance use and other issues, regular attendance at community self-help support meetings, and assistance with education, life skills, parenting, financial and employment issues. Positive reinforcement is provided for compliance in the program. A system of graduated sanctions and therapeutic interventions will be imposed in response to non-compliance.

JCATC OFFENDER PHASE REQUIREMENT CHART – OWI 3rd OFFENSE

	Phase I	Phase II	Phase III	Phase IV
	90 Days*	90 Days	90 Days	90 Days
Court Obligations	<ul style="list-style-type: none"> ➤ Appear before Judge every 2 weeks *More frequently if noncompliant 	<ul style="list-style-type: none"> ➤ Appear before Judge every 4 weeks *More frequently if noncompliant 	<ul style="list-style-type: none"> ➤ Appear before Judge every 4 weeks *More frequently if noncompliant 	<ul style="list-style-type: none"> ➤ Appear before Judge every 8 weeks *More frequently if noncompliant
Supervision/Monitoring Requirements	<ul style="list-style-type: none"> ➤ 15 days jail & 30 days SCRAM CAM ➤ Meet with case manager at least once every week ➤ Random alcohol testing at least 2 times per week following SCRAM 	<ul style="list-style-type: none"> ➤ Meet with case manager at least once every 2 weeks ➤ Random alcohol testing at least 2 times per week 	<ul style="list-style-type: none"> ➤ Meet with case manager at least once every 2 weeks ➤ Random alcohol testing at least 2 times per week 	<ul style="list-style-type: none"> ➤ Meet with case manager at least once a month ➤ Random alcohol testing at least 2 times per week
Treatment Requirements	<ul style="list-style-type: none"> ➤ Assessment and individualized treatment plan ➤ Attend at least 2 self-help meetings per week ➤ Obtain a sponsor and have minimum of weekly contact 	<ul style="list-style-type: none"> ➤ Attend treatment as identified in assessment ➤ Attend at least 2 self-help meetings per week ➤ Minimum of weekly contact with sponsor 	<ul style="list-style-type: none"> ➤ Attend treatment as identified in assessment ➤ Attend at least 2 self-help meetings per week ➤ Minimum of weekly contact with sponsor 	<ul style="list-style-type: none"> ➤ Develop aftercare plan ➤ Attend AODA recovery group 1 time per month ➤ Attend 2 self-help meetings per week ➤ Minimum of weekly contact with sponsor
Other Requirements	<ul style="list-style-type: none"> ➤ Attend Victim Impact Panel if not previously attended 	<ul style="list-style-type: none"> ➤ Attend Victim Impact Panel if not previously attended 	<ul style="list-style-type: none"> ➤ Attend Victim Impact Panel if not previously attended 	<ul style="list-style-type: none"> ➤ Pre-graduation conference and exit interview ➤ Voluntary Alumni Program participation

*All program components represent **minimum** requirements. Phase length represents minimum time frame required to complete. It is expected that most participants will remain in Alcohol Treatment Court for 12 months.

JCATC OFFENDER PHASE REQUIREMENT CHART – OWI 4th OFFENSE

	Phase I	Phase II	Phase III	Phase IV
	120 Days*	90 Days*	90 Days	60 Days
Court Obligations	<ul style="list-style-type: none"> ➤ Appear before Judge every 2 weeks *More frequently if noncompliant 	<ul style="list-style-type: none"> ➤ Appear before Judge every 4 weeks *More frequently if noncompliant 	<ul style="list-style-type: none"> ➤ Appear before Judge every 4 weeks *More frequently if noncompliant 	<ul style="list-style-type: none"> ➤ Appear before Judge every 4 weeks *More frequently if noncompliant
Supervision/Monitoring Requirements	<ul style="list-style-type: none"> ➤ Misdemeanor: 30 days jail & 90 days SCRAM CAM ➤ Felony: 90 days jail & 90 days SCRAM CAM ➤ Meet with case manager at least once every week ➤ Random alcohol testing at least 3 times per week following SCRAM 	<ul style="list-style-type: none"> ➤ Meet with case manager at least once every 2 weeks ➤ Random alcohol testing at least 3 times per week 	<ul style="list-style-type: none"> ➤ Meet with case manager at least once every 2 weeks ➤ Random alcohol testing at least 2 times per week 	<ul style="list-style-type: none"> ➤ Meet with case manager at least once a month ➤ Random alcohol testing at least 2 times per week
Treatment Requirements	<ul style="list-style-type: none"> ➤ Assessment and individualized treatment plan ➤ Attend at least 3 self-help meetings per week ➤ Obtain a sponsor w/n 30 days and have minimum of weekly contact 	<ul style="list-style-type: none"> ➤ Attend treatment as identified in assessment ➤ Attend at least 3 self-help meetings per week ➤ Minimum of weekly contact with sponsor 	<ul style="list-style-type: none"> ➤ Attend treatment as identified in assessment ➤ Attend at least 2 self-help meetings per week ➤ Minimum of weekly contact with sponsor 	<ul style="list-style-type: none"> ➤ Develop aftercare plan ➤ Attend AODA recovery group 1 time per month ➤ Attend 2 self-help meetings per week ➤ Minimum of weekly contact with sponsor
Other Requirements	<ul style="list-style-type: none"> ➤ Attend Victim Impact Panel if not previously attended 	<ul style="list-style-type: none"> ➤ Attend Victim Impact Panel if not previously attended 	<ul style="list-style-type: none"> ➤ Attend Victim Impact Panel if not previously attended 	<ul style="list-style-type: none"> ➤ Pre-graduation conference and exit interview ➤ Voluntary Alumni Program participation

*All program components represent **minimum** requirements. Phase length represents minimum time frame required to complete. It is expected that most participants will remain in Alcohol Treatment Court for 12 months.

JCATC OFFENDER PHASE REQUIREMENT CHART – OWI 5th OFFENSE

	Phase I	Phase II	Phase III	Phase IV
	120 Days*	90 Days*	90 Days	60 Days
Court Obligations	<ul style="list-style-type: none"> ➤ Appear before Judge every 2 weeks *More frequently if noncompliant 	<ul style="list-style-type: none"> ➤ Appear before Judge every 4 weeks *More frequently if noncompliant 	<ul style="list-style-type: none"> ➤ Appear before Judge every 4 weeks *More frequently if noncompliant 	<ul style="list-style-type: none"> ➤ Appear before Judge every 4 weeks *More frequently if noncompliant
Supervision/Monitoring Requirements	<ul style="list-style-type: none"> ➤ 120 days jail & 90 days SCRAM CAM ➤ Meet with case manager at least once every week ➤ Random alcohol testing for 30 days at least 4 times per week following SCRAM 	<ul style="list-style-type: none"> ➤ Meet with case manager at least once every 2 weeks ➤ Random alcohol testing at least 4 times per week 	<ul style="list-style-type: none"> ➤ Meet with case manager at least once every 2 weeks ➤ Random alcohol testing at least 3 times per week 	<ul style="list-style-type: none"> ➤ Meet with case manager at least once every 4 weeks ➤ Random alcohol testing at least 3 times per week
Treatment Requirements	<ul style="list-style-type: none"> ➤ Assessment and individualized treatment plan ➤ Attend at least 4 self-help meetings per week ➤ Obtain a sponsor w/n 30 days and have minimum of weekly contact 	<ul style="list-style-type: none"> ➤ Attend treatment as identified in assessment ➤ Attend at least 4 self-help meetings per week ➤ Minimum of weekly contact with sponsor 	<ul style="list-style-type: none"> ➤ Attend treatment as identified in assessment ➤ Attend at least 3 self-help meetings per week ➤ Minimum of weekly contact with sponsor 	<ul style="list-style-type: none"> ➤ Develop aftercare plan ➤ Attend AODA recovery group 1 time per month ➤ Attend 3 self-help meetings per week ➤ Minimum of weekly contact with sponsor
Other Requirements	<ul style="list-style-type: none"> ➤ Attend Victim Impact Panel if not previously attended 	<ul style="list-style-type: none"> ➤ Attend Victim Impact Panel if not previously attended 	<ul style="list-style-type: none"> ➤ Attend Victim Impact Panel if not previously attended 	<ul style="list-style-type: none"> ➤ Pre-graduation conference and exit interview ➤ Voluntary Alumni Program participation

*All program components represent **minimum** requirements. Phase length represents minimum time frame required to complete. It is expected that most participants will remain in Alcohol Treatment Court for 12 months

XI. Graduation Requirements

Participants will graduate from the program (and not be subject to any further jail sentence or sanctions for this offense) if they meet following requirements:

1. NO positive urinalyses and/or breath tests within six (6) months of commencement.
 - If the participant has a positive drug and/or breath test within six months of anticipated graduation date, contract will be extended for six months from date of positive drug and/or breath test. Participant must have six months of sobriety in order to graduate.
2. NO missed oral fluid drug test and/or breath test within six months of commencement.
 - First missed drug and/or breath test during last six months of contract may extend contract a minimum of one week. Second or subsequent missed drug and/or breath test during last six months of contract may extend contract for a minimum of two months from date of missed drug and/or breath test.
3. NO missed court dates, treatment sessions, or case management appointments within six months of commencement.
 - The Court reserves discretion to deny graduation and extend the contract if a miss occurs within six months of graduation.
4. Complete all four phases of the program.
5. Pay all financial obligations associated with the offenses
 - i.e.: SCRAM fees, fines, court costs, attorney fees, Huber fees, and treatment and assessment costs.

XII. Incentives and Sanctions

The JCATC program employs a variety of graduated rewards to recognize and reinforce progress, and of graduated sanctions to address non-compliance, applied along an established protocol that specifically gives incentive/sanction levels for various actions.

Incentives

The reward process recognizes the positive achievements of the JCATC participants as they progress through the phases of the program, from active addiction to sobriety. Incentives will be provided not only for major milestones (phase changes), but also for many lesser events. The expected average and modal time interval between an accomplishment and reward will be greater than that of an infraction and a sanction and directly related to the time period from one JCATC appearance to the next. Behavioral changes that may result in a reward are discussed and recommended by the staffing

team at the regularly scheduled status review hearings. Rewards may take many forms and will be consistent with the goals and objectives of the participant's treatment plan. Rewards may include, but are not limited to, the following:

- o Encouragement and praise from the JCATC judge and team
- o Tokens/coins or certificates of completion of individual program goals
- o Decreased frequency of court appearances and/or meetings with case manager
- o Advancement to next phase
- o Gift cards or gift certificates (restaurants, grocery stores, etc.); candy/health bar
- o Using imposed and stayed sanctions when appropriate, at the discretion of the judge, in order to recognize a participant's overall positive performance
- o advancement to the top of the court docket during JCATC sessions
- o Reduced number of self-help meetings

Sanctions

Non-compliance is addressed at the status review hearing. Since sanctions are most effective when imposed immediately, participants violating the terms and conditions of their enrollment in JCATC will be required to report in person to the next scheduled JCATC docket. Thus, the non-compliance issue(s) can be addressed as early as possible. The JCATC staffing team will discuss and agree upon the mandatory sanction to be imposed for non-compliance, emphasizing a team, rather than an adversarial process. Sanctions may include, but are not limited to, the following:

- o Warnings and admonishments by the JCATC Judge in open court
- o Increased frequency of court appearances and/or office/home visits with case manager
- o Increased frequency of urinalyses and/or breath testing and/or other treatment requirements of the defined treatment program
- o Writing assignments
- o Community service hours
- o Extension of the time required to complete current phase of the program or re-start current phase over
- o Demotion to a lower program phase
- o Re-imposition of electronic monitoring/SCRAM or house arrest
- o Escalating periods of jail confinement
- o Increase in intensity of treatment and/or self-help support meetings.

Positive drug test results will result in increased sanctions that will lead to greater restrictions on freedom, to include phase reduction, SCRAM electronic monitoring, work release, and jail. It may also include increases in treatment and self-help support requirements and community service. Missing treatment sessions is another example of a rapid increase in sanctions similar to providing positive tests.

The treatment protocol provides for intensive therapeutic interventions for alcohol and drug dependent persons enrolled in the JCATC program. The treatment model is outpatient; however, participants may be referred to and required to successfully complete a residential treatment program if necessary. The program also has a treatment protocol for those who have co-occurring mental health and substance abuse disorders.

Consistent with the Drug Court model, treatment begins with a thorough and complete assessment of an offender's history and level of involvement with alcohol and other drugs. Based on this assessment, the assigned therapist will develop a treatment plan which may include the following elements:

- Individual outpatient treatment
- Group outpatient treatment
- Intensive outpatient treatment
- Inpatient treatment
- Day treatment
- Residential treatment
- Medication-assisted treatment
- Mandatory attendance at self-help meetings, such as Narcotics or Alcoholics Anonymous (NA & AA)
- Mandatory urinalysis and/or breathalyzer testing
- Ongoing reassessments
- Relapse prevention groups
- Aftercare planning

The Case Manager will remain in constant communication with the therapist to assist in facilitating the treatment plan and coordinate treatment requirements (i.e. drug and alcohol testing) to avoid duplicating services.

XIV. Supervision Protocol

Supervision is a shared responsibility among all members of the JCATC Staffing Team, which is achieved through effective collaboration, decision-making, and rapid response to conditions that may lead to relapse or further criminal activity by program participants. Unique to the JCATC model is the active, personal involvement of the Alcohol Treatment Court Judge at regularly held JCATC staffings and court sessions with each of the program participants.

However, the primary responsibility for day-to-day supervision of program participants

rests with the assigned Case Manager. The Case Manager will develop an individualized treatment and supervision plan with each participant enrolled in the program. Working in collaboration with the staffing team, the Case Manager will meet weekly or bi-weekly with each JCACT participant and report his/her status at the weekly JCACT Staffing Team meeting. For those participants also on probation, the designated agent from the Department of Corrections will coordinate with the Case Manager and share supervision and monitoring responsibilities to avoid duplicating services.

All members of the staffing team will keep the Case Manager informed of any conditions that might negatively impact the capacity or ability of the JCACT program to successfully monitor and supervise participants.

The case manager has specific responsibilities in the following areas:

- a. Alcohol Treatment Court Team Staffings: The case manager is a member of the Alcohol Treatment Court Team and is responsible for the preparation of cases for review at the team staffings. In addition, the case manager may, at any time, provide information concerning any participant to the Alcohol Treatment Court Judge on a formal or informal basis; provided the necessary waivers have been signed by the participant and the content of the communication is made known to the participant.
- b. Referrals: The case manager refers Alcohol Treatment Court participants to providers for substance abuse treatment and other services, as determined in the case plan developed by the case manager and approved by the Court. The case manager maintains close contact with the treatment provider and monitors the services received by the participant.
- c. Case Management: The case manager periodically assesses the progress of each participant and the participant's adherence to the requirements of the Alcohol Treatment Court and the participant's approved case plan. They update the case plan as needed and make recommendations to the Court for appropriate changes.
- d. Other Direct Client Services: The case manager ensures participants are linked to services within Jefferson County on an as-needed basis, including: family counseling, education, group counseling and other activities as may be reasonably appropriate to maintain a client in the Alcohol Treatment Court Program.
- e. Participant Documentation: The case manager maintains a written record on each participant.

XV. Testing Protocol

JCATC participants will participate in mandatory, random oral fluid drug testing and breath testing consistent with the requirements of each phase of the program (see Section X. "Phases"). Random drug and alcohol testing will never be less than twice a week throughout the duration of the program, and will be more frequent during Phase I. Frequency of testing may be increased at any time as a sanction for non-compliance with program requirements.

In addition, program participants may be required to wear a SCRAM CAM (Continuous Alcohol Monitoring) bracelet, if determined necessary by the JCATC staffing team.

XVI. Evaluation Design

Overview

Two different evaluations will be conducted of the JCACT during the time it is funded by the Bureau of Justice Assistance (BJA). These evaluations are consistent with BJA expectations and will include an (1) Implementation Evaluation and a (2) Process and Outcome Evaluation of the program.

Implementation Evaluation

The implementation evaluation of the program is a process evaluation that will focus specifically on the first year of the program. Of particular focus will be providing an in-depth description of the Waukesha Drug Court and comparison of its implementation during its first year of operations against two benchmarks. The first benchmark will be the program narrative of the grant application funded by the Bureau of Justice Assistance. Careful comparisons will be made between what the application proposed to do and what was realized in the first year of operations. The second benchmark will be the 10 Key Components (OJP 1997; 2004). Comparison against these benchmarks will determine whether an implementation failure occurred in either the operational model of the program (reflected in the grant narrative) or in the execution of the program in terms of adherence to an accepted theoretical model for drug courts (reflected in the 10

Key Components). Any departure from these two benchmarks will be noted and specific recommendations given for how to improve the implementation of the JCATC.

For this evaluation, data (described in more depth below) will come from program records and documentation, interviews with the team, a focus group, and self-reports of program adherence to the 10 Key Components. Data collection is guided by the overarching evaluation questions that the implementation evaluation seeks to answer, including “Was the Waukesha Drug Court implemented well?” and “To what extent were the 10 Key Components implemented in the Waukesha Drug Court.” To reach conclusions with regards to these broader questions, numerous specific evaluation questions will be addressed including the following:

- 1) What is the JCATC’s target population? What types of admission and exclusion criteria are used by the court? To what extent do the characteristics of the participants match the planned target population for the program?
- 2) Are eligible participants quickly identified and placed in the drug court and treatment? How are participants referred to the program?
- 3) What is the planned capacity of the program? Does the program achieve its stated capacity?
- 4) What is the phase structure of the drug court? How do phases differ in terms of services, supervision, and expected duration?
- 5) How are participants supervised? What types of mechanisms and processes are used to accomplish participant supervision?
- 6) Does the drug court program integrate substance abuse treatment with justice system case processing?
- 7) Do the defense and prosecuting attorneys work together in a non-adversarial manner ensuring the participants’ interests are protected as well as the community?
- 8) Are participants given access to a continuum-of-care for both substance abuse and other problems?
- 9) Is abstinence from drugs routinely monitored via drug testing?
- 10) Is there a coordinated approach for sanctioning non-compliant behavior and rewarding compliant behavior?
- 11) Do participants have on-going contact with the drug court judge?
- 12) To what extent do staff and team members engage in continuing education?
- 13) How well is the drug court connected with the local community?

Process and Outcome Evaluation

The process evaluation of the program will focus on updating the implementation evaluation, comparing what happened in the 3rd year of program operations with those documented during the 1st year of implementation. In addition to using the implementation evaluation as a benchmark for comparison, the process evaluation will use both the program narrative of the grant application funded by the Bureau of Justice Assistance and the 10 Key Components (OJP 1997; 2004). Comparison against these benchmarks will identify any significant changes made to the program (reflected in deviations from the implementation evaluation findings), determine whether an implementation failure occurred in either the operational model of the program (reflected in the grant narrative) or in the execution of the program in terms of adherence to an accepted theoretical model for drug courts (reflected in the 10 Key Components).

For this process evaluation, the same data collection methods for the implementation evaluation will be used. The data collection procedure is described in more depth below. Data collection is guided by overarching evaluation questions including “Were significant changes made to the drug court program model,” “Was the Waukesha Drug Court implemented well?” and “To what extent was fidelity to the 10 Key Components maintained.” To reach conclusions with regards to these broader questions, numerous specific evaluation questions will be addressed including the following:

- 1) Were there significant changes in the demographic profile of drug participants?
- 2) Did enrollments in the program meet projections set forth in the program narrative funded by the Bureau of Justice Assistance?
- 3) What was the retention rate of participants in the program?
- 4) What participant characteristics predict program dropout?
- 5) What was the average length of program stay and were goals expressed in the grant application reached?
- 6) Were there major changes in the implementation of the program and what served as the impetus for such changes?
- 7) Were there major changes in the manner in which the court adhered to the Key Components of drug courts?

Building upon the information collected during the process evaluation that describes what the program did, an outcome evaluation also will be completed to describe what the drug court accomplished. That is, what was the program’s effectiveness at reaching its operational goal of reducing recidivism among drug offenders? Specifically, this

outcome evaluation will examine the time while the participants are in the drug court as well as 1-year and 2-year intervals following the participants' discharge from the drug court. It will focus on examining multiple indicators of recidivism (i.e., rearrests, reconvictions, and reincarceration) and comparison of drug court graduates with drug court non-completers. If resources permit and one can be identified, a non-drug court comparison group will be identified and included in the comparisons. Questions for the outcome evaluation include:

- 1) What was the number/percentage of participants arrested for a new offense while in the program?
- 2) Does drug court graduation reduce the number and percentage of participants arrested for a new crime?
- 3) Does drug court graduation reduce the number and percentage of participants convicted for a new crime?
- 4) Does drug court graduation reduce the number and percentage of participants incarcerated for a new crime?

DataCollectionProcedure

Near the end of the first year of program implementation and again in the third year of program implementation, near the end of the BJA funding, process data will be collected including (1) interviews with team members, (2) a focus group with the team, (3) self-assessments of drug court adherence to the 10 key components, (4) and program self-documentation. Additionally, data will be collected from the Wisconsin Court Consolidated Access Program (CCAP) on any new arrests, charges, convictions and incarcerations experienced by drug court participants once they entered the drug court program. If resources permit, these data also will be collected for a comparison group of drug offenders who did not participate in the drug court.

Face-to-face structured interviews, similar to those used by Logan and colleagues (2000), will be conducted by a Temple Research Team member with each stakeholder/staff to capture data and perceptions of the target population, screening and assessment, case processing, program length, urinalysis testing, treatment resources, ancillary services, court services, sanctions and incentives, and many more aspects of the program.

These interviews will be complemented with a structured focusgroup that develops a logic model of the program that captures the target population, therapeutic resources, short- and long- term goals, as well as the interrelationships among these (see Hiller,

Malluche, Bryan et al., 2010). Detailed notes of the discussion during the focus group will be taken by a research assistant.

The Drug Court Components Questionnaire (Hiller, Belenko, Taxman et al., 2010) will be administered to each team member following the interviews or the focus group to capture their impressions of how well they are adhering to the 10 Key Components. This questionnaire will be completed in private by each individual who will not put any identifiers on it so it will be completely anonymous to help ensure frank responses from the staff.

In addition to the data collected during the interviews, the focus group, and the Drug Court Components Questionnaire, information also will be gleaned from several program-generated sources including the narrative of the grant application submitted to the Bureau of Justice Assistance, the policy and procedure manual, minutes of steering committee meetings, the participant handbook, and the intake application collected by case managers on individuals who request to be in the program.

Recidivism data will be abstracted from the publicly available information on the Wisconsin Consolidated Court Automation Program (CCAP) for every drug court graduate and dropout. If a non-drug court comparison group can be identified recidivism information also will be collected for them. A search for each individual will be conducted to identify offense date, conviction date, incarceration date, length of sentence, and incarceration information for any new cases for an individual in the CCAP system subsequent to the one that led to his or her participation in the drug court. Only information from criminal traffic cases (i.e., OWI and operating after revocation, OAR) and for other types of criminal cases (e.g., theft, assault, disorderly conduct, bail jumping) will be coded. Other information that will be coded for each offense will be the date of arrest, the charge, and the level of charge (misdemeanor or felony).

XVII. Ethics and Confidentiality

Drug Courts transition the roles of every member of the drug court team from their traditional separation and independence to a collaborative effort focused on the recovery of drug court participants. Judges become part of a collaborative decision-making team that includes prosecutors, defense counsel, and law enforcement agents. Prosecutors and defense counsel coordinate their efforts in new ways to achieve a participant's recovery from alcohol or drug addiction, muting their traditional

adversarial relationship. Typical courtroom decorum where lawyer-advocates speak on behalf of their clients may give way to direct conversations between the judge and defendant. Defendants become “participants” and may actively engage in discussions on their progress, or lack of progress, with a broader range of “actors” in the criminal justice system. Substance abuse treatment professionals actively engage with the Court and other members of the team far earlier than is the case in more traditional referrals from the court for treatment and monitoring. These and other transitions in the professional roles of judges, lawyers, treatment professionals, and law enforcement agents are crucial to the drug court model.

That transition from traditional roles, however, requires that drug courts be consciously aware of ethical and confidentiality considerations to ensure that those who enroll in the program are confident that each member of the drug court team maintains the highest standards of ethical conduct. Drug courts, forging new models of collaboration and information exchange, do not redefine the ethical standards of each profession involved in the drug court process. Properly understood, canons of ethics strengthen the drug court model by promoting each member of the team as a unique contributor to the recovery process.

As in any other criminal case, each member of the drug court team has a specifically defined role. Although the roles of the judge, prosecutor, defense attorney, treatment personnel, and law enforcement agents promote a unified interest in participant recovery and program success, they have not abandoned their roles as advocates for their respective disciplines. Rather, in the context of the drug court, that advocacy role broadens to reflect the benefit(s) that may accrue to the drug court participant, and the community, in the event the participant successfully graduates from the program and recovers from alcohol and/or other drug dependence.

Most often, the ethical issues related to drug court practices involve the non-adversarial nature of the proceedings. It is important to note that non-adversarial does not equate to non-advocacy. Rather, each member of the drug court team best represents his or her professional responsibilities by advocating a perspective that is consistent with their professional interests as members of a team who contribute equally, through the lens of their respective professions, to the outcome of recovery for every participant in the program. In the context of a drug court, the traditional concepts of the attorneys as “courtroom opponents” or “opposing counsel” give way to a common commitment to the best interests of the participant toward ending his or her addictive behaviors.

Similarly, although the drug court judge will have more intimate and direct involvement with program participants, their counsel, and the other members of the drug court team, the judge maintains his or her traditional role as an impartial, independent decision-maker who is advised by other professionals on his or her options to foster compliance with the terms and conditions of the plea agreement, and to strengthen each participant's capacity to engage in the drug court process and graduate from the program.

Substance abuse treatment professionals, operating from a medical, rather than a legal, model, most often interact with the criminal justice system through the process of reporting compliance with conditions imposed by the court or probation. Due diligence must be taken to ensure compliance with confidentiality requirements as the traditional insulation of treatment providers from the arena of the courtroom gives way to an active, advisory role to the judge on treatment options that most closely meet the goal of recovery for each participant.

To enhance awareness of the ethical standards and confidentiality requirements for every member of the team, and to be clear on the ethical dimensions involved in a drug court practice, the JCACT program will:

- Promote and foster the duties of professional competence and due diligence from every member of the drug court team
- Maintain, recognize, respect, and value the distinct roles of every member of the team
- Foster a spirit of collaboration where every member of the team is expected to exercise independent professional judgement and render candid advice on how best to meet the treatment goals and expected outcomes for each participant in the program
- Add value to the drug court process by promoting authentic advocacy that is consistent with the professional responsibilities of each member of the drug court team
- Ensure that every member of the team is fully aware of the drug court model, how it operates, and be able to articulate its risks and benefits to program participants and to the community
- Promote competency and knowledge on professional ethics and confidentiality and how they may be consistently applied in a drug court setting
- Ensure that program participants are fully informed on the drug court process, that they give voluntary, informed consent to participate in the drug court

program, and that they are aware of the risks and benefits that are involved with their participation in the program

- Require that program participants sign appropriate Waivers of Confidentiality that demonstrate that the participant provides informed consent on the consequences of that Waiver, that it is given voluntarily, and that he or she has had the opportunity to discuss the terms and conditions of that Waiver with counsel
- Provide on-going education on the ethical and confidentiality dimensions of drug courts by directing members of the team to current research and writing that address the issues of ethics and confidentiality in drug courts
- Hold information discussed during pre-trial interviews, assessment, drug court team staffing meetings, drug court status hearings, and treatment sessions in confidence
- No results or statements made by participants during drug court proceedings shall be admissible against participants other than in drug court proceedings to prove a violation of the drug court rules or to establish grounds for termination of a defendant from the drug court program

To promote a full understanding of the discussions related to ethics and confidentiality in drug court programs, members of the team are directed to the following documents as sources of information and guidance on applied ethics in drug court programs. Through education and exposure to important areas of debate, the JCACT Team will continue to demonstrate ethical standards that will withstand the scrutiny of professionals in the field, participants in the drug court program, and the community at large.

Ethical Considerations for Judges and Attorneys in Drug Court

National Drug Court Institute

October, 2002

<http://www.ndci.org/publications/monograph-series/ethical-considerations-judges-and-attorneys-drug-court>

Federal Confidentiality Rules and How They Affect Drug Court Practitioners

National Drug Court Institute

April, 1999

<http://www.ndci.org/publications/monograph-series/federal-confidentiality-laws-and-how-they-affect-drug-court-practitioners>

Committee Meeting Sign-In Sheet

Committee/Board Name:

Date of Meeting:

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