

**16<sup>TH</sup> Judicial District**  
**of Tennessee**  
**Drug Court Program**  
**2003 Process Evaluation**

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**Dana K. Fuller, Ph.D.**  
**Evaluator**

**July, 2003**

This project was supported by Grant No. 2000-DC-VX-0088 awarded by the Drug Courts Program Office, Office of Justice Programs, U. S. Department of Justice. Points of view in this document are those of the author and do not necessarily represent the official positions or policies of the U.S. Department of Justice.

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## EXECUTIVE SUMMARY

The 16<sup>th</sup> Judicial District includes Rutherford and Cannon counties within Tennessee. Police departments within Rutherford County (sheriff's office, Murfreesboro, Smyrna, LaVergne, MTSU) made a total of 6,302 arrests during 2001. Forty percent of the arrests were drug or alcohol related arrests. Police departments within Cannon County (sheriff's office, Woodbury) made a total of 748 arrests, with 170 arrests (23%) being alcohol or drug-related. The combined percentage of alcohol and drug-related arrests was 38% for the two counties (source: [www.tbi.state.tn/CrimeTN](http://www.tbi.state.tn/CrimeTN)).

The Drug Court received implementation grant funds from the Office of Justice Programs Drug Courts Program Office in September, 2000. Participants were admitted in December of that same year. The implementation grant period will end on August 31, 2003. A recent state legislation change will provide additional funds for all drug courts within the state (House Bill No. 1253). The legislation took effect on July 1, 2003 so no funds have been received by the Drug Court to date. The amount of money that the legislation will generate for county Drug Courts is unknown at this time.

One of the goals of the Drug Court team is to serve more participants. To that end, the Drug Court has applied for an enhancement grant from the Office of Justice Programs Drug Court Programs Office. If the enhancement grant is awarded, the Drug Court will be able to provide services to an additional 25 participants—for a total of 75 participants at any given time. Receiving the enhancement grant would also allow the Drug Court to reinstate funds to pay for a police liaison officer position.

There are three core phases of the Drug Court Program that all participants are required to complete. Completion of the Drug Court program was originally designed to take between 12 and 18 months. The Drug Court team plans to change the length of the program to be between 18 and 24 months.

As of July 15, 2003, there have been 396 individuals screened for admission into Drug Court. The denial rate is 75% (i.e., 297 of the 396 were denied). The most common reason that *eligible* applicants were not admitted is that the applicant was not interested in the Drug Court after learning about it. The most common reason that applicants were *ineligible* was that the applicants were violent offenders.

The Drug Court has admitted a total of 99 individuals. Twenty-seven percent of those admitted are currently active in the program, which is lower than the goal of 50 active participants at any given time. Most of this discrepancy is due to the fact that the data used for the process evaluation were obtained one week after several individuals graduated from the program. Thirty-six percent of those admitted have graduated, and thirty-six percent of those admitted have been terminated.

The retention rate of 64% is slightly lower than the national retention rate of 67%, but the retention rate would approach 70% as the number of active participants increases to 50 again.

- 27% ( $N = 27$ ) of those admitted to Drug Court are **active participants**.
- 36% ( $N = 36$ ) of those admitted to Drug Court **have graduated**.
- 36% ( $N = 36$ ) of those admitted to Drug Court were **terminated** from the program.

The Drug Court participants had **compliance** rates between 89% and 99% for the weekly program requirements.

- 91% of the 1,009 required **MRT classes** were attended.
- 99% of the 12,386 required **AA/NA meetings** were attended.
- 93% of the 4,988 required **Counseling meetings** were attended.
- 89% of the 4,729 required **drug screen tests** were negative for drugs and alcohol.
- 98% of the 982 required meetings with the **case manager** were attended.
- 96% of the 2,004 required meetings with the **probation officer** were attended.
- 96% of the 2,345 required **court appearances** were attended.

Judge Ash has **sanctioned participants** for noncompliance with the Drug Court program.

- The average number of **sanctions** per participant was 4.1 for a total of 402 sanctions.
- The most commonly used sanctions were **jail time** (35%) and **community service** (22%).

Twenty-one percent ( $N = 21$  of 99) of the individuals admitted to Drug Court have been arrested while in the Drug Court program. They typically are arrested only once. Eight percent ( $N = 3$  of 36) of the graduates have been arrested after graduation.

Twenty percent ( $N = 7$  of 35) of the participants who did not have a GED or high school diploma **obtained their GED** while in Drug Court.

Four women admitted to the Drug Court program have had babies. **All four babies were born drug-free.**

Eighty-six percent ( $N = 31$  of 36) of the graduates were **employed at graduation**.

The Drug Court team is committed to reducing the recidivism and drug abuse rates for individuals within the community. The participants and graduates who were interviewed for the process evaluation considered Judge Ash and the Drug Court team to be very important in helping them to stay drug/alcohol free. The Drug Court has demonstrated a willingness to be flexible in their responses to individuals (e.g., sanctions, incentives) and a willingness to modify the program structure when necessary. In sum, the Drug Court is providing a useful service to the community and to the participants who are admitted to the program.

## **BACKGROUND OF THE DRUG COURT**

### **Establishment of the Drug Court**

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Judge Ash received a planning grant from the Drug Courts Program Office in 1998. Judge Ash, the district attorney's office, the sheriff's office, the public defender's office, and volunteers from a treatment service provider, a private probation agency, and a research/evaluation group were involved in the planning of the Drug Court. In 1999, a pilot program was started and an implementation grant proposal was submitted to the Drug Courts Program Office. The Drug Court received the implementation grant funds in September, 2000. Participants were admitted in December of that same year.

### **Jurisdiction and Population Served by the Drug Court**

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The 16<sup>th</sup> Judicial District includes Rutherford and Cannon counties within Tennessee. The Census 2000 indicated there were 182,023 residents of Rutherford County and 12,826 residents of Cannon County, for a combined total of 194,849. The median household income was \$46,312 for Rutherford County and \$32,809 for Cannon County. Both counties are considered rural, and public transportation is not available in either county. See Table 1 for detailed demographic characteristics of the two counties. The 2002 Census Bureau estimates for the number of residents in Rutherford County and Cannon County were 194,934 and 13,060, respectively, for a combined total of 207,994. Rutherford County was ranked 3<sup>rd</sup> in the state for population increase during the year 2002.

Approximately 50% of the residents in both counties are female. Eighty-six percent of the residents in Rutherford County and 97% of the residents in Cannon County are white. Eighty-two percent of the Rutherford County residents have at least a high school diploma, whereas 67 percent of the Cannon County residents have at least a high school diploma. The percentage of married couples was 58% for Rutherford County and 62% for Cannon County. Forty-one percent of Rutherford County households have individuals under age 18. Thirty-six percent of Cannon County households have individuals under age 18.

Seventy-three percent of Rutherford residents and 63% of Cannon residents who are age 16 or over are in the labor force. Rutherford County has 6% of families and 9% of individuals living below the poverty level. Cannon County has 10% of families and 13% of individuals living below the poverty level.

**Table 1. Demographic Characteristics for Rutherford and Cannon Counties**

	Rutherford ( <i>N</i> = 182,023)	Cannon ( <i>N</i> = 12,826)
<b>Sex</b>	<b>%</b>	<b>%</b>
Female	50.2	51.0
Male	49.8	49.0
<b>Ethnicity/Race</b>		
Black or African American	9.5	1.5
Hispanic	2.8	1.2
White	85.7	96.9
<b>Education</b>		
Less than 9 <sup>th</sup> grade	5.7	12.8
9 <sup>th</sup> to 12 grade, no diploma	12.5	20.0
High school graduate (includes GED)	31.8	43.2
Some college, no degree	21.8	13.5
Associate degree	5.2	2.0
Bachelor's degree	16.3	5.4
Graduate or professional degree	6.7	3.0
<b>Marital Status</b>		
Divorced	10.8	10.1
Married	57.6	61.8
Separated	1.4	1.4
Single	26.0	19.0
Widowed	4.2	7.7
<b>Disabled (age 21 to 64 years)<sup>A</sup></b>	16.3	23.9
<b>Veteran (age 18 and over)<sup>B</sup></b>	12.5	11.6
<b>In Labor Force (age 16 and over)<sup>C</sup></b>	72.8	62.7
<b>Families below poverty level<sup>D</sup></b>	5.8	9.6
<b>Individuals below poverty level<sup>E</sup></b>	9.0	12.8
<b>Households with individuals under age 18<sup>F</sup></b>	40.9	36.3
<b>Median Household Income (dollars)</b>	\$46,312	\$32,809

<sup>A</sup>*N* = 108,651 for Rutherford County, *N* = 7,288 for Cannon County.

<sup>B</sup>*N* = 133,685 for Rutherford County, *N* = 9,546 for Cannon County.

<sup>C</sup>*N* = 139,055 for Rutherford County, *N* = 9,922 for Cannon County.

<sup>D</sup>*N* = 2,760 for Rutherford County, *N* = 355 for Cannon County.

<sup>E</sup>*N* = 15,808 for Rutherford County, *N* = 1,609 for Cannon County.

<sup>F</sup>*N* = 66,443 for Rutherford County, *N* = 4,998 for Cannon County.

Source: U.S. Census Bureau, Census 2000.

### *Drug Use in Tennessee*

According to the National Household Survey on Drug Abuse 2000, an estimated 287,000 Tennesseans (6.14%) reported past year dependence or abuse for an illicit drug or alcohol. The rate of abuse or dependence for alcohol (249,000; 5.34%) was higher than the rate for illicit drug dependence or abuse (89,000; 1.90%). Approximately 200,000 Tennesseans used marijuana during the previous month, and an estimated 84,000 Tennesseans had used cocaine during the previous year. See Table 2 for more drug use statistics.

	Total		Age Group (Years)					
			12 – 17		18 – 25		26 or older	
	N*	%	N*	%	N*	%	N*	%
Past Month Users of Any Illicit Drug	275	<b>5.94</b>	44	<b>9.49</b>	88	<b>14.83</b>	143	<b>4.02</b>
Past Month Users of Marijuana	200	<b>4.31</b>	30	<b>6.57</b>	67	<b>11.23</b>	103	<b>2.88</b>
Perceptions of Great Risk of Smoking Marijuana Once a Month	2,224	<b>48.12</b>	179	<b>38.86</b>	182	<b>30.68</b>	1,863	<b>52.19</b>
Average Annual Marijuana Initiates	47	<b>1.49</b>	26	<b>6.34</b>	19	<b>5.46</b>	3	<b>0.12</b>
Past Month Users of Any Illicit Drug Other Than Marijuana	123	<b>2.65</b>	25	<b>5.45</b>	36	<b>6.06</b>	62	<b>1.73</b>
Past Year Users of Cocaine	84	<b>1.81</b>	8	<b>1.67</b>	23	<b>3.89</b>	53	<b>1.49</b>
Past Month Users of Alcohol	1,564	<b>33.81</b>	60	<b>13.10</b>	266	<b>44.79</b>	1,238	<b>34.67</b>
Past Month “Binge” Alcohol Users	775	<b>16.75</b>	37	<b>8.10</b>	186	<b>31.37</b>	552	<b>15.46</b>
Perceptions of Great Risk of Having 5+ Drinks of an Alcoholic Beverage Once or Twice a Week	2,428	<b>52.52</b>	211	<b>45.84</b>	233	<b>39.34</b>	1,983	<b>55.54</b>
Past Month Users of Any Tobacco Product	1,566	<b>33.84</b>	92	<b>19.99</b>	291	<b>49.04</b>	1,183	<b>33.13</b>
Past Month Users of Cigarettes	1,307	<b>28.24</b>	79	<b>17.15</b>	263	<b>44.38</b>	964	<b>27.02</b>
Perceptions of Great Risk of Smoking 1+ Packs of Cigarettes Per Day	3,050	<b>65.98</b>	265	<b>57.53</b>	358	<b>60.30</b>	2,427	<b>68.00</b>
Past Year Alcohol Dependence or Abuse	249	<b>5.34</b>	27	<b>5.78</b>	74	<b>12.33</b>	148	<b>4.13</b>
Past Year Alcohol Dependence	115	<b>2.47</b>	8	<b>1.68</b>	27	<b>4.44</b>	81	<b>2.25</b>
Past Year Any Illicit Drug Dependence or Abuse	89	<b>1.90</b>	23	<b>4.99</b>	33	<b>5.45</b>	33	<b>0.92</b>
Past Year Any Illicit Drug Dependence	61	<b>1.31</b>	13	<b>2.91</b>	22	<b>3.67</b>	26	<b>0.72</b>
Past Year Dependence or Abuse for Any Illicit Drug or Alcohol	287	<b>6.14</b>	41	<b>8.85</b>	85	<b>14.18</b>	161	<b>4.47</b>

*Note.* N is in thousands. Any Illicit Drug includes marijuana/hashish, cocaine (including crack), heroin, hallucinogens, inhalants, or any prescription-type psychotherapeutic used nonmedically. Dependence is based on the definition found in the DSM-IV.

### *Substance Abuse Treatment in Tennessee*

Substance abuse treatment within the State of Tennessee for the year 2001 indicated alcohol-related abuses was the primary reason for seeking treatment. Specifically, 30% of the substance abuse admissions were for **alcohol only**; 18% of the admissions were for **alcohol with secondary drug** abuse; 23% of the admissions were for **cocaine**; and 12% of the admissions were for **marijuana** abuse (source: [www.whitehousedrugpolicy.org/statelocal/tn/](http://www.whitehousedrugpolicy.org/statelocal/tn/)).

### ***Drug Related Crime and Sentencing in Tennessee, Rutherford County, and Cannon County***

Forty-four percent of the 1149 individuals receiving a federal sentence within Tennessee for 2001 were sentenced for drug related crimes. Powder cocaine (27.7%) and crack cocaine (22.2%) were the most commonly abused illicit drugs for the offenders. Within Tennessee, cocaine-related sales (49.9%) and methamphetamine sales (22.2%) have been associated with more violent crime than other drugs. Marijuana (23.4%) also was a primary drug of abuse for offenders within Tennessee, but it has not been associated with violent crime. The DEA considers the number of methamphetamine labs to be of 'epidemic proportion' within middle Tennessee. The Nashville area also has been identified as a source of 'club drugs' such as MDMA, LSD, and GHB (sources: [www.ussc.gov/JUDPACK/2001/tn01.pdf](http://www.ussc.gov/JUDPACK/2001/tn01.pdf), [www.dea.gov/pubs/states/tennesseep.html](http://www.dea.gov/pubs/states/tennesseep.html), and NDIC: Tennessee Drug Threat Assessment).

For FY 2001-2002, the Tennessee Department of Corrections supervised 7,837 parolees and 35,000 probationers. Sixteen percent of the probationers had a primary drug offense, 27% of the parolees had a primary drug offense. It was also estimated that 33% of the 376,607 reported property offenses in Tennessee were committed in conjunction with a drug offense (source: [www.state.tn.us/tdoc/](http://www.state.tn.us/tdoc/)).

Police departments within Rutherford County (sheriff's office, Murfreesboro, Smyrna, LaVergne, MTSU) made a total of 6,302 arrests during 2001. Forty percent of the arrests were drug or alcohol related arrests. Police departments within Cannon County (sheriff's office, Woodbury) made a total of 748 arrests, with 170 arrests (23%) being alcohol or drug-related. The combined percentage of alcohol and drug-related arrests was 38% for the two counties. See Table 3 for the specific alcohol and drug-related arrests (source: [www.tbi.state.tn/CrimeTN](http://www.tbi.state.tn/CrimeTN)).

### **Overview of Evaluation Methods for Process Evaluation**

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Information relating to the background, development, and program description of the Drug Court was obtained from three key sources: (1) an interview with the Drug Court Coordinator, (2) a review of the Policy and Procedures manual for the Drug Court, and (3) a review of the Adult Drug Court Implementation Grant proposal that was submitted to the Drug Courts Program Office. Qualitative perspectives on the current Drug Court program were obtained during interviews with Judge Ash, the Drug Court staff, two current program participants, and three recent drug court graduates. Quantitative information about the participants' demographics and compliance with the program rules was obtained from the ACCESS database used by the Drug Court. The ACCESS database is a modified version of the Buffalo 99 MIS software. The modifications were made by the program evaluator, after consulting with the Drug Court coordinator.

**Table 3. Alcohol and Drug-Related Arrests in Rutherford and Cannon Counties**

	Rutherford County Sheriff	Murfreesboro	Smyrna	LaVergne	MTSU	Cannon County Sheriff	Woodbury
<b>DUI Arrests</b>							
Adult	273	15	199	74	60	34	41
Juvenile	2	2	0	1	1	1	0
<b>Drunkenness Arrests</b>							
Adult	119	0	99	21	44	25	18
Juvenile	3	0	1	2	0	0	0
<b>Drug/Narcotic Violations</b>							
Offenses Reported	657	493	0	111	33	10	23
Offenses Cleared	645	484	0	97	33	10	23
Adult Arrests	656	523	0	79	24	19	15
Juvenile Arrests	86	37	0	23	0	0	14
<b>Drug/Narcotic Equipment Violations</b>							
Offenses Reported	393	260	0	51	13	3	11
Offenses Cleared	386	253	0	45	12	3	11
Adult Arrests	52	109	0	3	5	0	3
Juvenile Arrests	6	1	0	1	0	0	0

Source: [www.tbi.state.tn/CrimeTN/CrimeInTenn.pdf](http://www.tbi.state.tn/CrimeTN/CrimeInTenn.pdf)

## DEVELOPMENT OF THE DRUG COURT

### **Mission, Goals, and Objectives of the Drug Court**

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The mission, goals, and objectives were defined at a workshop that was held during the planning phase of the Drug Court. The individuals who were involved in the planning phase and their role for the pilot program include:

Judge Don Ash;  
Karen Hudson, volunteer Drug Court coordinator;  
Mary Schneider, treatment provider;  
Merry Peach, probation officer;  
Tom Jackson, District Attorney's office;  
Gerald Melton, Public Defender's office.

The implementation grant proposal describes the mission, goals, and objectives of the Sixteenth Judicial District Drug Court. Each is excerpted below.

#### *Mission Statement*

The mission of the Sixteenth Judicial District Drug Court Program is to reduce the length and use of incarceration, reduce the recidivism rate of crimes related to substance abuse and improve the safety and quality of life in our community by utilizing an innovative, efficient, integrated model of services.

#### *Goal*

The goal of the Drug Court is to promote public safety, reduce recidivism/re-arrest, and incarceration rates for persons who, are arrested with an alcohol/drug felony charge, it is evidenced that alcohol/drug involvement is a significant contributing factor in a non-alcohol/drug related felony charge, or have a pending alcohol/drug related probation violation.

#### *Objectives*

1. To provide an integrated continuum of judicial supervision, treatment services, probation services, and drug testing meeting the standards established within the Key Components of the Drug Courts.
2. To reduce the recidivism/re-arrest rate of participants by 50% as compared to existing approaches.
3. To reduce the incarceration rates of participants by 50% as compared to existing approaches.
4. To demonstrate the cost effectiveness of a comprehensive 'drug court' approach in addressing primary alcohol/drug offenders as compared to approaches currently being utilized.

The target population for the Drug Court includes female and male adults who are age 18 or over. The criminal arrest records for the target population may include misdemeanors and felonies, but violent offenders are excluded.

## **Funding Sources**

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Mary Schneider, the Drug Court coordinator administers the funds for the Drug Court. The County Commissioners oversees the administration of Drug Court funds. Funding at the local (county level) comes from three sources. First, a 501(c)3 foundation was established in September, 2001 to receive donations from individuals and corporations. Second, the Drug Court program receives some money from the county DUI charge fines. Third, a recent state legislation change will provide additional funds for all drug courts within the state (House Bill No. 1253). The legislation took effect on July 1, 2003 so no funds have been received by the Drug Court to date. The legislation means that every person who has been convicted of a drug related offense will have to pay a \$75 fine. Five dollars will go to the finance department to cover the cost of collecting and administering the funds while the remaining \$70 will be distributed to the county drug courts. It is estimated that there will be a 6 to 12 month delay in receiving funds from the legislative change. The amount of money that the legislation will generate for county Drug Courts is unknown at this time.

The Drug Court has primarily been funded by the implementation grant of \$447,853 (total for three years) that was awarded by the Office of Justice Programs. The implementation grant will end August 31, 2003. The Drug Court has received a Byrne Grant (\$75,000 per year for four years) which will help cover the expenses of the Drug Court until funds from House Bill No. 1253 are received. One of the goals of the Drug Court is to be able to serve more participants. To that end, the Drug Court has applied for an enhancement grant of \$227,071 (total for two years) from the Office of Justice Programs. If the enhancement grant is awarded, the Drug Court will be able to provide services to an additional 25 participants—for a total of 75 participants at any given time.

In addition to funds directly received by the Drug Court, the Drug Court participants also benefit from SAPT grants that the Guidance Center has received. The SAPT grant allows the Drug Court participants to obtain individual, group, and residential treatment at no cost to them. If the SAPT grants were not available, then the cost burden would shift to Drug Court participants because the Drug Court does not have sufficient funds to cover this expense.

## **Drug Court Team and Board of Directors**

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The current structure of the Drug Court team includes the judge, the coordinator, two case managers, and representatives from the District Attorney's office, the Public Defender's office, and The Guidance Center (treatment provider). A description of the changes in the Drug Court structure and the main duties of each team member are contained in the **Staffing** section of the report. The current team members are:

Judge Don R. Ash, supervising judge for the Drug Court  
Mary Schneider, coordinator for the Drug Court

Myra Beasley, case manager  
Angie Hostetler, case manager  
Gayle Emery, The Guidance Center (treatment provider)  
Tom Jackson, Assistant District Attorney  
Gerald Melton, Public Defender

During the planning and early implementation of the Drug Court program, there was an advisory committee for the Drug Court. The advisory board met monthly to review policy and procedures of the program and to monitor the progress in achieving the implementation goals. The advisory board members were drawn from various community agencies, corporations, and community leaders.

With the establishment of the 501(c)3, the community leaders became a Board of Directors. The role of the Board of Directors differs from the advisory board, particularly now that the Drug Court program is 'established'. The responsibilities of the board include such activities as assisting in publicizing the Drug Court program, obtaining funds for the Drug Court program, and providing donations that will be given as rewards for Drug Court participants who are doing well, etc. The Drug Court coordinator meets quarterly with the Board of Directors to update them on the status of the Drug Court program. The Board of Directors are listed in Table 4.

**Table 4. Board of Directors.**

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<b>John Mitchell, Esq.</b> Board President	<b>Officer Konrad Kaul</b> La Vergne Police Department
<b>Mr. John Ash</b> LaVergne High School	<b>Representative Donna Rowland</b>
<b>John Byrnes, M.D.</b>	<b>Dr. Robert Knight</b>
<b>Mr. Brad Bynum</b> Boys & Girls Clubs of Smyrna	<b>Mr. Peter Keating, Jr.</b> The Holland Group
<b>Mr. Bob McLean</b>	<b>Dr. Ralph Hillman</b> Professor
<b>Reverend Martha Touchton</b> St. Marks United Methodist Church	<b>Mr. Rickey Field</b> High School Coach
<b>Lt. Clyde Adkison</b> Murfreesboro Police Department	<b>Mrs. Jeanne Bragg</b> Wife of Murfreesboro's Mayor
<b>Mr. Greg Francis, Corporate</b>	<b>Mrs. Dawn Frost</b> Rutherford Bank & Trust
<b>Ms. Paula Mansfield</b> First Tennessee State Bank	<b>Mr. Robert Peay, Jr.,</b> County Commissioner
<b>Judge Susan Melton</b> Woodbury, TN	<b>Dr. Chip Dodd</b> Recovery Community

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## SCREENING AND ENROLLING DEFENDANTS

### Referral Process

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Potential candidates may be self-referred or referred by the presiding judge, the district attorney, the public defender's office, the candidate's lawyer, the sheriff's department, the probation officers, or the treatment professionals. The referrals for individuals accepted into Drug Court are summarized in Table 5.

**Table 5. Referral Source for Drug Court Participants (N = 99)**

<i>Agency</i>	<i>N</i>	<i>%</i>
Self-referred	35	
Defense attorney	21	
Probation agency	17	
Court	10	
District attorney's office	4	
Public defender's office	6	
Sheriff's department	2	
Treatment provider	1	

The candidates may enter the program on a pre-adjudication basis (arraignment, pre-trial, conditional guilty plea, diversion, plea accepted—sentence delayed) or post-adjudication basis (conditional discharge, probation, split sentence between jail and court, re-sentencing). The majority of candidates have entered the program on a post-adjudication basis.

### Eligibility and Assessment

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Each candidate must meet the following criteria to be eligible for the Drug Court program:

- Must meet statutory requirements for suspended sentence;
- Must be a non-violent offender;
- Must have a history of chemical dependency;
- Must be a resident of Rutherford or Cannon County;
- If this is a DUI offense, it must be 3<sup>rd</sup> offense or less;
- Offender must voluntarily agree to participate;
- Must not be charged with or have a prior conviction for drug trafficking;
- Must be potential agreement among sentencing judge, District Attorney's office and Counsel for the accused that Drug Court would be an appropriate remedy;
- Cannot have a hold or pending criminal charge from another jurisdiction;
- Cannot be acutely mentally ill or suicidal.

A criminal history check is conducted by the District Attorney's office on all candidates to ensure that violent offenders are not accepted into the program. Candidates who are considered

eligible are referred for a clinical assessment utilizing the Addiction Severity Index (ASI). The Drug Court Coordinator administers the ASI and the SOCRATES to potential candidates. The Drug Court team uses the information from the ASI, the SOCRATES, the criminal history check, and the eligibility criteria to determine whether each candidate is accepted into the program. The majority vote of the Drug Court team determines whether a candidate is accepted into the program or rejected. The Drug Court Coordinator notifies the candidate or the candidate's attorney about the decision of the Drug Court Review Team.

As of July 15, 2003, there have been 396 individuals screened for admission into Drug Court. Table 6 contains basic information about those denied. The denial rate is 75% (i.e., 297 of the 396 were denied). The most common reason that *eligible* applicants were not admitted is that the applicant was not interested in the Drug Court after learning about it. The most common reason that applicants were *ineligible* was that the applicants were violent offenders.

	Percentage	N
<b>Gender</b>		
Female	37%	109
Male	63%	185
Missing Info.	1%	3
<b>Race/Ethnicity</b>		
African American	34%	102
Asian	1%	4
Caucasian	59%	175
Missing Info.	5%	16
<b>Eligible, But Not Admitted Because...</b>		
Sentencing judge did not support	8%	24
DA's office did not support	11%	33
Counsel for accused did not support	1%	3
Team did not support	6%	18
Candidate did not agree to participate/not interested	18%	52
Other reason(s)	3%	9
<b>Ineligible for the Program Because...</b>		
Statutory requirements for suspended sentence not met	3%	10
Settled charge(s) without Drug Court	11%	33
Violent offender	19%	55
No history of chemical abuse/dependency	1%	4
Not a resident of Rutherford or Cannon County	1%	4
More than 3 DUIs	1%	2
Charged with or prior conviction of drug trafficking	12%	37
Pending charges from another jurisdiction	3%	9
Acutely mentally ill or suicidal	2%	6
Other reasons	1%	2

## **Case Processing**

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Candidates who have been accepted into the Drug Court program are asked to attend the next scheduled Drug Court. The referring Court writes an Order of Transfer to the Drug Court.

At their initial Drug Court meeting, newly accepted candidates verbally agree to participate in the program. They also attend an orientation to Drug Court that is held each Friday (if necessary). During the orientation the participants:

- are asked to sign a Consent for Disclosure of Confidential Substance Abuse Information;
- are asked to sign a Voluntary Participation Agreement;
- are given a 12-step Meeting sheet;
- make an appointment with the treatment provider to begin services;
- make an appointment with the probation officer to begin services;
- make an appointment with the case manager;
- are given a copy of the Drug Court participant handbook.

When the program was first established, the participants completed all the forms during their initial Drug Court meeting. The orientation meeting was deemed necessary because the number of participants has increased and it was difficult to complete the forms and make appointments during the initial court meeting.

## DESCRIPTION OF THE DRUG COURT PROGRAM

### **Staffing and Facilities**

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From September 2000 through December 2001, the Drug Court office was housed within the judicial building. The location was close to the court room and the judge's chambers, but space was very limited and the Drug Court had to share an office with the Divorce Court office. The shared office led to a concern about confidentiality issues. During this time, the only paid staff included the Drug Court Coordinator and the police liaison (½ time). All other services were subcontracted out.

In January 2002, the Drug Court office was relocated to an office suite that is approximately 2 blocks from the judicial building. The current location has a reception area, three private offices, a group therapy room, restrooms, and a copy room. The relocation coincided with the Drug Court hiring two case managers, effectively moving the case management responsibilities in-house. The probation services (including administering drug screens) were provided by a private probation company between September, 2000 and December, 2002. The contract with the probation company ended December 31, 2002, and the Drug Court case managers took over responsibility of administering drug screens. The treatment services are still provided by an outside agency, The Guidance Center.

The implementation grant provided for a police liaison (½ time). The police liaison officer was called to active duty for the war against Iraq, so the Drug Court does not have an officer at this time. Further, for cost reasons, the budget for the next fiscal period (July 1, 2003 – June 30, 2004) does not include a police liaison officer. The Drug Court coordinator has written an enhancement grant proposal that, if funded, would reinstate the police liaison officer's position.

**Judge Don R. Ash** is the Drug Court program judge and is responsible for the formal judicial case management of participants. He attends weekly status hearings, imposes sanctions, and approves acceptances and terminations of clients. As well, Judge Ash speaks to community organizations about the benefits of Drug Court.

**Mary Schneider** is the Drug Court coordinator. She manages client and program information, provides oversight of program funding and expenditures, provides oversight of clinical and probation compliance of participants, maintains community linkages, and attends weekly status hearings.

**Myra Beasley** and **Angie Hostetler** are case managers. They assist the Drug Court participants in finding adequate housing and transportation, advocating for the participant with state and county departments, and initiate crisis services when necessary. They also are responsible for monitoring the participants' compliance with the program rules and administering drug screens, now that the contract with BI, Inc. has ended.

Student interns also have assisted in the day-to-day management of the Drug Court program. Some interns have been recruited from the criminal justice department at Middle Tennessee State University while others have been recruited from the social work department at Middle Tennessee State University and the University of Tennessee-Nashville campus. There usually has been one intern per semester. Each intern volunteers for 225 to 365 hours per semester. The responsibilities of the interns typically involve answering the telephone, filing papers, and entering data. Each intern must sign a confidentiality agreement.

The Drug Court team has planned a workshop for the fall to discuss ways that the program could be improved. Each of the key stakeholders will be invited to attend. This would include the treatment providers from the Guidance Center, the District Attorney's office, the Public Defender's office, and the Sheriff's department.

## **Supervision and Treatment**

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Drug Court sessions are held every Wednesday, during Judge Ash's lunch hour. The Drug Court team meets each Wednesday, prior to the Drug Court session, to discuss the recent progress of the Drug Court participants who are scheduled to appear in court that day.

**Judicial Supervision.** Each Drug Court participant is required to attend regular meetings with the judge. The judge makes decisions about the appropriate sanctions and rewards for participant's progress within the program.

**Case Managers.** Treatment case managers are available 24 hours per day, seven days a week throughout the entire program. They are directed to provide whatever ancillary service the participant may need to help in his or her recovery program, including assistance with:

- obtaining adequate housing;
- obtaining transportation to appointments;
- finding employment;
- finding resources;
- advocating for the participant with various state and/or county departments;
- initiating crisis services as needed;
- administering drug screens.

Since the contract with BI, Inc. ended (December 31, 2002), the case managers have begun wearing two hats, so to speak. In addition to being an advocate for the participants (e.g., activities listed above), they now are responsible for ensuring that participants comply with the program rules and administering drug screens. Urine screens that are diluted or tampered with are considered to be a positive drug screen. Patches that have been tampered with are considered to be a positive drug screen.

**Police Liaison Supervision.** [This position is not funded for FY 2003-2004, but if the enhancement grant is awarded to the Drug Court, then the position will be reinstated.]The police liaison monitors arrest records to determine whether participants have been arrested, conducts home visits of the participants to assess compliance with the program, provides

transportation of participants to and from jail, and is available to speak to law enforcement, business, and community groups about the Drug Court program. The Drug Court has historically paid for 20 hours per week of the police liaison's salary.

**Treatment.** The Guidance Center is the contractor for all treatment services. Individual treatment and group treatment are provided by the Guidance Center. The Guidance Center has an SAPT grant that covers the cost of individual, group, and residential treatment for Drug Court participants. Thus, the Drug Court participants do not have to pay the cost of treatment. The residential treatment is provided by any one of the state's licensed facilities. The waiting list for residential treatment can be somewhat long, and participants may have to travel quite a distance to receive residential treatment.

Drug Court participants who need psychotropic medication must rely on their private health insurance or TENNCARE health insurance. Individuals who do not have health insurance, but need psychotropic medication, must choose to pay for it themselves or do without it.

In terms of diversity, each of the 5 treatment providers has completed diversity training. One of the five treatment providers is African American, which may provide culturally sensitive help to African American Drug Court participants. As well, the Guidance Center has women's groups available to address issues more prevalent among females (e.g., sexual assault and domestic violence).

**AA/NA Support Meetings.** AA/NA support meetings are available throughout the community. The Drug Court participants do not have to pay for participating in the twelve-step program.

## **Drug Court Phases**

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There are three core phases of the Drug Court Program that all participants are required to complete. Completion of the Drug Court program was originally designed to take between 12 and 18 months. The Drug Court team plans to change the length of the program to be between 18 and 24 months. The planned change in program length is more consistent with the actual time it has taken for participants to successfully complete the program (Table 7).

**Table 7. Number of Days in Program for Successful Graduates.**

	Average Days	Min. Days	Max. Days
Phase One	95	56	294
Phase Two	164	56	378
Phase Three	210	105	406
Total Program Length	470	317	742

Phase one is designed to last approximately two months and includes:

- Meet with Probation Case Manager weekly
- Meet with Treatment Case Manager weekly
- Random urine screen minimum of once a week
- AA/NA support meetings 5 times a week

- Nine hours of intensive group therapy
- MRT session weekly
- Appear before the Judge weekly
- Submit weekly journal entry

To successfully complete Phase One, participants must have four consecutive weeks of clean drug/alcohol screens. Participants must have attended 90% of all individual and group sessions and 90% of the self-help support meetings.

Phase Two is designed to last approximately four months and includes:

- Meet with Probation Case Manager weekly
- Meet with Treatment Case Manager every other week
- Random urine screen minimum of once a week
- Group therapy weekly, as determined by the treatment providers
- MRT session weekly
- AA/NA support meetings 3 times a week
- Obtain an AA or NA sponsor
- Appear before the Judge every other week
- Submit weekly journal entry
- Mandatory payment of supervision fee, court costs and court fines

To successfully complete Phase Two, participants must have six consecutive weeks of clean drug/alcohol screens. Participants must have attended 90% of all individual and group sessions, and 90% of the self-help support meetings.

Phase Three is designed to last approximately six months and includes:

- Meet with Probation Case Manager weekly
- Meet with Treatment Case Manager once a month, or as needed
- Random urine screen minimum of once a week
- Group therapy weekly, as determined by the treatment providers
- AA/NA support meetings 2 times a week
- Appear before the Judge a minimum of once a month
- Submit weekly journal entry
- Mandatory payment of supervision fee, court costs and court fines

To successfully complete Phase Three, the following must be completed:

- Last three months of drug/alcohol screens must be clean;
- Attendance at 90% of group sessions and self-help support meetings;
- Successful enrollment in an educational program, a job training program, or employed at least part-time;
- Adequate housing and appropriate support system;
- Payment of all fines, court costs, and probation costs, with no further obligations to the Court.

The Drug Court team has decided to modify the program length to be between 18 and 24 months in the near future. It will be important for the Drug Court team to revisit the criteria for successful completion of each phase. For instance, if the time to complete Phase One is lengthened, would the 'four weeks of consecutive negative drug/alcohol screens' be lengthened as well?

## **Participant Obligations**

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Drug Court participants are informed of their responsibilities during the orientation. The program rules also are stated in the participant handbook. As stated in the policy and procedures manual, Drug Court participants agree to comply with the following rules:

- Will follow the phases of the program to the satisfaction of the Court.
- Will not use, possess, or be in the presence of any illegal drugs, including marijuana, or drug paraphernalia and will not use alcohol at all.
- Agree to be drug/alcohol tested at any time. Will not alter, or try in anyway to change bodily fluids given for drug tests.
- Agree to be searched for drugs by any police officer with or without a search warrant, warrant of arrest, or reasonable cause, day or night.
- Will not engage in any criminal activity.
- Will participate in any other program the Court or treatment provider states is necessary and will sign authorizations as necessary.
- Will not leave the state of Tennessee without the permission of the Court.
- Will keep or look for a regular job or go to school as approved by the Court.
- Agree to a change in the court appearance date with 24 hour notice.
- Agree to tell any police officer that you are a participant in the Drug Court Program.
- Give up any rights to contest changes in the treatment program.
- Agree to pay a monthly fee for the program services based upon income and successful participation in the program.
- Agree that the Drug Court staff can talk to the treatment provider about progress being made.
- Agree to have your case heard without the State's Attorney or your attorney present, unless the Judge is considering termination from the program.
- Agree to keep the Court advised of any changes in address or employment.

## **Sanctions and Incentives**

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The judge meets with the Drug Court team each Wednesday morning, before the Drug Court session. Based on the recent behavior of the participants who are scheduled to appear in court that day, the judge decides whether sanctions or incentives are appropriate. Common sanctions administered include jail time, additional AA/NA meetings, increased supervision (e.g., more drug screens, more meetings with probation officer), attending personal responsibility classes, and community service hours. Participants who do not improve their behavior may be terminated from the program. More in-depth information about the sanctions used is contained in the **Participants' Compliance with the Drug Court Program** section that follows.

Incentives may range from verbal praise and applause in court, to letters of recommendation for housing and job interviews. Additionally, as participants progress through each phase, they are rewarded with fewer self-help meetings, court appearances and drug/alcohol screens. Participants may also be rewarded for their good work with gift certificates or vouchers from local businesses.

## **Leaving the Drug Court Program**

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Drug Court participants may leave via graduation, termination, death, or voluntary withdrawal. Participants who successfully complete all the phases of Drug Court and receive the approval of the Drug Court team are allowed to graduate. Participants who continually do not comply with the Drug Court program may be terminated at the judge's discretion. Participants may leave the program if they choose. Should they choose to leave the program, the judge would transfer them back to the sentencing judge for disposition. No one has died while in the Drug Court program.

## **Aftercare**

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Six months of aftercare is available to graduates of the Drug Court program. All services available to participants (e.g., individual, group, residential treatment) are available to Drug Court graduates during the aftercare period. The graduates are required to attend a 1.5 hour weekly care group during the six month period.

## **DEMOGRAPHIC INFORMATION ABOUT PROGRAM PARTICIPANTS**

A total of 396 applicants were screened for the Drug Court, and 99 were admitted; thus, the acceptance rate was 25%. This section summarizes the demographic information of those who have been admitted to the Drug Court program. See Table 8 for more detailed demographic information.

Approximately half the participants are male (52%). Caucasian (75%) and African American (22%) are the two most commonly represented ethnic affiliations. Sixty-five percent of the participants are between the ages of 22 and 40. Sixty-four percent of the applicants had at least a high school diploma or GED. The majority of applicants are single (55%); forty percent of the participants report having no children, while 38% have 1 to 2 children. Thirty-four percent of the participants were either employed or self-employed.

The percentage of individuals reporting a history of physical or sexual abuse was 43%. The primary drug of choice for the participants was marijuana (42%), but alcohol (21%) and cocaine (22%) were also frequently reported. Half the participants (51%) had a primary mental diagnosis of substance abuse; depression and anxiety were common as well.

**Table 8. Demographic Information for Participants (N = 99)**

<b><i>Ethnicity</i></b>	<b><i>Physically or Sexually Abused</i></b>
22% African American	43% Abused
75% Caucasian	56% Not abused
2% Hispanic/Latino	1% Unknown/Missing
1% Other	
<b><i>Gender</i></b>	<b><i>Source of Income</i></b>
48% Female	2% Disability
52% Male	29% Employed
	31% Family support
	20% None
	5% Public assistance
	5% Self-employed
	3% Significant other
	5% Unknown/Missing
<b><i>Average Age</i></b>	<b><i>Primary Drug of Choice</i></b>
1% Age 17-18	2% Amphetamines
21% Age 19-21	4% Benz
31% Age 22-30	6% Coke
34% Age 31-40	22% Crack
12% Age 41 and over	2% Demerol
	21% ETOH
	1% Opiates
	42% THC
<b><i>Education Level</i></b>	<b><i>Primary Mental Diagnosis</i></b>
2% 8 <sup>th</sup> grade completed	1% Anti-social personality
8% 9 <sup>th</sup> grade completed	14% Anxiety
14% 10 <sup>th</sup> grade completed	9% Bipolar disorder
11% 11 <sup>th</sup> grade completed	23% Depression
32% High School completed	1% Schizophrenia
15% GED obtained	51% Substance abuse
12% Some College	
1% Associate's Degree	
4% Bachelor's Degree	
<b><i>Marital Status</i></b>	<b><i>Military Status</i></b>
16% Divorced	2% Veteran
18% Married	98% Non-military
9% Separated	
55% Single	
2% Widowed	
<b><i>Number of Children</i></b>	<b><i>Illiteracy</i></b>
40% No children	2% Reading Problems
38% 1-2 children	2% Writing Problems
21% 3 or more children	

## **PARTICIPANTS' COMPLIANCE WITH THE DRUG COURT PROGRAM**

The Drug Court has admitted a total of 99 individuals. Twenty-seven percent of those admitted are currently active in the program, which is lower than the goal of 50 active participants at any given time. Most of this discrepancy is due to the fact that the data used for the process evaluation were obtained one week after several individuals graduated from the program. Thirty-six percent of those admitted have graduated, and thirty-six percent of those admitted have been terminated. Those terminated were in the program for an average of 164 days (min. = 7, max = 420). The retention rate has been 64%, which is slightly lower than the national retention rate of 67%, but the retention rate would approach 70% as the number of active participants increases to 50 again.

Individuals admitted into the Drug Court program are required to attend numerous meetings throughout the week and to take random drug screens. The participants attended 91% of the 1,009 scheduled MRT classes. The AA/NA meetings had an attendance rate of 99%, which translates to an average of 6 required meetings per person per week. Ninety-three percent of the required counseling meetings were attended; each person attended an average of 2.3 counseling sessions per week. Participants had a 98% attendance rate for meetings with the case managers.

The participants attended 96% of their scheduled meetings with Judge Ash. He has sanctioned 100% of those admitted to the program at least once. The active participants have averaged 3 sanctions each, the graduates have averaged 3.8 sanctions each, and those terminated have averaged 5.1 sanctions each. The most commonly used sanction is jail time (35%) and community service (22%); See Table 10 for more information about the sanctions given.

The Drug Court participants have taken a total of 4,729 drug screens and passed 89% of them. When the participants did test positive for drugs, they usually tested positive for benzodiazepines (34%), marijuana (19%), cocaine (13%), barbiturates (12%), and opiates (11%).

Twenty-one percent of the individuals have been arrested while in Drug Court; most of them have been arrested only once. Three individuals who have graduated (8% of the 36) have been arrested since graduation. See Table 9 for a complete breakdown of the charges against the individuals.

On a more positive note, 20% of the 35 participants who did not have a GED or high school diploma have earned a GED while in the Drug Court program. Four of the 48 female participants have each had a baby; all four babies were born drug-free. Eighty-six percent of the graduates were employed at graduation. See Table 11.

**Table 9. Activities While in Drug Court (N = 99)**

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***Retention and Current Status of Those Admitted to Program***

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**ACTIVE PARTICIPANTS. 27% (N = 27) of those admitted to Drug Court are active participants.**

22% (N = 8) of the active participants have been in the program for 6 or fewer months.

22% (N = 8) of the active participants have been in the program for 7 to 12 months.

28% (N = 10) of the active participants have been in the program for 13 to 18 months.

3% (N = 1) of the active participants have been in the program for 19 to 24 months.

**GRADUATES. 36% (N = 36) of those admitted to Drug Court have graduated.**

14% (N = 5) of the graduates were in the program for 7 to 12 months.

72% (N = 26) of the graduates were in the program for 13 to 18 months.

11% (N = 4) of the graduates were in the program for 19 to 24 months.

3% (N = 1) of the graduates were in the program for 25 or more months.

**TERMINATED PARTICIPANTS. 36% (N = 36) of those admitted to Drug Court have been terminated.**

61% (N = 22) of those terminated were in the program for 6 or fewer months.

33% (N = 12) of those terminated were in the program for 7 to 12 months.

6% (N = 2) of those terminated were in the program for 13 or more months.

**Current Phase of the Active Participants (N = 27)**

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- 33% (N = 9) - Phase One
- 37% (N = 10) - Phase Two
- 30% (N = 8) - Phase Three

**Compliance with Drug Court Program Requirements(N = 99)**

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**MRT CLASSES.** The 99 participants had a total of 1,009 scheduled appointments for the MRT class.

- 91% - Appointments attended (N = 921)
- 3% - Appointments were 'No Show' (N = 30)
- 4% - Appointments canceled (N = 40)
- 1% - Appointments excused (N = 6)
- 1% - Appointments rescheduled (N = 12)

**AA/NA MEETINGS.** The 99 participants had a total of 12,386 required AA/NA meetings to attend, which translates to 6 meetings required per person per week.

- 99% - Meetings attended (N = 12,210)
- 1% - Meetings not attended (N = 176)

**COUNSELING MEETINGS.** The 99 participants had a total of 4988 required counseling meetings to attend, which translates to 2.3 meetings required per person per week.

- 93% - Meetings attended (N = 4621)
- 7% - Meetings not attended (N = 367)

**POLICE VISITS.** The 99 participants have had a total of 65 police visits. The number of police visits is low because the police officer who was assigned to Drug Court has been called to active duty for the war with Iraq.

**DRUG SCREENS.** The 99 participants have taken a total of 4729 drug screen tests while in the program. The results are:

- 89% - Negative (N = 4189)
- 8% - Positive (N = 372)
- 1% - Tampered (N = 65)
- 2% - Missed Appointment (N = 92)
- .1% - Leaked (N = 3)
- .2% - Not back yet (N = 8)

**POSITIVE DRUG SCREEN RESULTS. The 372 drug screen results tested positive for the following drugs:**

- 34% - Benzodiazepines (N = 126)
- 19% - Marijuana (N = 70)
- 13% - Cocaine (N = 47)
- 12% - Barbiturates (N = 46)
- 11% - Opiates (N = 42)
- 5% - Alcohol (N = 18)
- 1% - Amphetamines (N = 3)
- 1% - Morphine (N = 3)
- 1% - Cocaine and THC (N = 3)
- .2% - Cocaine and Crystal Meth (N = 1)
- 3% - Missing/Unknown

**CASE MANAGER. The 99 participants had a total of 982 appointments scheduled with their case manager.**

- 98% - Appointments attended (N = 966)
- .2% - Appointments rescheduled (N = 2)
- .9% - Appointments were 'No Show' (N = 9)
- .5% - Appointments excused/canceled (N = 5)

**PROBATION OFFICER. The 99 participants had a total of 2,004 appointments scheduled with their probation officer.**

- 96% - Appointments attended (N = 1,924)
- .1% - Appointments rescheduled (N = 2)
- 3% - Appointments were 'No Show' (N = 55)
- 1% - Appointments excused/canceled (N = 23)

**COURT APPEARANCES. The 99 participants had a total of 2,345 scheduled court appearances with the judge.**

- 96% - Appointments attended (N = 2,251)
- 2% - Appointments were 'No Show' (N = 42)
- 1% - Appointments rescheduled (N = 23)
- 1% - Appointments excused/canceled (N = 29)

**SANCTIONS. The judge sanctioned 100% (N = 99) of the drug court participants at least once.**

**Active Participants (N = 27)**

Total sanctions = 82

Average # sanctions = 3.0

**Graduates of Program (N = 36)**

Total sanctions = 138

Average # sanctions = 3.8

**Participants Terminated from Program (N = 36)**

Total sanctions = 182

Average # sanctions = 5.1

**All Participants of the Drug Court Program (N = 99)**

Total sanctions = 402

Average # sanctions = 4.1

**ARRESTS In Drug Court. 21% (N = 21 of 99) Participants were arrested while in Drug Court. The charges against the 21 participants were classified as follows:**

- 6 - Drug offense charges
- 5 - DUI charges
- 9 - Other nonviolent charges
- 4 - Other traffic offense charges
- 5 - Violent offense charges

**ARRESTS Since Graduation. 8% (N = 3 of 36) Participants were arrested after graduation from Drug Court. The charges against the 3 participants were classified as follows:**

- 3 - Drug offense charges
  - 1 - DUI charges
  - 2 - Other nonviolent charges
  - 0 - Other traffic offense charges
  - 0 - Violent offense charges
-

**Table 10. Sanctions Given to Drug Court Participants**

Type of Sanction	Percentage	N
Jail Time	35%	141
Community service	22%	89
Multiple sanctions	10%	41
Terminated from drug court	9%	36
Bench warrant issued	6%	25
Other Sanction	6%	24
Additional AA/NA meetings	5%	20
Demoted to earlier phase	2%	8
Residential treatment	2%	8
Additional counseling	2%	9
Additional drug screens	.5%	2
Additional court appearances	.2%	1
Warning from judge	.2%	1

**Table 11. Personal Achievements while in Drug Court**

20% ( $N = 7$ ) of the 35 participants who did not have a GED or high school diploma obtained their GED while in Drug Court.

8% ( $N = 4$ ) of the 48 **female** participants have had a baby while enrolled in the Drug Court program.

100% ( $N = 4$ ) of the babies born were drug free.

0% ( $N = 0$ ) of the babies born were not drug free.

86% ( $N = 31$ ) of the 36 graduates were employed at graduation.

## INTERVIEWS WITH TEAM, PARTICIPANTS, AND GRADUATES

**Eligibility Criteria.** There were a few examples mentioned by the team members indicating they had to deny admission to ‘exceptional’ individuals who they thought might benefit from the program because they were ineligible, but all the team members felt the eligibility criteria worked for most situations.

**Program Rules.** The team members spoke about changes that had been made, such as requiring participants in Phase III to prepare a graduation plan. The Drug Court team is scheduled to have an in-house workshop in August, and a review of the program rules will be conducted. The team members seemed comfortable with the flexibility they had to discuss and/or modify the rules as they learned more about how to best work with the Drug Court participants.

**Sanctions.** Determining the best sanction for noncompliance or positive drug screen results is a challenge that all Drug Courts struggle with. This Drug Court is not immune to the struggle. The participants, graduates, and team members were in agreement that it is difficult to find sanctions that work for each individual. Some participants and graduates wanted the exact same sanctions applied to everyone—out of a sense of fairness, while others wanted sanctions that were equally effective—which might mean different sanctions for the individuals. The participants and graduates thought jail was a useful sanction for some, but not as useful for others.

**Strengths.** The Staff! The participants and graduates were asked to rate the importance of 9 elements in relation to helping them stay drug/alcohol free. Three elements were rated as ‘Very Important’ by everyone: (1) close monitoring by the judge, (2) support from the staff, and (3) random urine testing. Furthermore, the Drug Court participants and graduates spoke *very highly* of Judge Ash, Myra Beasley, Angie Hostetler, and Mary Schneider when discussing their progress towards sobriety.

**Weaknesses.** Ideas mentioned by team members as well as some participants and graduates indicate the main difficulties are: (1) finding adequate housing for participants who need it; (2) assisting participants with transportation needs to attend the required meetings, job interviews, etc.; and (3) helping participants to find employment, because many companies will not hire people who have been convicted of a felony. There was only one other topic mentioned by a few individuals—the need for more community awareness about Drug Court as a viable alternative to traditional sentencing choices.

**Wish List.** The Drug Court team members mentioned other resources that would be very helpful for the program operation. These needs include: (1) additional funds to reinstate the police liaison officer; (2) larger space for the Drug Court program; (3) more accessible residential treatment...geographically closer and with a shorter waiting period; (4) a full-time secretary to assist with office management and administration of drug screens; and, (5) full-time representatives from the District Attorney’s office and the Public Defender’s office.

## CONCLUSIONS

The preliminary process evaluation completed last year indicated that funding was a major issue for the Drug Court. The recent legislative change (House Bill No. 1253) will provide much of the funding, once enough money has accumulated. The Byrne grant that was awarded to the Drug Court will help to pay expenses during the transition time from the end of the implementation grant period (August 31, 2003) until the state Drug Court funds become available. Receiving an enhancement grant from the Office of Justice Programs will allow the Drug Court to increase the number of participants to 75 and to reinstate funds in the budget for a police liaison officer.

Reinstating a police liaison officer would not only provide help in monitoring the compliance of the Drug Court participants, but it would also provide another perspective during the team meetings. Originally, the Drug Court team subcontracted most of the services out to other agencies. Now, almost all services are conducted in-house except the treatment services. There are significant benefits to conducting most of the services in-house—such as cost, efficiency, and common goals—but, one potential drawback is that the team may become less objective. ‘Group think’ has not been an issue to date, but having the police liaison officer on the team would help minimize it.

The large graduation that occurred within the last month has reduced the number of active participants to 27. It will be important for the Drug Court team to continue advertising the program as an alternative to traditional sentencing, especially now that BI, Inc. is no longer working with the Drug Court. [BI, Inc. had referred 17 of the 99 participants.] The new Drug Court website ([www.rutherfordcounty.org/drugcourt/](http://www.rutherfordcounty.org/drugcourt/)) may help increase the publicity.

The Drug Court team is committed to reducing the recidivism and drug abuse rates for individuals within the community. The participants and graduates who were interviewed for the process evaluation considered Judge Ash and the Drug Court team to be very important in helping them to stay drug/alcohol free. The Drug Court has demonstrated a willingness to be flexible in their responses to individuals (e.g., sanctions, incentives) and a willingness to modify the program structure when necessary. In sum, the Drug Court is providing a useful service to the community and to the participants who are admitted to the program.