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Kenton Drug Court Process Evaluation

For the Period From April 15, 1998 to March 31, 1999

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### Table of Contents

**Executive Summary**  
**Program Description and Background**  
Program Goals  
Recruitment and Screening  
Capacity  
Treatment Programming  
Treatment Modalities Used  
Relapse Patterns  
Client Monitoring  
Aftercare  
Information Capabilities and Reporting  
Program Decision Making  
Funding  
Evaluation  
Program Strengths  
Potential Program Changes  
Advice to Other Drug Courts  
**Staff Characteristics**  
**Community Agencies**  
**Client Characteristics**  
Graduates and Drop-Outs  
**Perceptions**  
Judge  
Client  
Treatment  
Defense  
Prosecution  
Police  
Jail  
**Conclusion**  
**Methodology**
Index of Tables

Table 1. Key Components 11
Table 2. Program Goals and Measures 11
Table 3. Client Goals 14
Table 4. Treatment Modalities 20
Table 5. Summary of Client Contact with Program Components 24
Table 6. Tasks by Staff Position 29
Table 7. Kenton Drug Court Committee Members 30
Table 8. Community Linkages 31
Table 9. Current Client Characteristics 32
Table 10. Client Perceptions about the Importance of Program Components 39
Table 11. Treatment Facilities Surveyed 43
Table 12. Process Evaluation Methodology 57
Index of Appendices

Appendix A    Methodology
Appendix B    Newspaper Articles
Appendix C    Drug Court Brochures and Handbook
Appendix D    ASI Client Examples
Appendix E    Client Calendar Examples
Appendix F    Monthly Report Examples
Appendix G    Quarterly Report Examples
Appendix H    Program Manuals
Executive Summary

The purpose of this report is to provide the results of the process evaluation of the Kenton Drug Court program. This comprehensive process evaluation included an extensive interview with the treatment coordinator for the Kenton Drug Court program, an in-depth interview with the Drug Court Judge, and surveys of: 10 randomly selected active clients, one Drug Court staff member, 3 community treatment providers, 1 defense attorney, one prosecuting attorney, 1 representative from the Kenton County Jail, and 1 police department representative. In all, 20 different individuals representing 9 different agency perspectives provided information about the Kenton Drug Court program for this report. The data for this report is for the period from April 15, 1998 to March 31, 1999.

In Fiscal Year 1998, Kenton County had 2,659 drug related arrests. In response to the rising costs of incarceration and increased drug related arrests, the Kenton Drug Court program was established April 1, 1998 and the first client entered the program on April 15, 1998. Currently, there are 27 active clients in the program. The Drug Court program serves a primarily urban population.

There are three phases in the Drug Court program. The average time spent in the program, before graduation, is one to two years. Clients must successfully go through all three Phases in the program, must maintain a good attendance record at all treatment and court sessions, and must maintain court approved housing and employment. Graduations will occur quarterly each year. Due to the length of the program, no graduations have occurred to date.

Program Goal Achievement. The Kenton Drug Court program has six primary overall goals: promote abstinence; decrease recidivism; increase community safety; increase life skills; increase community awareness; and expand and maintain a resource base. Highlights of goal achievement for the Kenton Drug Court include only 2% of the 456 urine screens were positive and only 3 participants were re-incarcerated for Drug Court violations during the fourth quarter of the first year. In addition, during the fourth quarter of the first year, 82% of participants obtained or maintained full-time employment. One article in the local newspaper specifically referring to the Kenton Drug Court program has been published. Also, in the fourth quarter of the first year, one or more Kenton Drug Court staff and/or Judge attended 7 meetings concerning the Drug Court program. Finally, the Drug Court program is currently working with approximately 16 different state and community based organizations.

Drug Court Staff. The Drug Court program has 2 staff members, a treatment coordinator and a case specialist. One staff member 14 years of experience in the substance abuse field and the other has no prior experience with substance abuse treatment and the other has. One staff member has a degree in police administration. Also, one staff member has been with the Drug Court program for six months and the other has been with the program for seven months.
**Drug Court Judge.** Currently, there is one Judge involved in the Kenton Drug Court program. Judge Bartlett has been on the bench for six years and has been involved in planning and implementing the Kenton Drug Court program. He has attended various training sessions to prepare for the Kenton Drug Court program and has visited other Drug Court programs in Kentucky.

**Drug Court Clients.** Current clients are 74% African-American and 26% white. Also, clients are an average of 32 with ages ranging from 19 to 50 years old. Approximately 68% of the clients have children, 7% are currently married, and 37% have never been married. Currently, 80% of clients are working full-time. The average years of drug use for clients is 10.5 years and approximately 56% of the clients had been in treatment prior to entering the Drug Court program. Participants had an average of 30 prior charges and had spent an average of 9 months in jail/prison in their lifetime.

**Additional Services.** Services that were most often mentioned by respondents but were not currently offered by the Kenton Drug Court program included: (1) “Service of God’s Word,” and (2) “Some sort of sponsor group, maybe one when a phasing up occurs.”

**Strengths.** Each participant was asked about the perceived strengths of the program as well as the things they believed needed to change. The following are some of the strengths mentioned by respondents: (1) Drug Court staff, (2) Program helps clients to stay clean, (3) Accountability of clients, (4) Close monitoring of clients, (5) Intense level of treatment service, (6) Employment requirement, (7) Self-esteem, (8) Length of commitment required from clients, (9) Clients are given an adequate number of chances to succeed, (10) Immediate sanctions, (11) Offers clients assistance in many areas of life, and (12) Urinalysis.

**Suggested Improvements.** The following are some of the improvements suggested by the respondents: (1) Homework assignments with more variety, (2) “I feel the Word of God needs to be involved,” (3) Begin weekly hearings on time, (4) Re-examine the number of urine tests required of clients, (5) Continue to search for services outside of traditional Northern Kentucky treatment services, (6) Be less restrictive in eligibility requirements, (7) Better communication procedures, (8) Better training for police, (9) Law enforcement officer assigned to work with the program, (10) More cooperation with jailer and staff, (11) “I think we need client advocates to help make adjustments to life,” and (12) More documentation by staff.

One major problem with program implementation was getting other Judges to work with the Kentucky Drug Court program. However, defense attorneys and prosecutors maintain an ongoing effort to encourage other Judges to work the program.

**Advice to new Drug Court Programs.** Respondents were also asked what advice they would give to new Drug Court programs. Their responses included: (1) “Structure the program in such a way that it makes sense for the particular jurisdiction. What works in Kenton County may not work elsewhere,” (2) Use a consistent model of treatment, (3)
Utilize group counseling, (4) Make eligibility and procedures for admission to Drug
Court as simple as possible, (5) Do not make eligibility requirements too restrictive, (6)
“Work as close as you can with the Drug Court workers and have as much contact with
the program as possible,” (7) “Be flexible, open-minded and expect change,” and (8)
“Anyone interested in starting a Drug Court should take time to understand drug and
alcohol abuse and understand the clientele.”

Concluding Comments. The following were concluding responses by various
respondents. Although these are concluding comments, they also are excellent
summaries of what respondents think about the Drug Court program.

Concluding comments from clients included:

- “I think that it’s great because it has helped me out 100% on my life. I am glad I
  had a chance to join the program thanks to the Judge and staff.”
- “I want to thank all staff for caring when they didn’t have to. Thank you, Judge
  Bartlett, Diane, and Susan.”
- “Drug Court has helped me with a lot of issues”
- “Drug Court workers are understanding authority figures.”
- “I believe the Drug Court program is and can be a very good program”
- “Although I feel there is a lot of homework, I say this because sometimes I feel
  that I’m not doing my best because I’m being pressured”
- “I feel that the people in Drug Court want to see me do well and my life get
  better. I don’t feel they’re here to hurt but they are here to help if we let them.”
- “Going from Transitions to aftercare was a very comfortable move. I like the
  feeling of caring you get from the Drug Court people. The flexibility of
  individualizing has gotten better and helpful. Always there to try and find
  solution to your problems, they put a lot of thought into your situations.”
- “Just the things that are not helping me, that stress me out.”
- “It works if you work it.”

Additional comments made by treatment representatives included the following:

- “Like any other program, it will take some time for Drug Court to become more
  established and to improve on problem areas. Clients appear to benefit from the
  increased scrutiny, typically unavailable to most clients on non-intensive
  probation and parole.”
- “[The Drug Court program has] quick response, friendly staff, [and] seems open
to ideas from other providers.”

Further comments from the jail representative included: “I think it [Drug Court]
will become a great program, once it has time to get off the ground.”

The Drug Court Judge commented, “I think that anyone who does it, and has any
degree of success is doing well, is a step in the right direction.”
Summary. In summary, the Kenton Drug Court was established approximately one year ago. This program is based on the Key Components and has three program phases, which will take an average client approximately 18 months to complete. As of March 31, 1999, there were 28 active clients, and 23 participants had obtained or maintained full-time employment. Due to the length of the program, no clients have graduated to date.

The most compelling aspect of the Kenton Drug Court program includes the immediate sanctions for acts of non-compliance. Another compelling aspect is the low termination rate of clients. To date, only 6 clients have been terminated from the program. The Final compelling aspect of the program is the commitment of the treatment organizations, which serve the Kenton Drug Court program.

In conclusion, the Kenton Drug Court program has some problems they are committed to working on, consistently, until they are overcome. Respondents were very positive in their views of the Kenton Drug Court program. The staff is committed, and the Drug Court Judge provides an overwhelmingly supportive environment, for this program and the clients that it serves. The Kenton Drug Court program has worked successfully to achieve the program goals and the key individuals involved are committed to future achievements, as well.
Program Description and Background

The motto for the Kentucky Drug Courts is “A chance...a change.” Kentucky’s Drug Courts are aligned with more than 200 Drug Courts across the United States. In Fiscal Year 1998, Kenton County had 2,659 drug arrests.¹

Kenton County is located in Northern Kentucky. “Northern Kentucky is the name often given to Boone, Kenton, and Campbell counties, the northernmost in the state and all of which lie within the greater Cincinnati, Ohio metropolitan area.”² According to the 1990 census, Kenton County is 92.6% urban.³

The Kenton Drug Court program was established April 1, 1998 and the first client entered the program on April 15, 1998. However, due to the newness of the program, changes are still taking place. Drug Court clients meet with Drug Court staff at the Drug Court office at 808 Scott Street. The Phase II treatment aftercare groups also meet at the Drug Court office. Phase I treatment groups meet at independent treatment facilities. Currently, there are no clients in Phase III of the Kenton Drug Court program. The Kenton Drug Court serves Kenton County but can also accept clients from Campbell and Boone counties. Drug Court program hours are from 8am-4pm Monday through Friday.

One Judge currently works with the Kenton Drug Court program. Judge Bartlett has worked with the program since its inception. The Judge has attended a number of training sessions and visited other Drug Court programs to prepare for the Kenton Drug Court program.

The Kenton Drug Court program is grounded in the Key Components described in the 1997 publication *Defining Drug Courts: The Key Components*.⁴ The overall mission of Drug Courts is to stop the abuse of alcohol and other drugs and related criminal activity. In exchange for successful completion of the treatment program, the court may dismiss the original charge, reduce or set aside a sentence, offer some lesser penalty, or offer a combination of these. Drug Courts transform the roles of both criminal justice practitioners and Alcohol and Other Drug (AOD) treatment providers. The Judge is the central figure in a team effort that focuses on sobriety and accountability as primary goals. To ensure the primary goals are met, the Drug Courts Standards Committee developed some key components for all Drug Court programs. The key components as described in the 1997 *Defining Drug Courts: The Key Components*, are:

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² http://www.uky.edu/KentuckyAtlas/21117.html
³ http://www.lrc.state.ky.us/other/econ/counties/Kenton/censoc.txt
Table 1. Key Components

<table>
<thead>
<tr>
<th>1. Drug Courts integrate alcohol and other drug treatment services with justice system case processing.</th>
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<tbody>
<tr>
<td>2. Using a non-adversarial approach, prosecution and defense counsel promote public safety while protecting participants’ due process rights.</td>
</tr>
<tr>
<td>3. Eligible participants are identified early and promptly placed in the Drug Court program.</td>
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<tr>
<td>4. Drug Courts provide access to a continuum of alcohol, drug, and other related treatment and rehabilitation services.</td>
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<tr>
<td>5. Abstinence is monitored by frequent alcohol and other drug testing.</td>
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<td>6. A coordinated strategy governs Drug Court responses to participants’ compliance.</td>
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<td>7. Ongoing judicial interaction with each Drug Court participant is essential.</td>
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<tr>
<td>8. Monitoring and evaluation measure the achievement of program goals and gage effectiveness.</td>
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<td>9. Continuing interdisciplinary education promotes effective Drug Court planning, implementation, and operations.</td>
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<tr>
<td>10. Forging partnerships among Drug Courts, public agencies, and community-based organizations generates local support and enhances Drug Court effectiveness.</td>
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Program Goals

In addition to the Key Components, the main goal of the Kenton Drug Court is to help clients find that there is a better way to live their lives. The Kenton Drug Court program also reports on the following goals and measures or benchmarks for goal achievement:

Table 2. Program Goals and Measures

<table>
<thead>
<tr>
<th>Program Goals</th>
<th>Measures for Goal Achievement</th>
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</thead>
<tbody>
<tr>
<td>1. Promote abstinence</td>
<td>Drug free babies; clean urines; number of meetings attended (AA/NA, treatment groups, education, case specialist meetings)</td>
</tr>
<tr>
<td>2. Decrease recidivism</td>
<td># re-arrests while in program and after graduation (tracked with Courtnet, a daily jail list, and arraignments are monitored daily as well)</td>
</tr>
<tr>
<td>3. Community safety</td>
<td>Lower community drug arrests; lower property crime</td>
</tr>
<tr>
<td>4. Increase life skills</td>
<td>Court approved housing; court approved employment; education level of clients; gaining/keeping custody of children</td>
</tr>
<tr>
<td>5. Community awareness</td>
<td>#media contacts; national recognition; additional funding; requests to speak; more referrals</td>
</tr>
<tr>
<td>6. Expand and maintain resource base</td>
<td>Expanding and maintaining the number of agencies the Drug Court program can refer clients to or who work with the Drug Court program</td>
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Program Goal Achievement. Indicators for each of the program goals described in Table 2 are listed below.

1. Promote Abstinence

Data from the second quarterly report for the first year, January 1-March 31, 1999, indicate that:

- 456 urine screens were checked and only 2% were positive.
- 27 individual counseling/treatment sessions were held.
- 88 group sessions were conducted.
- 13 Drug Court sessions were held.

2. Decrease Recidivism

Data from the second quarterly report for the first year, January 1-March 31, 1999, indicate that:

- 4 participants were promoted from Phase I to Phase II.
- Only 3 of the current participants were re-incarcerated for new offenses. All were violators of Drug Court rules.

3. Community Safety

- Community safety is a long term goal of the program and has not yet been measured. However, it should be noted that for the period of time that clients are in the Drug Court program (approximately one to two years), clients are closely supervised. During this supervision period there are very few new arrests, few dirty drug screens, the majority of clients are employed full-time, the majority of clients are paying child support or caring for their children, and the majority are paying any other debts they may have incurred. This close supervision contributes in a substantial way to the community safety.

4. Increase Life Skills

In the second quarterly report for the first year, January 1-March 31, 1999, the data indicates:

- 1 vocational rehabilitation assessment was conducted.
- 7 new GED referrals were made.
- 4 Vocational Rehabilitation referrals were made.
- 1 participant received a GED.
- 23 participants obtained or maintained employment.
5. Community Awareness

- 1 article in the local newspaper specifically referring to the Kenton Drug Court has been published since Drug Court began (see Appendix B).

In addition, in the second quarterly report for the first year, January 1-March 31, 1999, one or more Kenton Drug Court staff attended:

- A training in Brooklyn, New York, entitled *Planning Workshop for Judges and Drug Court Coordinators*.
- Three training sessions in Frankfort, Kentucky entitled *Discipline and Disciplinary Action, Interpersonal Communication, and New Managers Survival School*.
- A lunch meeting with representatives from the Campbell Adult Drug Court and the Hamilton County, Ohio Drug Court program to discuss establishing a reciprocal agreement regarding the Drug Courts in the three jurisdictions.
- Several meetings with the Reverend Judy Nunley concerning a Volunteers Program to be led by Reverend Nunley.
- A meeting with the police chiefs of Kenton County to elicit their support for the Drug Court program.

6. Expanding and Maintaining Resource Base

Services and coordination with other community organizations indicated in the second quarterly report for the first year, January 1-March 31, 1999, included:

- Department of Vocational Rehabilitation
- Narcotics Anonymous
- Alcoholics Anonymous
- NorthKey Community Care
- Hospice Bereavement Counseling
- Career Services
- Fairhaven Rescue Mission
- Welcome House
- Northern Kentucky Tech
- St. Elizabeth Behavioral Health Center
- Transitions, Inc.
- Northern Kentucky Family Health Center
- Sex and Love Addicts Anonymous
- Storehouse Ministries
- 5th School District
- 531, Inc.
- Promises, Inc.

- Also, Mr. Mac Bell from the Cabinet for Health Services has offered to assist the Kenton Drug Court program in locating appropriate treatment for participants.
**Client Goals.** The following overall client goals are printed in the client handbook.

<table>
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<th>Table 3. Client Goals</th>
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<tr>
<td>1. To learn to be drug free.</td>
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<tr>
<td>2. To learn better ways of coping with life.</td>
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<td>3. To adjust to a drug-free lifestyle.</td>
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<td>4. To develop a non-criminal pattern of living.</td>
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<td>5. To enhance employment skills through vocational training and educational pursuits.</td>
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<tr>
<td>6. To attend NA/AA and other support groups.</td>
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<td>7. To increase social skills.</td>
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<tr>
<td>8. To enhance self-esteem and self-motivation.</td>
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<tr>
<td>9. To learn the warning signs of relapse and develop a relapse prevention plan.</td>
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Clients must agree to these goals and sign a contract stating they agree to the goals and the rules and requirements of the program.

**Recruitment and Screening**

Drug Court clients are all volunteers in that they can chose not to participate in the Drug Court program. Typically, the Judge sentences a client to the Drug Court as a part of their probation. Currently, all of the participants in the Drug Court program are probation clients.

Clients find out about the Drug Court program through their attorneys and Drug Court staff. If they are in detention, the treatment coordinator will discuss the program with them. Otherwise, the attorneys have clients set up an appointment with the case specialist to discuss the program. The program handbook is used to help explain the program and its requirements.

The Kenton Drug Court has several exclusionary criteria. Only non-violent offenders are admitted to the program. Sexual offenders are not admitted to the Kenton Drug Court program. People with a history of trafficking or with a current trafficking charge that the Commonwealth’s Attorney is not willing to amend to a possession charge are excluded from entering the Kenton Drug Court program.

Eligibility screening is performed by a number of agencies. The defense counsel first fills out a part of the eligibility sheet. The case specialist then runs a records check of National Crime Information Center (NCIC) and Kentucky charges that the client may have. Once that check is completed, the Office of Probation and Parole receives the eligibility sheet and performs an eligibility screening using their own criteria. The Commonwealth’s Attorney then gets the eligibility sheet and if that office has no objections, the sheet is then sent to the Drug Court treatment coordinator to conduct the Addiction Severity Index (ASI). The ASI is completed either in detention or in the Drug Court office. Once all of these screenings are done, the Judge is presented with all of the information. A client can then be sentenced to complete the Drug Court program as a
part of their probation. This sentencing usually takes place six weeks after the defense attorney does initial eligibility assessment. The Judge has the final determination of whether a client can become a part of the program.

Once the client has been determined as eligible for the Drug Court program, they are sentenced and no further assessments for suitability for the Drug Court program are done. Once a client is a part of the Drug Court program, additional assessments may be conducted.

**Capacity**

Currently, there is no limit to the number of clients that the Kenton Drug Court program will accommodate. However, that may soon change. The treatment coordinator predicted that a limit would be set at 35 clients. Currently, 28 clients are in the program. Clients begin the program separately when the next space becomes available. There is no waiting list.

**Timing**. The Kenton Drug Court program will take between 12 and 18 months to complete. To date, there have been no graduations. It takes approximately four to six weeks between initial determination of eligibility by the defense counsel to sentencing by the Judge into the program. Within a week of the Judge’s sentencing, a client will attend their first Drug Court session. When clients enter the program they enter either intensive outpatient treatment or residential treatment within one week. Individual Program Plans (IPPs) are developed when the client first meets with the treatment provider.

**Treatment Programming**

**Assessment of Needs**. Potential clients must undergo an assessment to establish drug dependency and a history of drug use. The Addiction Severity Index (ASI) is administered by the Kenton Drug Court treatment coordinator as a part of the eligibility screening. The ASI\(^5\) is a multidimensional instrument used to diagnose, evaluate, and assess change in a client’s drug abuse patterns. It identifies personal and family background, current status, and problems in six domains including medical status, employment/support status, drug/alcohol use, legal status, family/social relationships, and psychiatric status. The ASI is a computerized assessment tool based upon the concept that successful treatment of drug offenders must address problems which may have contributed to their drug dependency. It takes approximately forty-five minutes to administer. The ASI is used to determine program eligibility and to determine risk and client appropriateness; if a client cannot identify that they have a problem, they are at a greater risk for non-compliance. (See Appendix D for examples of the ASI client reports.)

**Program Documentation**. Each client receives a participant handbook. This handbook describes the program, the expected goals for each client, costs and payments,

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participant rules, program requirements, individual, group, and family counseling, chemical dependency education, support groups, incarceration, employment, the vocational/job training component, vocational rehabilitation, random drug screens, discharge, graduation, and program hours. In addition, each participant signs an Agreement of Participation which describes program expectations, and they receive a participant calendar which has assigned journal entries and other homework. (See Appendix C for an example of the program handbook.)

**Individual Program Plans (IPPs).** Individualized program plans (IPPs) are developed for each Drug Court client. Plans are developed by the treatment coordinator and then gone over with the client to see if they are in agreement with all the requirements. Plans are updated every 90 days with input from the client and plans are modified as needed. Each client has the stipulation to learn about the disease concept and each client must adhere to the requirements of the key components and Kenton Drug Court, but programs can also be individualized. Ways in which program plans are individualized include the amount of treatment a client receives, the focus of treatment groups, and individual sessions that a client attends. Some of the topics the groups cover include addressing boundary issues, anger management, relapse education, self-discovery techniques, goal planning, and monitoring feelings.

**Phase I** can be completed in 30 to 60 days with continuous stable behavior. Stable behavior is defined as working steadily, living on one's own, and not having any major violations of program or probation rules. During Phase I, clients are either in in-patient residential treatment or Intensive Out-Patient (IOP) treatment. If clients are in residential treatment they are required to attend 5 days of meetings per week, attend 3-5 documented Alcoholics Anonymous (AA) meetings per week, provide at least three random drug screens per week, stay in the treatment house when they are not working, and do chores. Clients in IOP treatment attend group sessions four times per week; AA groups are built into IOP. Clients in IOP treatment are also required to provide at least three random drug screens per week and be working between 30 and 40 hours a week. Group sessions offered include those that focus on life skills, HIV/AIDS, feelings, and identifying the addictive personality. Clients also attend one Drug Court session per week and write seven daily journal assignments, which are submitted, to the Judge.

**Phase II** can be completed in 8 to 10 months. When a client enters Phase II, they have usually completed their residential treatment and are in the treatment aftercare phase of the Drug Court program. Because group sessions are conducted with the individual treatment providers, clients usually have completed their group sessions by the time they enter Phase II. If the clients are in IOP treatment, they will attend three group sessions per week. Clients are required to provide two random urine screens per week, to attend Drug Court sessions twice a month, and to be working full-time. In this Phase, clients may begin to work on their GED. Mental health and grief sessions are also implemented in Phase II.

**Phase III** can be completed in three months. During Phase III, a client will attend AA one to two times per week, attend Drug Court sessions once per month, provide one
random urine screen per week, and work full-time. Clients may also attend a group session once per week for an hour and a half each time and be working on their GED. Clients are required to have their GED before they graduate. Clients may also be attending mental health individual counseling in Phase III.

**Individual Sessions.** Clients attend individual sessions on a case-by-case basis. If they, or the Drug Court staff, feel that they need to have individual sessions, then they are scheduled. Sessions generally last an hour. Drug Court staff also see clients in court and in Phase II group sessions. Emergency counseling is available to Drug Court clients, as well. If the treatment coordinator is qualified to meet the needs of the client, she will provide the emergency counseling. Otherwise, she will refer the client to the appropriate facility. Informal and unscheduled counseling is also available, as long as the treatment coordinator is not currently meeting with someone else.

**Drug Court Sessions.** The Drug Court program is a single jurisdiction and participants are seen on a Drug Court docket/calendar. Approximately 21-22 clients attend Drug Court sessions at a given time. Drug Court staff provide case notes for each client to the Judge before each court session. The Drug Court Judge reviews the participant files and participants are held accountable for successes or failures. Typically, staff and Judges meet before each session to discuss any issues and successes with clients. In general, Drug Court lasts for one hour and participants are required to stay the whole hour. Each client goes before the Judge in random order; the Judge picks which client he would like to see first. Although the Judge reviews written reports from Drug Court staff, clients report directly to the Drug Court Judge in court, explaining successes and failures. It is during the Drug Court sessions that the Drug Court Judge rewards successes and sanctions clients for noncompliance.

**Program Rules.** Participants also have specific rules they are required to follow while participating in the Drug Court program. These rules are provided to clients in written form and include:

1. **Appropriate clothing is expected at all times.** Sunglasses are not allowed to be worn inside the Drug Court Office or Court unless approved. Clothing bearing drug or alcohol-related themes, or promoting or advertising alcohol or drug use is not allowed. No gang colors or gang clothing can be worn.

2. **Attendance at all scheduled group, individual, and family counseling sessions, educational sessions and Court sessions is mandatory, unless prior approval is obtained.** The client must arrive on time and not leave until the meeting is over. If the client is late, they are not allowed to attend the session and may be considered absent.

3. **The following actions are not tolerated by clients while they are in the Drug Court program:** violence or threats of any kind; use and/or possession of drugs and/or alcohol; belligerent behavior; possession of any type of weapon; inappropriate sexual behavior or harassment.
4. No loitering of family and/or friends is allowed on the premises. If they provide transportation for the client, they are expected to drop them off and pick them up at the end of the session.

5. Clients are not allowed to carry beepers or cellular phones to Court or group sessions.

6. All participants must notify staff of any arrest or court obligations.

7. The program must comply with KRS 620.030 regarding the reporting of cases of abuse or neglect of minors. The program must also comply with KRS 209.030 regarding the reporting of cases of abuse and neglect of adults. Federal law and regulations do not protect any information about suspected child abuse or neglect from being reported under State law to appropriate State or local authorities.

8. Clients are expected to maintain appropriate behavior at all times during Drug Court sessions and while in the courthouse. The Judge will be addressed with respect. Unless prior approval is given, clients are expected to remain for the entire proceeding, refrain from talking while seated, and show support and encouragement to fellow participants by applause, but only during appropriate times.

9. Use of prescription medications are monitored and verified by a physician and must be approved.

In addition, although all sessions and responsibilities to participate in the Drug Court program may require childcare, the Kenton Drug Court program does not provide it. However, the program’s staff may refer clients to potentially available childcare.

Employment. Beginning in Phase II, all Drug Court clients are required to secure and maintain full-time employment. During Phase I, if a client is in residential treatment, they are not required to maintain employment. However, if, during Phase I, they are in IOP, they must work between 30 and 40 hours per week. Drug Court staff verify employment through site visits, phone calls to employers, and check stubs. If a client needs help finding a job, Drug Court staff will direct them to the newspaper classifieds. Also, the Drug Court Judge may mention prospective employers to Drug Court clients in Drug Court sessions and often other Drug Court clients will mention places that they know have openings.

If a client is unable to obtain or maintain employment, he or she must do community service. If unemployment continues, sanctions will increase as the length of unemployment increases.

Employers have been very supportive of clients when they find out that the client is going through the Drug Court program. Examples of employers working with the
Drug Court program include: White Castle, Burger King, Hardee’s, Papa John’s, Redkin, Meritor, and Mubea. Clients also find jobs through construction and many find permanent jobs through temporary agencies.

**Education.** Clients without a High School diploma must obtain a General Education Diploma (GED) before leaving the program. Clients may begin in Phase II to work on their GED. The majority of clients start working on their GED’s during Phase III.

**Housing.** Clients are required to reside in or find Court-approved housing. Often clients have been living with other substance abusers. This environment can hamper sobriety efforts and is often particularly difficult for Drug Court clients to remain in their previous using context. Drug Court clients are encouraged to reduce contact with old friends, places, and habits. This may include a change in relationships and home environment. Drug Court staff assess housing through site visits. They also receive input from the Drug Court Judge about good housing areas. Clients need housing and are at a high risk to re-offend or re-use, they are placed into residential treatment. Others are placed in homeless shelters until they can afford appropriate housing. Clients are required to find their own housing, although the Drug Court will provide a newspaper with housing listings. Clients will bring in addresses of possible housing for approval by Drug Court staff. Clients receive feedback from their peers and the Drug Court Judge. To date, finding and maintaining appropriate housing has not been an issue for the Kenton Drug Court. However, if a client were to continue to live in unsuitable conditions or to refuse to find Court-approved housing, they would be sanctioned.

**Treatment Modalities Used**

The Kenton Drug Court refers clients to treatment at several independent treatment facilities, such as NorthKey and Transitions. Career Services in Cincinnati has also done mental health evaluations for Drug Court clients. These facilities offer services not available through the Drug Court office. As indicated in the Table below, there are a number of different treatment and program modalities that are integrated and used in the Drug Court program. In addition, many of the treatment and program modalities described below are used as needed and on an individualized basis.
### Table 4. Treatment Modalities

<table>
<thead>
<tr>
<th>TREATMENT COMPONENT</th>
<th>RATING*</th>
<th>DURATION</th>
<th>SESSIONS WHERE PROVIDED?</th>
<th>SHOULD BE ADDED OR DROPPED</th>
<th>COMMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Detox</td>
<td>2</td>
<td>7 days</td>
<td>Transitions</td>
<td>Dropped</td>
<td></td>
</tr>
<tr>
<td>Methadone maintenance</td>
<td>N/A</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Medical treatment (e.g., prescription drugs)</td>
<td>4</td>
<td>As needed</td>
<td>As needed</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Individualized treatment plans</td>
<td>5</td>
<td>12-18 months</td>
<td>Aftercare 24</td>
<td>Drug Court Staff</td>
<td>Added</td>
</tr>
<tr>
<td>Staged recovery process model or “treatment matching” model</td>
<td>5</td>
<td>6 months</td>
<td>Aftercare 24</td>
<td>Drug Court office</td>
<td>Added</td>
</tr>
<tr>
<td>Relapse prevention model</td>
<td>5</td>
<td>6 months</td>
<td>24</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Substance abuse education</td>
<td>5</td>
<td>12-18 months</td>
<td>68</td>
<td></td>
<td></td>
</tr>
<tr>
<td>AA/NA type 12-step model</td>
<td>4</td>
<td>12-18 months</td>
<td>136+</td>
<td>Several locations</td>
<td></td>
</tr>
<tr>
<td>Self-help therapy using a manual or diary</td>
<td>4</td>
<td>As needed</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Acupuncture/acupressure</td>
<td>3</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hypnosis</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Substance Abuse Treatment Components

<table>
<thead>
<tr>
<th>MANAGEMENT OF SERVICES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case Management (emphasis on procuring and monitoring service from various agencies to insure delivery of treatment to the clients in the program)</td>
</tr>
<tr>
<td>Advocacy for obtaining services/benefits for the client</td>
</tr>
</tbody>
</table>

#### Management of Services

<table>
<thead>
<tr>
<th>MENTAL HEALTH SERVICES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual Counseling</td>
</tr>
<tr>
<td>Scheduled group therapy or group counseling</td>
</tr>
<tr>
<td>Family therapy</td>
</tr>
<tr>
<td>Art or recreation programs as therapy</td>
</tr>
</tbody>
</table>

1=Not at all critical; 2=Not critical; 3=Not sure; 4=Critical; 5=Extremely critical
<table>
<thead>
<tr>
<th>TREATMENT COMPONENT</th>
<th>RATING*</th>
<th>DURATION</th>
<th>SESSIONS</th>
<th>WHERE PROVIDED?</th>
<th>SHOULD BE ADDED OR DROPPED</th>
<th>COMMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Housing Services</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Housing assistance</td>
<td>4</td>
<td></td>
<td></td>
<td></td>
<td>Added</td>
<td></td>
</tr>
<tr>
<td>Halfway house</td>
<td>4</td>
<td>3-6 months</td>
<td></td>
<td></td>
<td>Fairhaven</td>
<td>Added</td>
</tr>
<tr>
<td>Education</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Education (Academic or remedial focus)</td>
<td>4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>GED before graduation</td>
</tr>
<tr>
<td>Vocational skills training</td>
<td>4</td>
<td>Individual</td>
<td></td>
<td></td>
<td>NorthKey; KY Tech</td>
<td></td>
</tr>
<tr>
<td>Readiness for vocation</td>
<td>4</td>
<td>1/week</td>
<td>5</td>
<td>Transitions</td>
<td>Added</td>
<td></td>
</tr>
<tr>
<td>Employment</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Work release</td>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Employment counseling</td>
<td>3</td>
<td>1/week</td>
<td>7</td>
<td>Transitions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Training</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Social skills development training</td>
<td>4</td>
<td>2 ½ months</td>
<td>10</td>
<td>Drug Court</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Problem solving skills training</td>
<td>4</td>
<td></td>
<td></td>
<td></td>
<td>Added</td>
<td></td>
</tr>
<tr>
<td>Life skills training</td>
<td>4</td>
<td></td>
<td></td>
<td>Transitions</td>
<td></td>
<td>Part of residential &amp; IOP measure # of sessions</td>
</tr>
<tr>
<td>Parenting classes</td>
<td>4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Training in anger management or aggression management</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Stress management</td>
<td>4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Not currently offered</td>
</tr>
<tr>
<td>Biofeedback training</td>
<td>4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Not currently offered</td>
</tr>
<tr>
<td>Relaxation methods</td>
<td>3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Not currently offered</td>
</tr>
<tr>
<td>Transcendental meditation</td>
<td>3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Not currently offered</td>
</tr>
</tbody>
</table>

*1=Not at all critical; 2=Not critical; 3=Not sure; 4=Critical; 5=Extremely critical
### TREATMENT COMPONENT | RATING* | DURATION | SESSIONS | WHERE PROVIDED? | SHOULD BE ADDED OR DROPPED | COMMENT
--- | --- | --- | --- | --- | --- | ---
**Other Components**
Mentoring or big brother | 4 | Case by case | N/A | Volunteers-Reverend Nunley | In beginning phases |
Book reports | 4 | 10 months | Drug Court homework |
Good deed reports | 4 | 10 months | Drug Court homework |
Journaling | 4 | 12-18 months | Drug Court homework |
Contingency contracting (combines both rewards & punishments for specific named behaviors) | 3 | | |
Token economy | 3 | | |
**Health**
Health care (medical, dental) | 4 | As needed | Pike St. Clinic; Northern KY Family Health Centers |
Referrals to health care organizations (e.g., health clinics, physician) | 4 | As needed | Pike St. Clinic; Northern KY Family Health Centers |
Physical exercise | 4 | 10 months | |
HIV testing referral | 4 | | Public Health |
TB testing referral | 4 | | Public Health |

*1=Not at all critical; 2=Not critical; 3=Not sure; 4=Critical; 5=Extremely critical

A number of treatment services are provided at the Drug Court program office. These services include: development of individualized treatment plans, staged recovery process model, and social skills development training. Other services are provided for clients at several locations, such as Transitions, NorthKey, Fairhaven, Kentucky Tech, Pike Street Clinic, Northern Kentucky Family Health Centers, and Public Health locations.
Other Program Components. In addition to each of the treatment components there are several components of the Drug Court program that make the program unique: community service, book reports, the Angela’s Ashes requirement, journals, assignment sheets, good deeds, and mentoring.

Community service is used as a sanction in the Kenton Drug Court. If someone is not employed, they are required to do community service if they have not found a job within two weeks. Clients work from 8 am to 5 pm Saturdays and Sundays. Community service can be used as a sanction for other acts of non-compliance as well. Community service is handled by Transitions, one of the independent treatment facilities to which the Drug Court refers clients. Transitions has a contract with Kenton county government in the form of a Community Corrections Grant. With this program, clients pay ten dollars per day to clean up areas in Kenton County.

Book reports are used in Phase II and Phase III. A great number of the clients are not very literate and this component of the program helps them become exposed to current literature. Book reports are used to build the self-confidence of clients. Drug Court staff must approve book report materials; the only limits are that the material not be offensive or pornographic.

A unique aspect of the Kenton Drug Court is that every client is required to read Angela’s Ashes by Frank McCourt. Clients are encouraged to try to see themselves in the author’s father, who was an alcoholic.

Journal assignments are a part of the clients’ daily homework. During Phase I, clients are required to write daily about a set list of topics. Each days’ assignment is outlined in the participant’s assignment sheet. During Phase II and Phase III, clients are allowed to pick their own topics as well as write about current events and affirmations. Journal assignments allow clients to see their progress through the program and show that their treatment depends on what they put into it.

Clients are required to complete an assignment sheet/calendard each week throughout the program. These assignment sheets are turned in to the Judge at every Court session that the client attends. Included on the assignment sheet are each of the daily assignments, journal assignments, group sessions, and any other scheduled meetings or homework.

Good deeds are another aspect of the Kenton Drug Court. Clients report on the good deeds that they have done in their journal entries. They may be asked to discuss these deeds in court. Examples of some of the things that clients have done to fulfill the good deeds requirement include fixing bikes for children in the neighborhood and taking down Christmas lights for an elderly couple. Good deeds are intended to help the clients feel good about themselves.
The Kenton Drug Court is in the process of beginning a mentoring program. The Reverend Judy Nunley will be at the head of this volunteer program. People from the community will mentor a client at any time during the program. If the client feels the need to have a mentor, they will be able to request one.

**Client Contact.** Clients have contact with a variety of program components on a regular basis during the Drug Court program. In addition, the contact they have with various program components changes as they move through program phases. A summary of client contact by program component is presented in the following table.

Table 5. Summary of Client Contact with Program Components

<table>
<thead>
<tr>
<th></th>
<th>PHASE I</th>
<th></th>
<th>PHASE II</th>
<th></th>
<th>PHASE III</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td># times</td>
<td>Per</td>
<td># times</td>
<td>Per</td>
<td># times</td>
<td>Per</td>
</tr>
<tr>
<td>AA/NA</td>
<td>3-5</td>
<td>Week</td>
<td>3</td>
<td>Week</td>
<td>1-2</td>
<td>Week</td>
</tr>
<tr>
<td>Substance abuse individual counseling</td>
<td>As needed</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Substance abuse group counseling</td>
<td>5</td>
<td>Week</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other individual counseling</td>
<td>As needed</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other group counseling</td>
<td>As needed</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Family counseling</td>
<td>As needed</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Job counselor</td>
<td>As needed</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Drug Court staff</td>
<td>3-5</td>
<td>Week</td>
<td>3-5</td>
<td>Week</td>
<td>3-5</td>
<td>Week</td>
</tr>
<tr>
<td>Drug Court Judge</td>
<td>1</td>
<td>Week</td>
<td>2</td>
<td>Month</td>
<td>1</td>
<td>Month</td>
</tr>
<tr>
<td>Probation officer</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Case worker</td>
<td>3-5</td>
<td>Week</td>
<td>3-5</td>
<td>Week</td>
<td>3-5</td>
<td>Week</td>
</tr>
<tr>
<td>Drug testing</td>
<td>3</td>
<td>Week</td>
<td>2</td>
<td>Week</td>
<td>1</td>
<td>Week</td>
</tr>
<tr>
<td>Defense council</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>

As the table indicates, client contact for each of the different program components varies by phase and, to some extent, is based on individual need. In general, clients have contact with Drug Court staff three to five times per week in each of the phases and contact with substance abuse treatment counseling at least five times per week in Phase I, and as needed in Phases II and III.

**Relapse Patterns**

Clients exiting Phase I are most likely to relapse. They have finished with the treatment portion of the program and are trying to find jobs at this point. The major trigger for clients who relapse is that they will not break off old ties with using friends. Other factors include that they have not finished using yet. The majority of clients in the Kenton Drug Court do not relapse. Those who do relapse more often than once usually do not complete the program.
**Client Monitoring**

Clients are monitored in several ways. They are monitored through urine screens, individual and group sessions and by the Drug Court Judge and staff. Group sessions are conducted in the evening during which Drug Court staff will see clients. During Phase I, clients are monitored by their individual treatment providers.

**Urine Drug Testing.** One of the most important ways clients are monitored in the Kenton Drug Court program is through drug testing. Drug testing is done frequently and randomly. Clients are tested the first day they enter the program. Urinalysis is conducted at the Transitions facilities.

Urine screens are used to test for alcohol, marijuana, cocaine, opiates, benzodiazepines, barbiturates, amphetamines, and methadone. Drug screens are conducted on a random basis—at least 3 times per week in Phase I; 2 times per week in Phase II; and 1 time per week in Phase III. The case specialist believed that the testing for drugs in Phase III will not be done often enough. Clients call the Drug Court every day to see if they are supposed to “drop.” Urine drug screens cost $18 for the initial screen and $8 for regular weekly screens.

**Sanctions and Rewards.** Currently, the Kenton Drug Court Judge is working to establish a graduated system of sanctions. Sanctions will be specific to each offense. The Judge decides when incentives and sanctions are used with input from Drug Court staff. The Judge also receives information about clients for sanctions from the treatment provider and the public defender.

An act of non-compliance is followed within one week by sanctions, unless alcohol or other drugs are found on home visit, then the client is arrested immediately. Missing group, dirty urine screens, missed urine screens, verbal or physical aggression, lack of honesty, a client just skimming by and other acts of non-compliance all prompt the use of sanctions. Sanctions range from a weekend of Day Reporting (community service) to detention from two weeks to one month.

Rewards are individualized. Compliance with the program prompts the use of rewards. Clients are phased up as a reward. They are presented with a certificate when they advance to the next phase. Also, the Judge will allow a client to share something with the others in the Drug Court session and everyone will applaud. The case specialist indicated that one of the most important rewards used with the Kenton Drug Court participants is the approval to take a trip out of the immediate area.

**Graduation.** The minimum time requirement for graduation is 12 months. In addition, the clients must successfully go through all three Drug Court program phases. Clients must also maintain stable living conditions and employment for the duration of the program, unless in the residential treatment during Phase I. Men stay in residential treatment for 60 days and women stay in treatment for four to six months. After this
period of time they are required to find stable housing. Clients in residential treatment are required to find a job after 30 days of treatment.

Due to the length of the program, no graduations from the Kenton Drug Court program have occurred to date. Graduations will occur quarterly. All Drug Court participants, their family and friends, and possibly their arresting officers will attend Drug Court graduations. Graduates will be given a certificate, a plaque, and a tee-shirt. The Judge will tell the assembled about each client’s progress and the clients will be allowed to speak. Clients will also be told that the rest of their probation sentence has been discharged. A reception with cake and coffee for all the attendees is planned for each graduating ceremony.

Program Removal. Clients are most often removed from the program for noncompliance with rules and procedures. Also, if a client absconds and is gone for more than 60 days, or absconds and new charges are filed, they will be terminated from the program. The Judge notifies clients of failure during a Drug Court session. When a participant is removed from the program, he or is detained and referred to the sentencing Judge or probation revocation proceedings.

Aftercare

There is currently no aftercare component to the Kenton Drug Court program. Phase II and Phase III are referred to as the treatment aftercare stages of the program.

Information Capabilities and Reporting

Regular reports about Drug Court clients are made. The Drug Court Judge receives weekly reports on clients in Phase I and Phase II. Included in these reports are urinalysis results, record of treatment attendance, appearance for urinalysis, appearance at court hearings and other case notes. This information is presented both in writing and in discussion with the Judge before each Drug Court session. Short reports on the termination of clients are also made. The Drug Court coordinator fills out an affidavit explaining why the client has been terminated at the point of termination.

Other reports are made to the Administrative Office of the Courts both monthly and quarterly. Monthly reports include the number of candidates referred, the number assessed, the number of individual drug screens, number of candidates eligible, and the number transferred from probation. Also reported are the number of participants moving to each phase, the number of court sessions, the number of participants identified as using based on urine drug screens, the number of individual sessions, the number of group sessions, the number of family/support sessions, the number of participants referred to outside agencies, employment and educational status of clients, number of employment and housing verifications, amount paid toward court obligations, the number of sanctions, the number of participants rearrested for new charges, the number of terminations, and total number of active participants in the proceeding month. (See Appendix F for examples of a monthly report.) Quarterly reports summarize monthly statistics, the
process, and progress toward the outlined objectives and performance indicators listed in the Program Goals and Measures section of this report. (See Appendix G for examples of quarterly reports.) Up-to-date expenditure reports are maintained by the Administrative Office of the Courts. Treatment providers send a monthly billing to the Kenton Drug Court program and they are forwarded to the Kentucky Drug Courts Manager.

Treatment providers also receive reports on Drug Court clients so that they can develop their treatment around the needs of the client. In turn, the treatment providers report to the Drug Court staff.

Currently, there is no automated data collection procedure in place. However, the Kenton Drug Court is in the process of establishing an automated data collection procedure.

The Kenton Drug Court program works with other Drug Court programs in the State of Kentucky to share resources and staff. The Drug Courts Manager and Field Coordinator have assisted in the establishment of the program. The Kenton Drug Court staff confers with the Fayette Drug Court and the Campbell Drug Court for ongoing mentoring. The Kenton Drug Court coordinator also does the ASI reports for prospective clients in detention, in the Campbell Drug Court program. Books and forms are also shared among the Kentucky Drug Courts.

Program Decision Making

There are many entities that contribute to decisions about the Drug Court program. The program is part of the Administrative Office of the Courts Drug Courts Division. The Drug Court Judge as well as the other three circuit Judges, the Drug Court staff, and the Drug Court committee all contribute to decisions about the Drug Court program. The committee consists of representatives from Probation and Parole, prosecution, defense, treatment organizations, and pretrial services.

Funding

The Kenton Drug Court program is funded primarily through a federal Byrne Grant. Also, the program receives funding from a planning grant from the Office of Justice Programs Drug Court Programs Office. The Drug Court Judge volunteers his time to the program, taking the Drug Court cases in addition to his regular caseloads. Court sessions are conducted Wednesdays at noon.

Clients pay fees for their Intensive Outpatient treatment. They are also required to pay any child support and restitution. Some clients are required to pay legal fees and victim payment.
Evaluation

The Kenton Drug Court program uses the monthly statistics to assess the effectiveness of the Drug Court program. Information collected from graduates at graduation includes basic information such as whether the client is continuing in sobriety, whether they are employed, and whether they continue to have appropriate housing. Currently, there is no follow up planned for either Drug Court graduates or dropouts.

Program Strengths

The Drug Court coordinator included the following as strengths of the Kenton Drug Court program: immediate sanctions, client/program interaction, court appearances, home/work visits, urinalysis, and the staff monitoring the clients closely in probation-type roles.

Potential Program Changes

Improvements to the Kenton Drug Court program that were mentioned included expansion of services, a volunteer-based mentoring program, and starting a monthly recreational program for support building. Other issues include approaching substance abuse treatment more holistically. For example, understanding other factors in the client’s life, such as mental health problems, is a critical part of treatment. Another wish of the Drug Court coordinator was to expedite the legal process for client eligibility. However, the coordinator did not see this process as being able to be changed.

Advice to Other Drug Courts

The advice to other Drug Courts included: be flexible, be open-minded, and expect change.
Staff Characteristics

The Drug Court staff program has 2 staff members, both white females. The youngest staff member is 27 and the oldest is 46. One staff member does not have any experience with substance abuse treatment and the other has fourteen years of experience in the substance abuse field. One staff member has a degree in police administration. One staff member has been with the Kenton Drug Court program for seven months and the other has been with the program for six months.

The normal full-time workload is 37.5 hours per week. The Kenton Drug Court program employs a treatment coordinator and one case specialist. The treatment coordinator was interviewed for the administrative portion of the process evaluation and the case specialist filled out a survey concerning the Kenton Drug Court program. Each staff member is fully funded by the Drug Court program, with the exception of the bailiff. The following table represents agency tasks by staff position.

<table>
<thead>
<tr>
<th>Position</th>
<th>Task</th>
</tr>
</thead>
<tbody>
<tr>
<td>Drug Court Coordinator</td>
<td>Assessments</td>
</tr>
<tr>
<td></td>
<td>Group therapy</td>
</tr>
<tr>
<td></td>
<td>Individual therapy</td>
</tr>
<tr>
<td></td>
<td>Case management</td>
</tr>
<tr>
<td>Case Specialist</td>
<td>Contact with employers</td>
</tr>
<tr>
<td></td>
<td>Background checks</td>
</tr>
<tr>
<td></td>
<td>Monitoring fines and fees</td>
</tr>
<tr>
<td></td>
<td>Probation &amp; Parole supervision role</td>
</tr>
<tr>
<td></td>
<td>Has clients call in and explain their schedule for the day</td>
</tr>
<tr>
<td>Baliff</td>
<td>Appears in court weekly</td>
</tr>
<tr>
<td></td>
<td>Assists in site visits</td>
</tr>
</tbody>
</table>

The current treatment coordinator and case specialist are the first in the Kenton Drug Court funded by the Administrative Office of the Courts. Prior to their hiring, the Kenton Drug Court core team took on different roles to make sure that the program worked. The Drug Court coordinator performs the ASI screenings for potential clients in detention for the Campbell Drug Court.

The case specialist indicated that she spends two hours each week with each client in Phase I, one hour each week with each client in Phase II, and will spend one half-hour each week with each client in Phase III. She believed that the amount of time spent with clients in Phase I and II is the right amount. However, she believed that the amount of time to be spent with clients in Phase III will be inadequate.

Staff Training. Staff are trained by attending a number of Drug Court training sessions around the country. The Kentucky Administrative Office of the Courts also conducts training seminars, sometimes in conjunction with the police. Various training sessions at local treatment facilities, such as a training at NorthKey on marijuana, help to
continuously educate the staff about addiction and treatment. The staff also confer with the Drug Court Judge to obtain his ideas about how the Kenton Drug Court should be structured.

*Judges.* Currently, one Judge works with the Kenton Drug Court program. Judge Bartlett has worked with the program since its inception. He’s been to Brooklyn for Drug Courts training, as well as attended a number of other training sessions, and visited other Drug Court programs in order to prepare for the Kenton Drug Court program. Other Judges refer clients to the Drug Court program, as well.

*Interns.* Currently, no interns work with the Kenton Drug Court program. The treatment coordinator has written to Northern Kentucky University to begin recruitment of interns.

*Volunteers.* The Kenton Drug Court Program has two volunteers signed up to work with the mentoring program. These volunteers will mentor a Drug Court client at any point during the program. Each volunteer has a six-month commitment to stay with the mentoring program. The Reverend Judy Nunley will coordinate the mentoring program.

*Drug Court Committee.* The Kenton Drug Court has a Drug Court committee. The members do not have regular meetings. However, they do contribute to decisions concerning the Drug Court program. The Drug Court committee formed the Kenton Drug Court and until the current treatment coordinator and case specialist were hired, the committee also ran the Kenton Drug Court. The members of the committee are:

Table 7. Kenton Drug Court Committee Members

<table>
<thead>
<tr>
<th>Members</th>
<th>Agency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tony Bracke</td>
<td>Commonwealth’s Attorney</td>
</tr>
<tr>
<td>Bob Brown</td>
<td>Probation and Parole</td>
</tr>
<tr>
<td>John Delaney</td>
<td>Public Advocacy</td>
</tr>
<tr>
<td>Judge</td>
<td>Circuit Court</td>
</tr>
<tr>
<td>Karen Hargett</td>
<td>Transitions</td>
</tr>
<tr>
<td>Susan Schroeder</td>
<td>Pretrial Services</td>
</tr>
</tbody>
</table>
Community Agencies

Community organizations are utilized by the Kenton Drug Court program for resource support. The contact with these resources helps to spread a positive image of the Kenton Drug Court program; the resources are able to tell others about their participation with the program. An increase in community resources is desired. The Drug Court Judge and treatment coordinator have spoken to various groups concerning the program. The Judge spoke before all the police chiefs in Kenton County to inform them about the workings of the program. The Kenton Drug Court would like to expand the number of treatment facilities that it uses. The following table presents the community organizations with which the Kenton Drug Court program works.

Table 8. Community Linkages

<table>
<thead>
<tr>
<th>Organization</th>
<th>Service</th>
</tr>
</thead>
<tbody>
<tr>
<td>North Key</td>
<td>Treatment facility</td>
</tr>
<tr>
<td>St. Elizabeth Medical Center</td>
<td>Medical needs</td>
</tr>
<tr>
<td>YMCA Men’s Program</td>
<td>Shelter for men</td>
</tr>
<tr>
<td>Bureau of Vocational Rehabilitation</td>
<td>Job services</td>
</tr>
<tr>
<td>Hospice of Bluegrass</td>
<td>Grief counseling</td>
</tr>
<tr>
<td>Storehouse Ministries</td>
<td>Long-term residential</td>
</tr>
<tr>
<td>Career Services</td>
<td>Mental health assessment</td>
</tr>
<tr>
<td>Northern Kentucky Tech</td>
<td>Assessments and GED</td>
</tr>
<tr>
<td>Fairhaven Rescue Mission</td>
<td>Residential for men</td>
</tr>
<tr>
<td>Welcome House</td>
<td>Residential for women</td>
</tr>
<tr>
<td>Therapeutic Recreation</td>
<td></td>
</tr>
<tr>
<td>Alcoholics Anonymous</td>
<td>Support group for alcoholics</td>
</tr>
<tr>
<td>Narcotics Anonymous</td>
<td>Support group for drug addicts</td>
</tr>
<tr>
<td>531, Inc.</td>
<td></td>
</tr>
<tr>
<td>Promises, Inc.</td>
<td></td>
</tr>
</tbody>
</table>
Client Characteristics

As of March 25, 1999, eighteen clients were in Phase I of the Kenton Drug Court program. Ten clients were in Phase II of the program. No clients have entered Phase III and no clients have graduated from the program.

The following table summarizes current client characteristics as of April 23, 1999:

Table 9. Current Client Characteristics

<table>
<thead>
<tr>
<th>CHARACTERISTIC</th>
<th>MALES</th>
<th>FEMALES</th>
<th>TOTAL/AVERAGE</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Ethnic Background</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>White</td>
<td>13</td>
<td>7</td>
<td>20</td>
</tr>
<tr>
<td>Black</td>
<td>4</td>
<td>3</td>
<td>7</td>
</tr>
<tr>
<td><strong>Age Groups</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Youngest</td>
<td>19</td>
<td>25</td>
<td>22</td>
</tr>
<tr>
<td>Oldest</td>
<td>50</td>
<td>43</td>
<td>47</td>
</tr>
<tr>
<td>Average Age</td>
<td>33</td>
<td>30</td>
<td>32</td>
</tr>
<tr>
<td><strong>Medical Status</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pregnant (anytime in program)</td>
<td>N/A</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>HIV Positive</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Active AIDS</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>Participation in Other Programs</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Work release</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Vocation training</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>GED</td>
<td>12</td>
<td>4</td>
<td>16</td>
</tr>
<tr>
<td>AA/NA</td>
<td>17</td>
<td>10</td>
<td>17</td>
</tr>
<tr>
<td><strong>Current Employment Status</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Full-time employed</td>
<td>11</td>
<td>8</td>
<td>19</td>
</tr>
<tr>
<td>Part-time employed</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Volunteer work</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Currently in Education program</td>
<td>6</td>
<td>3</td>
<td>9</td>
</tr>
<tr>
<td>Currently in Trade school</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>Marital Status</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Married (Legal or common law)</td>
<td>0</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Single (Never married)</td>
<td>7</td>
<td>3</td>
<td>10</td>
</tr>
<tr>
<td>Divorced/separated</td>
<td>6</td>
<td>3</td>
<td>9</td>
</tr>
<tr>
<td>Widowed</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Living with Significant Other</td>
<td>5</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td><strong>Education</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Less than high school education</td>
<td>15</td>
<td>8</td>
<td>23</td>
</tr>
<tr>
<td>HS graduate or GED</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Education beyond high school</td>
<td>1</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Vocational or trade school</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>CHARACTERISTIC</td>
<td>MALES</td>
<td>FEMALES</td>
<td>TOTAL/AVERAGE</td>
</tr>
<tr>
<td>-----------------------------------------------------</td>
<td>-------</td>
<td>---------</td>
<td>---------------</td>
</tr>
<tr>
<td>Current Living Status</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>With spouse</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>With spouse and children</td>
<td>3</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>Alone</td>
<td>7</td>
<td>5</td>
<td>12</td>
</tr>
<tr>
<td>With parents</td>
<td>4</td>
<td>0</td>
<td>4</td>
</tr>
<tr>
<td>With other relatives</td>
<td>1</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Institutionalized</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>In residential substance abuse treatment</td>
<td>3</td>
<td>3</td>
<td>6</td>
</tr>
<tr>
<td>Homeless</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Children</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total # of active clients who have children</td>
<td>8</td>
<td>5</td>
<td>13</td>
</tr>
<tr>
<td># active clients currently without custody</td>
<td>5</td>
<td>4</td>
<td>9</td>
</tr>
<tr>
<td># gained custody since entering the Drug Court program</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Treatment History--% with Prior</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Residential treatment</td>
<td>65%</td>
<td>47%</td>
<td>56%</td>
</tr>
<tr>
<td>Outpatient</td>
<td>42%</td>
<td>30%</td>
<td>36%</td>
</tr>
<tr>
<td>AA/NA</td>
<td>55%</td>
<td>60%</td>
<td>57%</td>
</tr>
<tr>
<td>Average # years used drugs</td>
<td>10</td>
<td>11</td>
<td>10.5</td>
</tr>
</tbody>
</table>

As the table indicates, current clients are 74% African-American and 26% white. Also, clients are an average age of 32, with ages ranging from 19-50 years old. Forty-eight percent of the clients have children, seven percent are married, and thirty-seven percent have never been married. Currently, 70% of clients are working full-time.

Kenton Drug Court clients have used drugs an average of 10.5 years and approximately 56% of clients had been in residential treatment prior to entering the Drug Court program. Participants have an average of 30 prior charges and had spent an average of 9 months in incarceration in their lifetime.

It is common for current clients to have had a history of the following kinds of charges: theft/property offenses, prescription drug fraud, check/credit card forgeries, drug possessions, prostitution, parole/probation violations, weapons offenses, misdemeanor assaults, domestic violence charges, and contempt of court. The primary drugs of choice for clients are cocaine and marijuana.

The special needs for clients in the Kenton Drug Court program include regaining custody of their children. Nearly 70 percent of the clients who have children are
currently without custody of those children. Clients have to prove that they are in stable living situations, and able to be a proper guardian for a child, in order to regain custody. Success in the Drug Court program is one indicator of stability.

**Graduates and Drop-outs**

Because of the length of the program, no clients have graduated from the Kenton Drug Court program to date. Six clients were terminated for non-compliance and 3 have absconded. As of April 23, 1999, twenty-seven clients are active in the program.
Perceptions

Judge Perceptions

One Judge, Judge Gregory Bartlett, is involved with the Kenton Drug Court program. He has been on the bench for six years. The Judge has attended various Drug Court conferences and symposiums. He attended a Drug Court training session conducted by the National Convention for Drug Court Professionals, in Brooklyn, New York and another conference in Lafayette, Louisiana, and a national training program Lexington, Kentucky. Judge Bartlett also attended a Drug and Alcohol Conference sponsored by the Governor of Kentucky. The Judge has also visited several Drug Court programs throughout the state. The Judge plans to work with the Drug Court program, “at least a few more years.”

The Drug Court Judge commented that there has not been a significant impact upon the judicial system, due to the fact that the program is still in the implementation stage. However, the Judge believes the program helps the Courts to address the problem of crime and gives Judges another sentencing option. The program directs the focus of those in criminal justice to non-traditional reactions to crime. Therefore, alternative options for criminal sanctions are taken into consideration.

Judge Bartlett believes that it is too early in the Kenton Drug Court program to determine if it has made an impact on the community. Judge Bartlett feels that if the program impacts only one life, the program is successful.

The Judge believes that at least 50% of the clients have been in some sort of drug or alcohol treatment prior to entering the Kenton Drug Court program. Many of the clients have been through treatment while previously on probation. Court involvement and immediate intensive treatment are the two important factors that the Judge feels make the Drug Court program different from other treatment programs.

Judge Bartlett believes that clients find out about the Drug Court program primarily through the defense counsel, sometimes through the prosecutor, and/or from other people in the program. The Judge believes that most clients choose to enter the Drug Court program, to avoid incarceration although some participants sincerely want to change their lives.

The Judge believes the Drug Court program rules are somewhat unclear to clients. The Judge, along with Drug Court staff, are currently revising the Drug Court program rules, in order to make them more comprehensible.

Judge Bartlett believes the Drug Court program takes just the right amount of time to complete. The Judge commented that the program length, approximately 18 months, allows participants to see they have been clean for over one year.
Also, the testing for drugs in each of the phases is done frequently enough. However, the Judge indicated testing for drugs in Phase I may need to be conducted more frequently. Overall, the Judge believes that the program requirements are appropriate for the Kenton Drug Court program.

The Judge believes Drug Court clients remain in the program because the clients feel good about themselves. Further, a big part of the Drug Court program is group mentality. Clients form bonds and support groups, which all serve as positive reinforcement.

The Judge feels that if the Drug Court program provided drug testing and court hearings but no treatment that the outcome would be negative. The Judge commented that people who are addicted are very clever, and therefore can beat drug testing and deceive the courts. He also believes that if clients appeared before the Drug Court Judge less often, they would be more likely to fail. He indicated that clients need to have frequent contact with the Court because it reinforces the fact that Drug Court is a serious program, further there is the need for immediate realization of sanctions. He does believe that the Drug Court program could not hold sessions more frequently than once per week and that any more sessions would be detrimental. The Judge also believed that the continuity of appearing before only one Judge is important. The Judge becomes familiar with the characteristics of the Drug Court clients.

The Judge believes that consistency, celerity, and certainty, in the sanctioning, are the most important concepts in the sanctioning process. The Judge also believes that the most important concepts of the reward process are encouraging people. The Judge noted that the greatest reward is positive reinforcement through saying, “You can do it.”

The Judge believes that the large expenditure of time and overcoming drug addiction, are the most difficult aspects of the Drug Court program for clients. He believes that being around other drug users, life-changing events, and stress may trigger a relapse in clients. The Judge believes that the most important things clients can do to be successful in the Drug Court program are: submit to the program and treatment, surrender to process and be ready to change, and comply with the program. The Judge believes that those clients who are not ready to make changes immediately may not successfully complete the Drug Court program.

He believed aftercare was very important, and that the clients enjoy the aftercare treatment and their success.

The Judge believes that most helpful aspects about the Kenton Drug Court program are: (1) Serious, intensive treatment provided, (2) Group support, and (3) Positive interaction with Court system, not just a punishing relationship. The Judge believes that the Drug Court program is doing well and needs only slight improvement, in some areas, such as consistency in the sanctioning process.
Judge Bartlett indicated identifying what type of people to admit into the Drug Court program and gaining support from other judges, were some problems encountered during the start up of the program. The program is now less restricting in letting clients to enter. Also, defense attorneys and prosecutors, approach other Judges, so that their involvement with the program is not a capitulation to another Judges program, but rather a way to help offenders. The hesitancy of some Judges to be involved with the Drug Court program will continue to be a barrier to the Kenton Drug Court program.

The Judge believes that an effective gauge of success of the Kenton Drug Court program will be favorable outcome statistics. Additionally, recidivism rates will serve as a gauge of success. Subjective assessments, termination totals, and number of relapses would also be strong measures of success of the program.

The Judge gave the following advice to other communities trying to start a Drug Court program: “Anyone interested in starting a Drug Court should take time to understand drug and alcohol abuse, and understand the clientele, so that you can understand how they’re going to act and where they’re coming from.

Additional comments made by Judge Bartlett included, “I think that anyone who does it, and has any degree of success is doing well, is a step in the right direction.”
Client Perceptions

Ten clients filled out surveys concerning the Kenton Drug Court program. Five of the respondents were male and five were female. Their ages ranged from 24 to 43, with an average age of 33. Nine of the respondents were white and one was African-American. The respondents have been in the program between 3.5 and 11 months, with an average of 6.25 months. Half of the respondents were in Phase I, while the other half were in Phase II. There are currently no clients in Phase III of the Kenton Drug Court program.

The main substances that led to client involvement in the Kenton Drug Court of those surveyed were crack and non-crack cocaine. Other substances included alcohol, marijuana, and methadone. Fifty percent of clients described their use of the substance that caused them the most problems as heavy and thirty percent felt that their substance use was moderate.

Prior to entering the Drug Court program, 40 percent of clients had attended Alcoholics Anonymous or Narcotics Anonymous. Also, fifty percent of the clients had been in some sort of drug treatment before entering the Kenton Drug Court program.

Sixty percent of client respondents indicated that they felt that the Drug Court program rules were extremely clear and thirty percent felt that the rules were somewhat clear. Clients disagreed about whether Drug Court program rules change often. Forty percent felt that the rules change while 50 percent felt that rules rarely or never change. Forty percent of client respondents believed that the Drug Court program was explained to them extremely well when they entered the program. One client indicated that the program was explained “pretty well” and 30 percent of client respondents indicated that the program was not explained very well when they entered the program.

The reasons clients entered the program included the opportunity for treatment, the opportunity to stay out of jail, and the chance to live a normal life. One client stated that his reason for entering the program was “because I knew if I didn’t get help, I would end up dead.”

Sixty percent of clients believed that the Kenton Drug Court program has met any special needs they might have. Although the majority of clients indicated that there were no additional services that they would like to be involved with, two responses indicated that the “service of God’s Word” and “some sort of sponsor group, maybe one when a phasing-up occurs” would be beneficial for clients.

Ninety percent of the respondents indicated that they are currently employed and three of those respondents stated that the Kenton Drug Court staff helped them to find their current job. The clients indicated that the Drug Court staff has helped them with employment issues by (1) Showing places that were hiring, (2) “Not letting me slack,” (3) Established deadlines with clients, and (4) “Helped manage my schedule with child care and also with GED.”
Forty percent of clients stated that they believe the Drug Court program takes just the right amount of time to complete. Clients believed that the testing for drugs in Phase I is done the appropriate number of times. Thirty percent of respondents believed that the right amount of testing for drugs was done in Phase II. Ninety percent of the respondents were not sure if the drug testing was done the appropriate number of times in Phase III. Also, eighty percent of clients were satisfied with the Kenton Drug Court program and 20 percent of the respondents were very satisfied with the program.

Clients rated the importance of specific program components which ranged from drug treatment as the highest and book reports and the good deed requirement as the lowest as indicated in the table below:

<table>
<thead>
<tr>
<th>Program Component</th>
<th>Mean*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Drug treatment</td>
<td>4.9</td>
</tr>
<tr>
<td>Drug education</td>
<td>4.8</td>
</tr>
<tr>
<td>Physical health</td>
<td>4.6</td>
</tr>
<tr>
<td>Individual treatment/program plans</td>
<td>4.6</td>
</tr>
<tr>
<td>Rewards for compliance</td>
<td>4.5</td>
</tr>
<tr>
<td>Drug testing</td>
<td>4.4</td>
</tr>
<tr>
<td>Review of client progress</td>
<td>4.3</td>
</tr>
<tr>
<td>Sanctions for noncompliance</td>
<td>4.3</td>
</tr>
<tr>
<td>Individual counseling</td>
<td>4.3</td>
</tr>
<tr>
<td>Health referrals</td>
<td>4.2</td>
</tr>
<tr>
<td>Employment requirement</td>
<td>4.1</td>
</tr>
<tr>
<td>Physical exercise requirement</td>
<td>4.1</td>
</tr>
<tr>
<td>Community service component</td>
<td>4.0</td>
</tr>
<tr>
<td>Journal assignments</td>
<td>3.9</td>
</tr>
<tr>
<td>Family counseling</td>
<td>3.9</td>
</tr>
<tr>
<td>Mentoring component</td>
<td>3.7</td>
</tr>
<tr>
<td>Fee payment requirement</td>
<td>3.5</td>
</tr>
<tr>
<td>Court sessions</td>
<td>3.3</td>
</tr>
<tr>
<td>Book report assignments</td>
<td>3.4</td>
</tr>
<tr>
<td>Good deed requirement</td>
<td>3.4</td>
</tr>
</tbody>
</table>

*1=Extremely unimportant  2=Unimportant  3=Not sure  4=Important  5=Extremely important

The reasons that clients gave for remaining in the Kenton Drug Court program include: (1) Getting and staying clean, (2) Getting self-esteem back, (3) Counseling, (4) “To have a real good support system,” and (5) Supervision. One client stated that she remained in the program “to maintain a stable life, because I know I still need help. Recovery is a process. You have to live in it every day.”
Clients indicated that they believe both the Drug Court Judge and staff:

- Cared about them
- Had time for them
- Explain things clearly
- Know what they are talking about
- Made good referrals
- Were responsive to meeting their needs
- Were helpful with their individual plan
- Were fair in their evaluation of progress
- Were helpful when their progress is evaluated

Clients also indicated they had a good relationship with Drug Court staff and Judge. In addition, they reported they were close to their group counselors, they felt they could be open with group counselors, they felt close to the other group members, the group sessions cover topics of interest to them, they learn a lot in group sessions, that they had the chance to be heard in group sessions, and that there is equal time for members in the group sessions. Clients indicated that their relationships with the following people were good: Judge, Drug Court case specialist, defense counsel, other Drug Court clients, counselors, Drug Court treatment coordinator, and their AA/NA sponsor.

Clients also indicated that the most important rewards given in the Drug Court program are promotion to the next phase, judicial praise, certificates, peer praise, mementos, reduction in fees, and reduction in the frequency of court hearings. They also indicated that the most important sanctions were Judge unhappiness, jail time, increased frequency of urinalysis, demotion to a lower phase, and increased frequency of court hearings. Sixty percent of the respondents had received sanctions since entering the Drug Court program and 90 percent of the clients understood the sanctioning process.

Respondents indicated that they believed the Drug Court program has helped them in the following areas: substance use, relationships, employment, court procedures, education, mental health, physical health, spiritual development, and self esteem.

Seventy percent of Kenton Drug Court respondents were aware of aftercare services offered by the Kenton Drug Court program. Seventy percent also indicated that they felt that the aftercare services would be very important and sixty percent stated that they would be very involved in aftercare. The aftercare components with which clients would like to be involved included the following:

- Things to do with my sobriety
- Checking in with Intensive Out-Patient, the Judge, the Drug Court staff and AA
- Educating myself more with drugs and alcohol and daily living
- Giving and receiving feedback when needed
The most difficult aspects of the program for clients included:

- “Just adjusting”
- “My substance abuse”
- “Being overwhelmed”
- “Stress”
- “Seems to be a lot of homework”
- “Generalization of scheduling due to home schedule”
- “Just getting to all the places on time and remembering when to be there”
- “Time constraints…it is hard to get sober (not just dry) and adjust to life then they pile on more and more time consuming expectations with little actual help doing things”

The best things about the program that clients mentioned included the following:

- Employment--- “Helping me find a job.”
- Staff—“Staff and Judge show they care,” “Counselors,” “They help me with troubled areas in my life,” “Open to new ideas and suggestions,” “They allow me to grow and change,” and “Because of Drug Court and Transitions, there is always someone you can talk to.”
- Program Aspects—“WRAP House,” “Group session,” “NA meeting,” “Journals,” “Culture group,” “Guidance,” “Drug testing,” “Support of the people involved,” and “Calling in every Friday.”
- Staying clean—“Helping me find sobriety”
- Second chance—“Staying out of jail,” and “Learning abilities.”
- Self esteem—“More self-esteem,” and “I’m treated with respect.”
- Accountability--- “Showing me responsibility,” “I like the checks on how things are,” and “Taking responsibility for my actions.”

Changes clients indicated they would like for the Drug Court program included:

- Program Duration—“Too many meetings to attend,” “Time it takes to complete it,” “Going to court all the time,” “The 12:00 Drug Court sessions could be slimmed down to having it on a working day,” and “Time of some meetings.”
- Program Requirements—“More understanding of realistic time goals,” and “Late hour urinalysis.”
- Other—“I feel the word of God needs to be involved,” “Homework assignments with variety,” “More individual plan on your actual life schedule,” “I think we need client advocates to help make adjustments to life,” and “Fees for people that have it rough, lower.”
Final comments from clients also included:

- “I think that it’s great because it has helped me out 100% on my life. I am glad I had a chance to join the program thanks to the Judge and staff.”
- “I want to thank all staff for caring when they didn’t have to. Thank you, Judge Bartlett, Diane, and Susan.”
- “Drug Court has helped me with a lot of issues.”
- “Drug Court workers are understanding authority figures.”
- “I believe the Drug Court program is and can be a very good program.”
- “Although I feel there is a lot of homework, I say this because sometimes I feel that I’m not doing my best because I’m being pressured.”
- “I feel that the people in Drug Court want to see me do well and my life get better. I don’t feel they’re here to hurt but they are here to help if we let them.”
- “Going from Transitions to aftercare was a very comfortable move. I like the feeling of caring you get from the Drug Court people. The flexibility of individualizing has gotten better and helpful. Always there to try and find solution to your problems, they put a lot of thought into your situations.”
- “Just the things that are not helping me, that stress me out.”
- “It works if you work it.”
Treatment Perceptions

Three treatment providers completed surveys regarding the process of the Kenton Drug Court program. An additional treatment provider was unable to complete the survey. The treatment representatives were from the following treatment facilities:

Table 11. Treatment Facilities Surveyed

<table>
<thead>
<tr>
<th>Treatment Facility</th>
<th># of DC Clients Ever Served</th>
</tr>
</thead>
<tbody>
<tr>
<td>Transitions, Inc.</td>
<td>38</td>
</tr>
<tr>
<td>Northern Kentucky Community Care</td>
<td>3</td>
</tr>
<tr>
<td>Career Services</td>
<td>5</td>
</tr>
</tbody>
</table>

Transitions, Inc. is a private, non-profit organization. The agency began working with the Drug Court program in 1998. Since beginning work with the Drug Court program, Transitions, Inc has seen 38 Drug Court clients. Northern Kentucky Community Care is a community mental health center and has been working with the Drug Court Program for approximately one year; this facility has seen three Drug Court clients. Career Services is a local public health agency and has been working with the Drug Court program since the fall of 1998; this facility has served five Drug Court clients since beginning work with the Drug Court program.

Treatment representatives indicated that since the initial working relationship began with the Drug Court program, the services provided by the treatment programs have remained unchanged. One treatment representative indicated they are working with the Drug Court program to develop programs to better serve the program’s needs.

The representatives indicated that no staff members from the facilities are solely dedicated to the Drug Court program. However, one representative noted that at least one administrator of the agency attends weekly Drug Court hearings and that the Program Directors serve as the primary points of contact for Drug Court staff. Another representative indicated if, in the future, a staff member is needed to work solely with the Drug Court program, then a full-time employee will be designated to do so.

The treatment representatives indicated that they consult with the Drug Court staff and clients regularly to coordinate services and to arrange in-house services, referrals, consultations, and/or program development.

The treatment representatives indicated the Drug Court program had had no impact on orientation and/or training programs. Yet, two treatment representatives indicated that the Drug Court program had impacted the treatment facilities policies and procedures due to more frequent collections of urine and services that may be provided at the Drug Court site.

The treatment representatives noted that the average waiting period before a Drug Court client enters the treatment facilities is 2 to 7 days. The treatment program requirements are explained to the Drug Court clients verbally, as well as in writing.
Two treatment representatives indicated upon intake, the Drug Court clients are assessed using the facilities’ own instruments. One treatment representative indicated their staff uses the ASI (Addiction Severity Index) for assessment of clients. The instruments are used for risk assessment, needs assessment, measuring change over time, and DSM-IV diagnosis.

Some Drug Court clients served have special needs, as indicated by the treatment representatives. Special needs include assistance with housing and employment readiness. The treatment facilities meet these needs by placing the Drug Court clients in need of temporary housing in Fairhaven Rescue Mission, placing those clients in need of job skills training in the “All About Work” employment readiness program offered at Transitions, or helping them find and retain employment. One facility has specific programs designed for women and men.

One treatment representative indicated that the treatment program provides transportation for residential clients prior to employment. Outpatient clients are held responsible for their own transportation. The other two facilities do not provide transportation for Drug Court clients.

In dealing with Drug Court clients who have children, one treatment representative indicated clients are required to arrange child care on their own. Another indicated the treatment facility allows only postpartum clients to bring their infant children to treatment sessions.

The treatment representatives indicated services specifically offered for Drug Court clients were more frequent urine testing, weekly urine testing in aftercare, assessments to determine if full psychological evaluations are needed, and men’s and women’s Intensive Out-Patient treatment.

Drug Court clients pay a reduced fee for both residential and outpatient treatment, due to assistance from grant funding, one treatment representative indicated. The other treatment representatives indicated that the Drug Court clients self-pay or a third party pays for services rendered.

All of the treatment facilities offer aftercare services to Drug Court clients. However, one treatment representative indicated that the Kenton Drug Court program typically provides client’s with aftercare services and Transitions provides urine testing to Drug Court clients during the aftercare period. Treatment representatives indicated aftercare runs for one year and may involve individual sessions.

Two treatment representatives indicated that their facilities had not served any Kenton Drug Court clients that suffer from major mental disorders. However, one treatment representative indicated that an average of 30 percent of the Drug Court clients that they have treated have had problems with depression. Approximately 10 percent have been bipolar, 10 percent have had an anxiety disorder, 10 percent have had some
form of psychosis, and 20 percent have had antisocial personality disorder. Another 40 percent have had borderline personality disorder. One treatment representative noted that agency counselors are not permitted to make diagnoses other than substance abuse or dependence.

Only one treatment representative indicated psychiatrists employed by the facility, may prescribe medication to Drug Court clients, if needed. Another treatment representative noted their treatment facility was not authorized to prescribe medication to Drug Court clients, yet prescription medicine may be authorized by the medical doctor whom the treatment agency has contact with. The final treatment agency is not authorized to prescribe medications to Drug Court clients.

Two facilities noted that they have developed special affiliations with mental health agencies that provide specialized treatment services to those Drug Court clients with mental health disorders. The listed agencies included Key Community Care, where Drug Court clients with mental health disorders may be referred, and the Community Mental Health Center.

The treatment representatives stated that alcohol, cocaine, crack, and marijuana are the main substances of abuse for Drug Court program clients served. Two treatment representatives indicated that drug testing is done independently of that conducted by the Drug Court program. The treatment representative from Transitions Inc. indicated that they provide almost all of the urine testing for Drug Court clients who are enrolled in their program. The treatment representative also indicated Drug Court staff will occasionally, test clients when they suspect drug use.

Treatment components used by the treatment facilities include: detoxification, medical treatment, individual treatment plans, staged recovery process model, relapse prevention model, substance abuse education, AA/NA groups, self-help therapy, standard behavior modification, case management (emphasis on procuring and monitoring service from various agencies to insure delivery of treatment to the clients in the program), case work, advocacy for obtaining services/benefits for the client, individual counseling, scheduled group therapy or group counseling, family therapy, social skills development training, problem solving skills training, life skills training, parenting classes, cognitive behavioral component, training in anger management or aggression management, stress management, relaxation methods, thinking errors approach, moral or ethical training, health care, referrals to health care organizations, HIV testing referrals, TB testing referrals, and service for cultural/ethnic groups.

Two treatment representatives indicated written reports regarding Drug Court clients are submitted on a weekly basis and verbal reports are made as needed. The reports are made to the Kenton County Drug Court Coordinator and Case Manager. One representative indicated that their facility has not yet been required to submit reports regarding Drug Court clients.
One treatment representative indicated travel to the Drug Court office as an additional cost incurred by the office as a result of the Drug Court program. Further, the treatment representative indicated the program has impacted the facility by helping them consider a wider level of service in Northern Kentucky.

One treatment representative indicated a problem and/or difficulty incurred by the treatment facility as a result of the Drug Court program included more frequent urine testing. The amount of testing required for Drug Court clients became more time consuming. To alleviate this problem, the treatment facility has implemented a voice mail system for the Intensive Outpatient program. The treatment representative also indicated all Drug Court clients in the After Care phase are now tested at one central location, the Intensive Outpatient program.

The treatment representatives listed significant benefits the treatment agencies have received as a result of the Drug Court program as: (1) Increased client accountability due to intensive involvement on part of Drug Court staff, (2) Increased urine testing provides more indications of Drug Court client sobriety, (3) Closer relationship with Courts, (4) Good source of referrals, and (5) Clear expectations on court, time progression, and clients.

Strengths of the Kenton Drug Court program, indicated by treatment representatives included: (1) Length of commitment required from clients [18 months total], (2) Clients are given an adequate number of chances to succeed, (3) Increased accountability and urine testing, (4) Close monitoring, (5) Quick response to non-compliance, (6) Good, qualified staff, and (7) The intense level of service.

The treatment representatives indicated areas the Drug Court program could improve upon as: (1) Begin weekly hearings on time, (2) Re-examine the number of urine tests required of clients (e.g. testing as frequent as once weekly for residential clients in Phase I may not be necessary), (3) Give raises to staff, and (4) Continue to search for services outside of traditional Northern Kentucky services.

Advice for counterpart agencies in other jurisdictions beginning Drug Court programs, supplied by one treatment representative included, “Structure the program in such a way that it makes sense for the particular jurisdiction. What works in Kenton County may not work elsewhere.” Another treatment representative suggested the following advice for counterpart agencies: (1) Use a consistent model of treatment and (2) Utilize group counseling.

Additional comments made by treatment representatives included the following: “Like any other program, it will take some time for Drug Court to become more established and to improve on problem areas. Clients appear to benefit from the increased scrutiny, typically unavailable to most clients on non-intensive probation and parole.” Another treatment representative commented that the Drug Court program “[has] quick response, friendly staff, [and] seems open to ideas from other providers.”
Defense Perceptions

The Office of Public Advocacy does not have any staff member or attorney solely dedicated to the Kenton Drug Court program. However, the Assistant Public Defender carries a normal caseload and is assigned to cover Drug Court matters.

The defense believes that the Kenton Drug Court has had a small impact on the defense office in that at the office meetings, attorneys discuss Drug Court developments. However, the Drug Court program has had no impact on office policies and procedures.

It was noted that the Kenton Drug Court has had an impact on the Office of Public Advocacy’s relationship with community groups. “As an office, the Public Defenders are now more aware of the treatment providers in the community and the contact people.”

The defense stated that successful completion of the program by clients and their ability to remain drug free would be important in evaluating the program.

The defense believed that the following components of the Kenton Drug Court program are extremely important: drug treatment, individualized treatment/program plans, continuous review of client progress, court sessions, drug testing, fee payment requirement, mentoring, individual counseling, family counseling, health referrals, drug education, sanctions for noncompliance, rewards for compliance, and the housing requirement. It was believed that the employment requirement is an important component of the Drug Court program. However, the defense did not believe that community service was an important aspect of the program.

The defense listed the following reasons that clients would enter the Drug Court program: (1) Desire not to go to jail, (2) Desire to stop using drugs, and (3) Belief that the program can help them stop using drugs. The defense believes that clients remain in the program because they stop using drugs, while in the program.

The defense believed that the Drug Court program has encouraged greater coordination with other justice agencies, promoted new relationships with the justice system and other agencies in the community, provided a more effective response to substance abusers, provides law enforcement with an additional tool to enforce a no tolerance policy, promoted more efficient use of office resources, and reduced the number of substance dependent arrestees. However, the defense did not believe that the Drug Court has increased education and awareness of attorneys about substance abuse and its impact on clients.

The defense noted that the Kenton Drug Court has provided savings in terms of case preparation, jury costs, and the reduced number of re-arrests. Also, there have been savings in attorney time and enrollment in Drug Court uses less office resources than taking the case to trial. However, the defense did not believe that there is less time spent in court appearances as a result of the Kenton Drug Court program.
The defense noted that a problem with the Kenton Drug Court is that two of the four circuit Judges are not currently using the Drug Court. Therefore, not all of the possible clients are referred to the Drug Court program.

The Public Defender listed these benefits of the Kenton Drug Court program: (1) Excellent assistance for agency clients, (2) Option that allows agency to keep client out of jail, and (3) Frees up the agency’s attorneys’ time.

Strengths of the Drug Court program listed by the defense, include: (1) Intensive supervision of clients, (2) Offers clients assistance in many areas of life, and (3) Helps to successfully stop clients from using drugs.

Things that the Kenton Drug Court could do to improve include being less restrictive in the eligibility requirements. “Too many people are disqualified from the program” with the current requirements. Another thing that the Kenton Drug Court could do to improve would be to “continue and expand not only drug treatment through Drug Court but also other areas in addicts lives, such as spending skills and mental health issues.”

Advice that the Assistant Public Defender in Kenton County would give to other Drug Court programs would be to make eligibility and procedures for admission to Drug Court as simple as possible and to not make eligibility requirements too restrictive.
Prosecution Perceptions

Prosecution has no staff members that are solely dedicated to working with the Drug Court program. The Kenton Drug Court has affected attorney/staff orientation and/or training programs and the policies and procedures of the prosecutor’s office. Additional time has had to be devoted to the training for the Drug Court. The prosecutor’s office now uses the Drug Court as a sentencing option. “However, this is not a major departure from past policy.”

It was believed that the Kenton Drug Court has promoted new relationships with the justice system and other agencies in the community, as well as encouraged greater coordination with community groups. Further, it has provided a more effective response to substance abusers, provided law enforcement with an additional tool to enforce a no tolerance policy, and reduced the number of substance dependent detainees. However, the prosecution believed that the Kenton Drug Court program has not permitted more attorneys to be available for other cases, has not increased education and awareness of attorneys about substance abuse and its impact on clients, and has not promoted more efficient use of office resources.

The prosecution believed that the Kenton Drug Court has provided a variety of savings in the following areas: time saved in terms of case preparation, less time spent in court appearances, savings in police overtime, savings in jury costs, and the reduced number of re-arrests. The prosecutor’s office has also noted savings in that “less cases go to trial in certain areas.” However, costs have also been incurred as a result of the Drug Court program. “Duplicate and unnecessary training regarding Drug Court has detracted from time available for other tasks.”

Problems involved with the Kenton Drug Court have included the costs in time to the prosecutor and the “substantial difficulty in getting multiple Judges on the same page regarding the program.” Reorganizing and simplifying procedures has helped to overcome some of these problems.

Significant benefits that the prosecutor’s office has received as a result of the Kenton Drug Court program include: (1) Some decrease in recidivism, (2) Decrease in trials for certain cases, and (3) Has created some additional jail space.

It was stated that the strengths of the Drug Court program include the focus on treatment, the decrease in recidivism, the decrease in the number of trials for certain cases, and the increase in jail space available.

The following are some of the things that the Kenton Drug Court program could do to improve: (1) Greater coordination between staff and Judges, (2) More documentation by staff, and (3) Better communication procedures.
Police Perceptions

Currently, no police officers are solely dedicated to Drug Court duties. The Police Department indicated that the Kenton Drug Court has had an impact on officer and/or staff orientation and/or training. Officers have been given a working understanding of the Drug Court program. Further, it was indicated that there has been no impact on arrest/jail policies and procedures. Additionally, the Drug Court program has not impacted the agency’s relationship with community groups. There is a community-policing program, which works in coordination with the Drug Court workers.

The police indicated that measuring the percentage of persons that remain drug free would be necessary in evaluating the effectiveness of the Drug Court program.

The police did believe that the Drug Court program has encouraged a greater coordination with other justice agencies. Further, the Drug Court program has promoted new relationships with the justice system and other agencies in the community. Drug Court has permitted officers to be available for other cases and provided a more effective response to arrests of substance abusers. Additionally, the Drug Court has provided law enforcement with an additional tool to enforce a no tolerance policy, as well as increased education and awareness of officers about substance abuse and its impact on clients. Additionally, the representative indicated that the Drug Court Program has resulted in more jail space for pre-trial defendants, sentenced defendants, and reduced the number of substance dependent detainees.

The police believed that the Drug Court program has helped save time for police by reducing the amount of time spent in court appearances. Also, it has resulted in some savings in police/corrections overtime and jury expenses, as well. Further, the police believed the Drug Court program has reduced the number of re-arrests.

The police indicated the Drug Court has impacted the police department by resulting in additional work from assigning officers to assist Drug Court personnel. The Drug Court has not resulted in additional costs. The police indicated the program was in the early stages and therefore it was difficult to note any savings, problems or difficulties that may have resulted from the implementation of the Drug Court Program.

Benefits of the Drug Court program were as follows: (1) Cutbacks on contact with the same people repeatedly, and (2) Better-working relationships with the courts and jail. Strengths of the Drug Court program listed by the police were (1) Ongoing contact with the arrestees, (2) Better treatment, and (3) No revolving door arrest.

The police indicated some things the Drug Court program could do to improve upon: (1) Better training for police, and (2) Law enforcement officer assigned to work with the program (e.g. a retired police officer with special deputy powers).
The police advised counterpart agencies in other jurisdictions, beginning Drug Court programs, to “work as close as you can with the Drug Court workers and have as much contact with the program as possible.”
Jail Perceptions

The Kenton Jail indicated there would be no jail staff solely dedicated to the Drug Court program. It was also indicated that no changes to officer/staff orientation and training programs have resulted from the Drug Court program. The Jail further indicated that there was no expected impact on arrest and/or jail policies and procedures. The Jail felt that the Drug Court Program would not affect the jail’s relationship with community groups.

It was indicated that the Drug Court program should encourage greater coordination with other justice agencies, as well as promote new relationships within the justice system and other agencies in the community. It was believed the Drug Court has permitted officers to be available for other cases and has provided a more effective response to arrests of substance abusers. Further, it was also indicated that the program provides law enforcement with an additional tool to enforce a no tolerance policy.

The Jail staff believed that the Kenton Drug Court program would increase education and awareness of officers about substance abuse and its impact on clients. It was felt that the Drug Court Program would result in more jail space for pre-trial defendants. However, the Jail staff did not believe the program would result in more jail space for sentenced defendants or reduce the number of substance dependent detainees.

The Jail staff expects to see savings in the area of time spent in court appearances, savings in jury costs, and a reduction in the number of re-arrests. The Jail staff did indicated no expected savings in police and/or corrections overtime.

The Jail staff did not expect any problems or difficulties to arise as a result of the Kenton Drug Court program. It was indicated that the jail has seen little change, as of yet, from the implementation of the Drug Court program.

Areas in which the Drug Court program could improve upon, as indicated by the jail representative were: (1) Work on putting influence on County Attorney’s office, (2) More cooperation with the jailer and staff, and (3) The use of alternative programs.

Further comments from the jail representative included: “I think it [Drug Court] will become a great program, once it has time to get off the ground.”
Conclusions

In summary, the Kenton Drug Court program was established approximately one year ago. This program is based on the Key Components and has three program phases, which will take clients approximately 18 months to complete. As of April 23, 1999, the program had 27 active clients and 23 clients were employed full-time. The Drug Court staff and Judge have spoken at various community and civic groups. The Kenton Drug Court program has an alliance with approximately 16 state and community based agencies.

The most compelling aspect of the Kenton Drug Court program includes the immediate sanctions for acts of non-compliance. Another compelling aspect is the low termination rate of clients. To date, only 6 clients have been terminated from the program. The Final compelling aspect of the program is the commitment of the treatment organizations, which serve the Kenton Drug Court program.

At least half of the clients who enter the Drug Court program had been in treatment before entering the Drug Court program. The main reasons cited for why clients enter the Drug Court program were to avoid jail time, although a small percentage also enter to get help for their substance abuse problems. Clients remain in the program for similar reasons, but others added their reasons included regaining self-esteem, supervision, and “to have a real good support system.”

Additional services that respondents would like to see the Drug Court program offer included:

• “Service of God’s Word”
• “Some sort of sponsor group, maybe one when a phasing up occurs.”

The following were some of the strengths of the program listed by respondents:

• Drug Court staff
• Program helps clients to stay clean
• Accountability of clients
• Close monitoring of clients
• Intense level of treatment service
• Employment requirement
• Self-esteem
• Length of commitment required from clients
• Clients are given an adequate number of chances to succeed
• Immediate sanctions
• Offers clients assistance in many areas of life.
The following are some of the suggested areas of improvement for the current program:

- Homework assignments with more variety
- “I feel the Word of God needs to be involved”
- Begin weekly hearings on time
- Re-examine the number of urine tests required of clients
- Continue to search for services outside of traditional Northern Kentucky treatment services
- Be less restrictive in eligibility requirements
- Better communication procedures
- Better training for police
- Law enforcement officer assigned to work with the program
- More cooperation with jailer and staff
- “I think we need client advocates to help make adjustments to life”
- More documentation by staff.

One major problem with program implementation was getting other Judges to work with the Kentucky Drug Court program. However, defense attorneys and prosecutors maintain an ongoing effort to encourage other Judges to work the program.

The advice suggested for new Drug Court programs was:

- “Structure the program in such a way that it makes sense for the particular jurisdiction. What works in Kenton County may not work elsewhere”
- Use a consistent model of treatment
- Utilize group counseling
- Make eligibility and procedures for admission to Drug Court as simple as possible
- Do not make eligibility requirements too restrictive
- “Work as close as you can with the Drug Court workers and have as much contact with the program as possible.”
- “Anyone interested in starting a Drug court should take time to understand drug and alcohol abuse and understand the clientele.”

The following comments are excellent summaries of what respondents think of the Drug Court program.

Clients stated, “I think that it’s great because it has helped me out 100% on my life. I am glad I had a chance to join the program thanks to the Judge and staff,” “I want to thank all staff for caring when they didn’t have to. Thank you, Judge Bartlett, Diane, and Susan,” “Drug Court has helped me with a lot of issues,” “Drug Court workers are understanding authority figures,” “I believe the Drug Court program is and can be a very good program,” “Although I feel there is a lot of homework, I say this because sometimes I feel that I’m not doing my best because I’m being pressured,” “I feel that the people in Drug Court want to see me do well and my life get better. I don’t feel they’re here to hurt
but they are here to help if we let them,” “Going from Transitions to aftercare was a very
comfortable move. I like the feeling of caring you get from the Drug Court people. The
flexibility of individualizing has gotten better and helpful. Always there to try and find
solution to your problems, they put a lot of thought into your situations,” “Just the things
that are not helping me, that stress me out,” and “It works if you work it.”

Treatment representatives stated, “Like any other program, it will take some time
for Drug Court to become more established and to improve on problem areas. Clients
appear to benefit from the increased scrutiny, typically unavailable to most clients on
non-intensive probation and parole,” and “[The Drug Court program has] quick
response, friendly staff, [and] seems open to ideas from other providers.”

Comments from the jail representative included: “I think it [Drug Court] will
become a great program, once it has time to get off the ground.”

The Drug Court Judge commented, “I think that anyone who does it, and has any
degree of success is doing well, is a step in the right direction.

In conclusion, the Kenton Drug Court program has some problems they are
committed to working on, consistently, until they are overcome. Respondents were very
positive in their views of the Kenton Drug Court program. The staff is committed, and
the Drug Court Judge provides an overwhelmingly supportive environment, for this
program and the clients that it serves. The Kenton Drug Court program has worked
successfully to achieve the program goals and the key individuals involved are committed
to future achievements, as well.
Process Evaluation Methodology

In evaluating the effectiveness of programs like the Drug Court program, researchers have often relied on only the program outcomes such as termination and graduation rates and/or re-arrests to determine effectiveness. However, programs such as Drug Court are essentially long-term behavior modification programs that cannot be fully understood by looking solely at the final program outcomes. To better understand how and why a program like Drug Court is effective, an analysis of how the program was conceptualized, implemented, and revised is needed. A process evaluation, in contrast to an examination of program outcome only, can provide a clearer and more comprehensive picture of how Drug Court impacts those involved in the Drug Court process (e.g., prosecutors, Judges, staff, and clients).

Specifically, a process evaluation provides information about program aspects that lead to desirable or undesirable outcomes. Because changes to the original program design may affect the program outcomes, a process evaluation can be an important tool in helping prosecutors, Judges, staff, defendants, and defense council to better understand and improve the Drug Court process. In addition, a process evaluation may help to reveal strategies that are most effective for achieving desirable outcomes and may expose those areas that are less effective. A process evaluation may also help explain the reasons why some defendants successfully complete the program and why other defendants terminate from the program before they graduate. Finally, a process evaluation may help facilitate replication of the Kenton Drug Court program in outer areas of Kentucky.

The Kenton Drug Court program process evaluation used structured interviews for each of the different agency perspectives and a specific methodological protocol. The methodology protocol and interview procedures were used in a number of process evaluations across the state of Kentucky including the Fayette Drug Court program. This allows for comparisons of similarities and differences across the specific Drug Court program sites if desired.

The limitations for this process evaluation report include generalizability across time and programs. This report is specifically for the period between April 15, 1998 and March 31, 1999. Changes that occur after this point in time are not reflected in this report. In addition, the representatives surveyed for this report may or may not reflect all attitudes toward the Kenton Drug Court program. Regardless, the report is critical for documenting the program or the planning process through the stated time period.

The process evaluation for the Kenton Drug Court program included semi-structured interviews with and surveys of active Drug Court clients, Drug Court staff and treatment coordinator, Drug Court Judges, defense council, prosecutors, probation and parole representatives, jail personnel, police department representatives, and treatment program representatives. The specific breakdown of interviews is as follows:
Table 15. Process Evaluation Methodology

<table>
<thead>
<tr>
<th>Respondent</th>
<th>Number interviewed/returned</th>
<th>Response Rates</th>
</tr>
</thead>
<tbody>
<tr>
<td>Active Clients</td>
<td>8</td>
<td>80%</td>
</tr>
<tr>
<td>Treatment coordinator</td>
<td>1</td>
<td>100%</td>
</tr>
<tr>
<td>Drug Court staff</td>
<td>2</td>
<td>67%</td>
</tr>
<tr>
<td>Drug Court Judges</td>
<td>2</td>
<td>100%</td>
</tr>
<tr>
<td>Defense Council</td>
<td>3</td>
<td>100%</td>
</tr>
<tr>
<td>Prosecutors</td>
<td>1</td>
<td>50%</td>
</tr>
<tr>
<td>Probation &amp; Parole</td>
<td>2</td>
<td>100%</td>
</tr>
<tr>
<td>Jail</td>
<td>2</td>
<td>100%</td>
</tr>
<tr>
<td>Police Department</td>
<td>2</td>
<td>100%</td>
</tr>
<tr>
<td>Treatment Programs</td>
<td>4</td>
<td>100%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>27</strong></td>
<td><strong>90%</strong></td>
</tr>
</tbody>
</table>

The treatment coordinator interview lasted about four hours and the Judge was interviewed by phone. The Judge interview lasted about one hour. All of the other surveys were self-administered. Clients were chosen randomly by the treatment coordinator and the treatment coordinator provided names and contact number of other representatives with working knowledge of the Kenton Drug Court program. Information was collected during March and May 1999. Feedback from each of the respondents is reported in separate sections.