

Henry/Oldham/Trimble Counties Adult Drug Court Implementation Evaluation

Henry/Oldham/Trimble Counties Adult Drug Court Implementation Evaluation

June 2005

**Center on Drug and Alcohol Research
University of Kentucky
915-B South Limestone
Lexington, KY 40536-9824**

859-257-9062

Project Staff

University of Kentucky Center on Drug and Alcohol Research

Principal Investigator
Senior Data Coordinator
Drug Court Liaison
Senior Data Coordinator

Jennifer Havens, Ph.D., M.P.H.
Barbara Martin
Kimberly Cobb, M.S.
Valerie Bryan, M.S.W.

For an electronic version of this report, please email requests to Barbara Martin at barbara.martin@uky.edu or visit the Kentucky Drug Court website at www.kycourts.net

TABLE OF CONTENTS

PREFACE	6
Need for Adult Drug Court in Kentucky.....	6
Need for the Henry/Oldham/Trimble Counties Adult Drug Court Program.....	7
EXECUTIVE SUMMARY.....	9
PROCESS EVALUATION METHODOLOGY	10
Interviews	10
Court Observation	11
Monthly AOC Statistical Reports	11
Program Documentation	12
Focus Group and Logic Model.....	12
LOCATION AND SOCIODEMOGRAPHIC CONTEXT.....	13
FINDINGS: DURING PROGRAM IMPACT AND OUTCOMES	15
Key Component 1.....	15
Key Component 2.....	16
Key Component 3.....	16
Key Component 4.....	20
Key Component 5.....	24
Key Component 6.....	26
Key Component 7.....	36
Key Component 8.....	38
During Program Progress Indicators and Outcomes	46
Key Component 9.....	50

Key Component 10.....	51
SUMMARY AND CONCLUSIONS.....	52
REFERENCES CITED	54

Index of Figures and Tables

Figure 1 – Lifetime substance use among Drug Court clients	20
Figure 2 – Number of group treatment sessions	22
Figure 3 – Number of individual counseling sessions	23
Figure 4 – Number of family/support counseling sessions.....	23
Figure 5 – Number of drug screens.....	25
Figure 6 – Number of panels used in urine testing	25
Figure 7 – Number of positive drug screens by drug type	26
Figure 8 – Number of participants in each phase of Drug Court	32
Figure 9 – Number of phase promotions/demotions by phase	32
Figure 10 – Number of sanctions by type	34
Figure 11 – Number of participants enrolled by month.....	47
Figure 12 – Maximum and average number of days in Drug Court	47
Figure 13 – Number of participants employed.....	50
Table 1 – Participant Background Characteristics at Program Entry.....	19
Table 2 – Drug Court Phase Requirements	28
Table 3 - Sanctions List.....	35

Index of Appendices

Appendix A-10 Key Components	56
Appendix B-Participant Observation Coding Sheet.....	58
Appendix C-Client Record Coding Sheet	60
Appendix D-Consent and Script for the Focus Group	70

PREFACE

Need for Adult Drug Court in Kentucky

Though Kentucky recidivism rates have decreased slightly in recent years, both generally and specific to drug crimes, rates remain high. The most recent data provided by the Kentucky Department of Corrections reported that 7,579 inmates were released in 2000 from adult institutions in Kentucky and 27.5% of them returned to prison within two years (Kentucky Department of Corrections, 2002). The rate of recidivism for drug offenders in 2000 was higher than the overall recidivism rate at 28.7%. Arrests for narcotic law violations increased from 34,082 in 2000 to 36,551 in 2003 (12.1% and 15.7% of total arrests respectively; Kentucky State Police, 2004).

Additionally, during a large-scale needs assessment of prisoners in Kentucky, Leukefeld et al. (1999) found that 59% of Kentucky inmates were dependent on substances and that inmate illicit drug use one month prior to incarceration was 20 times higher than use in the general population. In response to the rising costs of incarceration and increased numbers of drug related arrests and recidivism, Kentucky's Administrative Office of the Courts (AOC) established a Drug Court department in July 1996, to provide fiscal and administrative oversight to all Drug Court programs in the state.

The motto for Kentucky Drug Court is "A chance...a change" and Kentucky Drug Court is aligned with the more than 1000 Drug Courts in operation across the United States. Reflecting the philosophy of therapeutic jurisprudence (Hora, 2002), the mission of Drug Court is to create a criminal justice environment in Kentucky that is effective in both eliminating illicit drug use and related criminal activity while promoting recovery and reintegration into society, emphasizing public safety and fair representation of all interests under the laws of the Commonwealth of Kentucky. Drug Court programs in Kentucky represent a team-oriented effort that brings together professionals from the criminal justice system, the treatment delivery system, and the community

who are focused on combining intensive criminal justice supervision with drug abuse treatment. This combination of intensive supervision and treatment holds offenders accountable for their actions and provides an atmosphere that has been shown to be effective in reducing recidivism and drug use and for improving employment rates among Kentucky drug offenders (Logan, Hiller, Minton, & Leukefeld, in press).

All adult Drug Courts in Kentucky are grounded in the 10 Key Components described in the publication *Defining Drug Courts: The Key Components* (United States Department of Justice, 1997). These 10 Key Components were developed by the Drug Court Standards Committee to ensure that a core set of standards were defined for all Drug Court programs to follow. Drug Court programs in Kentucky are required to adhere to a programmatic model developed by Administrative Office of the Courts that fulfills the standards set forth in the 10 Key Components. Individual programs vary to a certain degree in exactly how each of these standards are fulfilled since the 10 Key Components are intended to be somewhat flexible. These guidelines provide an important standard by which to measure whether a particular Drug Court has been successfully implemented in the manner intended by the U. S. Department of Justice.

At the time of this evaluation, Kentucky had 27 operational adult Drug Courts, 10 operational juvenile Drug Courts, and 2 operational family Drug Courts (Kentucky Administrative Office of the Courts, available online), and many more Drug Courts are in the planning process.

Need for the Henry/Oldham/Trimble Counties Adult Drug Court Program

Many of the crimes in the counties served by this program are drug or alcohol related. For example, in Henry County during 2003, 94 arrests were made for driving under the influence (DUI), 34 arrests were made for drunkenness, 70 arrests were made for narcotic drug law offenses, and 18 arrests were made for liquor law offenses, accounting for 26.6% of Henry County arrests in 2003.

In Oldham County during 2003, 7 arrests were made for driving under the influence (DUI), 6 arrests were made for narcotic drug offenses, and 1 arrest was made for liquor law offenses, which accounted for 16.7% of Oldham County arrests in 2003.

In Trimble County, 64 arrests were made for driving under the influence (DUI), 14 arrests were made for drunkenness, 46 arrests were made for narcotic drug offenses, and 17 arrests were made for liquor law offenses, which accounted for 51% of Trimble County arrests in 2003.

(Kentucky State Police, 2004).

Executive Summary

This report evaluates the Henry/Oldham/Trimble Adult Drug Court program during the months of December, 2003 through February, 2005. The Drug Court received federal funding from the Bureau of Justice Assistance in October, 2003 and, at the time of this report, had enrolled 20 participants.

The evaluation is comprised of qualitative and quantitative data regarding Drug Court procedures and regulations as well as participant supervision and treatment. Independent evaluators from the University of Kentucky Center on Drug and Alcohol Research attended staffing and court sessions, met individually with team members, and conducted a focus group with the Drug Court team. Monthly statistics submitted to the Kentucky Administrative Office of the Courts were also reviewed as well as statistics collected from program records.

Results from this process evaluation demonstrated that the Henry/Oldham/Trimble Drug Court is in accordance with the 10 Key Components, a national standard for effective Drug Court operations. The Drug Court team has developed enrollment and assessment procedures which target individuals who have felony charges and have a history of substance abuse. A comprehensive treatment regimen has been created with cooperation from Seven Counties Services, Inc. along with various AA/NA and residential treatment facilities. The Drug Court has also developed an intense level of supervision in the form of frequent random drug testing. In addition to drug tests, the program uses a variety of monitoring techniques including employment, education, curfew, and homework assignments. To fairly and consistently handle acts of non-compliance, the Drug Court team has developed a fixed sanction algorithm. This graduated list of sanctions helps to ensure that participants are aware of possible consequences for their actions. A wide variety of community agencies have been recruited to provide participants with basic assistance, employment, education, and treatment.

The Henry/Oldham/Trimble Adult Drug Court, through the dedicated support of its team members, has provided the community with an effective response to crime and substance abuse. The program offers an important service to both the participants who enroll in the program and the community at large. By committing themselves to helping substance abusing individuals and maintaining national Drug Court standards, the Drug Court team has, in their first year, started a program which is well on its way to becoming a successful Kentucky Drug Court.

PROCESS EVALUATION METHODOLOGY

Developing a specialized court takes extensive planning and program development processes. In order to document the tasks and outcomes of the tasks of these new specialized courts, a process evaluation methodology was employed for this study. Utilizing a process evaluation methodology has several advantages. One advantage is that it allows the program to not only document, but also later revisit initial steps to determine what aspects of the program are successful and perhaps what aspects of the program need revision or fine tuning. A second advantage is that, in conjunction with an outcome evaluation, it may explain why participants are successful or not successful in completing the program. And finally, process evaluations are essential for replication of future programs.

For the process evaluation piece of the Henry/Oldham/Trimble County Drug Court Evaluation, the research team conducted interviews with Drug Court coordinators and Judges, conducted focus groups with key Drug Court personnel, conducted treatment team staffings and court observations, and coded Drug Court participant case files.

Interviews

The research team conducted structured face to face interviews with the Drug Court coordinator as well as the Drug Court Judge using instruments which collected both quantitative and qualitative data (see Logan, Lewis, Leukefeld, & Minton, 2000). The Drug Court Judge Interview assessed level of prior experience with the target population, the perceived potential impact of the Drug Court on the community and judicial system, program eligibility, overall capacity, the consequences for failing the program, the services needed, the planned level of supervision, and the types of graduated sanctions and rewards used. The Drug Court Administrator Interview is a comprehensive questionnaire that detailed the specific operational characteristics of

the Drug Court program. Specific sections highlight the target population, program goals, program organization and function (e.g., recruitment, capacity, assessment, and services), supervision practices, staff characteristics, and community organization involvement.

Court Observation

The court observation allowed for the research team to extract observational data regarding the interactional (exchanges between the judge, court staff, and participants) and environmental (physical characteristics of the setting) variables of the Drug Court session. Data were coded using a protocol developed by Satel (1998) during a national study of 15 adult Drug Court programs. The method involved coding the session on 17 specific characteristics that focused upon the interaction between the Drug Court judge and participants (including eye contact, physical proximity of the judge to the participant, who the judge first addresses, whether each participant remains present in the court room throughout the entire session, and time spent with each participant) and the court room setting (including seating arrangements and ambient noise level). In addition, Drug Court staff were asked to rate how typical the observed sessions were for regular court operations. A copy of the observation code sheet is included in Appendix B.

Monthly AOC Statistical Reports

All active Drug Courts in Kentucky, including the Henry/Oldham/Trimble Counties Adult Drug Court, are required to submit monthly reports to the Administrative Office of the Courts. These reports summarize 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 receiving phase promotions or demotions; the number of court sessions; the number of participants identified as using an illicit substance based on urine

drug screens; the number of individual sessions; the number of drug sessions; the number of family/support sessions; the number of participants referred to outside agencies; employment and educational status of participants; 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 the total number of active participants in the preceding month. For the current evaluation, monthly statistics reports from December, 2003 through February, 2005 were reviewed and analyzed.

Program Documentation

Several other sources of program documentation also were reviewed for the process evaluation. These included copies of the grant application submitted by the court for funding, handbooks provided by the Drug Court to its participants, and the policy and procedures manual for the court.

Focus Group and Logic Model

A focus group also was conducted during the process evaluation with Drug Court team members. The goal of the focus group session was to synthesize a comprehensive description of program elements for this Drug Court using a “logic model” approach. A preformatted logic flow model (adapted from Harrell, 1996) was completed during a researcher-led focus group to help Drug Court staff to articulate specific goals, outputs, and activities for their Drug Court, with special emphasis placed on identifying links between specific program activities and their influence on the stated goals and objectives.

Geographic Location and Context of the Henry/Oldham/Trimble Counties Drug Court.

The main office of the Henry/Oldham/Trimble Counties Adult Drug Court program is located in LaGrange (Oldham County) which also serves as the county seat. Henry County sits in the Outer Bluegrass region of the state, covers approximately 289 square miles and in 2000 reported approximately 52 people per square mile (Kentucky Atlas & Gazetteer). The 2000 US Census Bureau reported that the population estimate for Henry County was 15,060. US Census figures also indicate that 94% of Henry County's population was Caucasian, 3.3% African-American, and 2.3% Hispanic. The per capita income reported for Henry County in 1999 was \$17,846, with 13.7% of the population living below the national poverty rate. Educational data regarding the population provides that in 2000, 73.4% of the county's population had completed a high school degree, while 9.8% had completed a bachelor's degree or higher (U.S. Census Quick Facts, retrieved online April, 2005).

Oldham County is located in the Pennyryle and Outer Bluegrass regions of the state. Covering approximately 189 square miles, the county sits on the banks of the Ohio River across from Indiana. The 2000 US Census Bureau reported that the population for Oldham County was 46,178. US Census figures also indicate that 93.6% of Oldham County's population was Caucasian, 4.2% African-American, and 1.3% Hispanic. The per capita income reported for Oldham County in 1999 was \$25,374, with 4.1% of the population living below the national poverty rate. Educational data regarding the population provides that in 2000, 86.5% of the county's population had completed a high school degree, and 30.6% had completed a bachelor's degree or higher (U.S. Census Quick Facts, retrieved online April, 2005).

Trimble County is also located in the Outer Bluegrass regions of the state. Situated next to Oldham County on the Ohio River, the county covers approximately 149 square miles. The 2000 US Census Bureau reported that the population estimate for Trimble County was 8,125 residents.

US Census figures also indicate that 97.9% of Trimble County's population were Caucasian, .3% were African-American, and 1.4% were Hispanic. The per capita income reported for Trimble County in 1999 was \$16,355, with 13.6% of the population living below the national poverty level. Educational data regarding the population provides that in 2000, 70.7% of the county's population had completed a high school degree, while 7.6% had completed a bachelor's degree or higher (U.S. Census Quick Facts, retrieved online April, 2005).

FINDINGS: DURING PROGRAM IMPACT AND OUTCOMES

The findings presented in this section are comprised of information gathered from the Administrative and Judge's interviews, focus group, participant observation, and participant files. These data were examined and are presented within the context of the 10 Key Components (Drug Court Programs Office, 1997).

Key Component #1. Drug Courts integrate alcohol and other drug treatment services with justice system case processing.

Findings from the focus group, court session and staffing observations and staff interviews demonstrated that the Henry/Oldham/Trimble Counties Adult Drug Court has a cohesive structure that integrates drug treatment services with criminal justice supervision. The Drug Court successfully incorporates substance abuse treatment with criminal justice-based case management as evidenced by the make-up of their Drug Court team. The Drug Court team consists of a Judge, treatment coordinator, public defense and prosecution attorneys, and a court designated worker. Representatives from the local probation and parole offices, local police officers, and sheriffs are also active on the team. The family court coordinator and the Judge's assistant are also present during staffing and court sessions.

Substance abuse treatment professionals from Seven Counties Services, Inc. are active members of the Drug Court team and help ensure that participants receive the appropriate type and level of treatment. Other treatment agencies such as JADAC and Ten Broeck, both residential facilities, offer a more intense level of treatment when necessary. The Drug Court team has formed a relationship with local groups such as Creative Spirit and New Directions in Life so that participants have a variety of options.

Key Component #2. Using a non-adversarial approach, prosecution and defense counsel promote public safety while protecting participants' due process rights.

Evaluators from the University of Kentucky were present during court and staffing sessions and noted that the prosecutors and defense attorneys worked together within their team to help the participants' in their recovery process. Both attorneys are committed to working with each participant in order to reduce criminal involvement. Both of the Drug Court attorneys have been willing and eager to lay aside their typically adversarial roles to accept the shared responsibility of placing the participants' well-being first. Staff members are always encouraged to provide input into the discussions surrounding each participant's case with the knowledge that their opinions will be accepted and considered. In this way the due process rights of the participants are ensured as well as the balanced success of the program.

Key Component #3. Eligible participants are identified early and promptly placed in the Drug Court program.

Since the Henry/Oldham/Trimble Drug Court was funded in October 2003, the team has strived to reach as many potential candidates as possible. Although the Drug Court had, as of December 2004, enrolled a total of 20 participants, team members are continuing to discover additional methods of targeting prospective participants and raising enrollment to meet the original goal set out in the grant of 50 participants per year.

Referrals, eligibility, and admission procedures.

The Drug Court program in Henry, Oldham, and Trimble counties was designed to accept candidates on either a diversion or probation track. When a diversion track participant successfully completes the program, the original charges are dismissed, and in some cases the participant's record may be expunged. Participants enrolled on a probation track are released from active supervision upon graduating from the Drug Court program. In the event that a diversion track participant does not successfully complete the program, the case is put back on the criminal court

docket for sentencing. If a probation track participant fails to complete the program, he/she is then scheduled for a revocation hearing, unless the participant has been “shocked-out” in which case he/she will return to prison to serve out the remainder of his/her sentence.

Most Drug Court candidates are introduced to the program by their defense attorney. However, in some cases the defendants learn of the program through brochures or through word-of-mouth from friends, other inmates, or current participants.

In order to be admitted to the Drug Court program, individuals must meet certain inclusionary criteria. All candidates must be felony offenders with substance abuse issues. In most cases the individuals criminal activities are linked to substance use/abuse. In accordance with Bureau of Justice Assistance regulations, the Drug Court team immediately excludes individuals with charges of a violent nature or a previous history of violence. Participants must reside in one of the three counties in the Drug Court program and must have access to transportation which will allow them to complete program requirements such as court sessions, therapy sessions, and AA/NA meetings. Participants with trafficking offenses are also excluded from the program; however, an individual may be considered if he/she has sold drugs solely to fund their own drug habit. At this point, the Drug Court is unable to offer services which cater to the needs of participants with acute mental illnesses; therefore, potential candidates who meet the above criteria but present with severe mental health problems are excluded from the program.

Before the candidate has been officially accepted into the program, the treatment coordinator administers the Kentucky Addiction Severity Index (ASI), (Logan, et al., 2001) in order to assess the substance abuse history and treatment needs of the individual. This assessment is done in jail, in the courthouse conference room, or in the Drug Court office, and is completed within seven days after the participant is referred to the program. After completing the ASI the treatment coordinator

discusses the ASI results and any other pertinent information with the rest of the Drug Court team and a decision is made regarding the admission of the candidate.

Capacity and Caseflow.

When asked what characteristics of the Henry/Oldham/Trimble area suggested that a Drug Court program would be beneficial, staff referred to the high rate of criminal offenses involving substances. Staff also mentioned that in rural areas, such as Henry, Oldham, and Trimble counties, services for substance abusers are less identifiable. Criminal justice professionals in these counties have seen evidence of a “revolving door” situation where a large number of individuals are being repeatedly processed through the system. In other words, people who commit crimes, especially where drugs are involved, are being sentenced and released, only to continue their drug use, commit additional crimes and re-enter the system. The Drug Court in this area was established to challenge this “revolving door” and provide a “genuine resolution for drug related criminal behavior.”

The original grant submitted to, and later awarded by, the Bureau of Justice Assistance, stated that a maximum number of 50 participants would be active in the Drug Court program every year. As of December, 2004 the Drug Court had enrolled a total of 20 participants. Monthly statistics showed that the majority of participants were white males. The remainder of the participants reported themselves to be of African-American, Native-American, or of bi-racial ethnic background. More than half of all participants are above the age of 30. Although a large majority of participants had a high school diploma or GED upon entering into the Drug Court program, only 9 individuals were employed full-time. (Table 1)

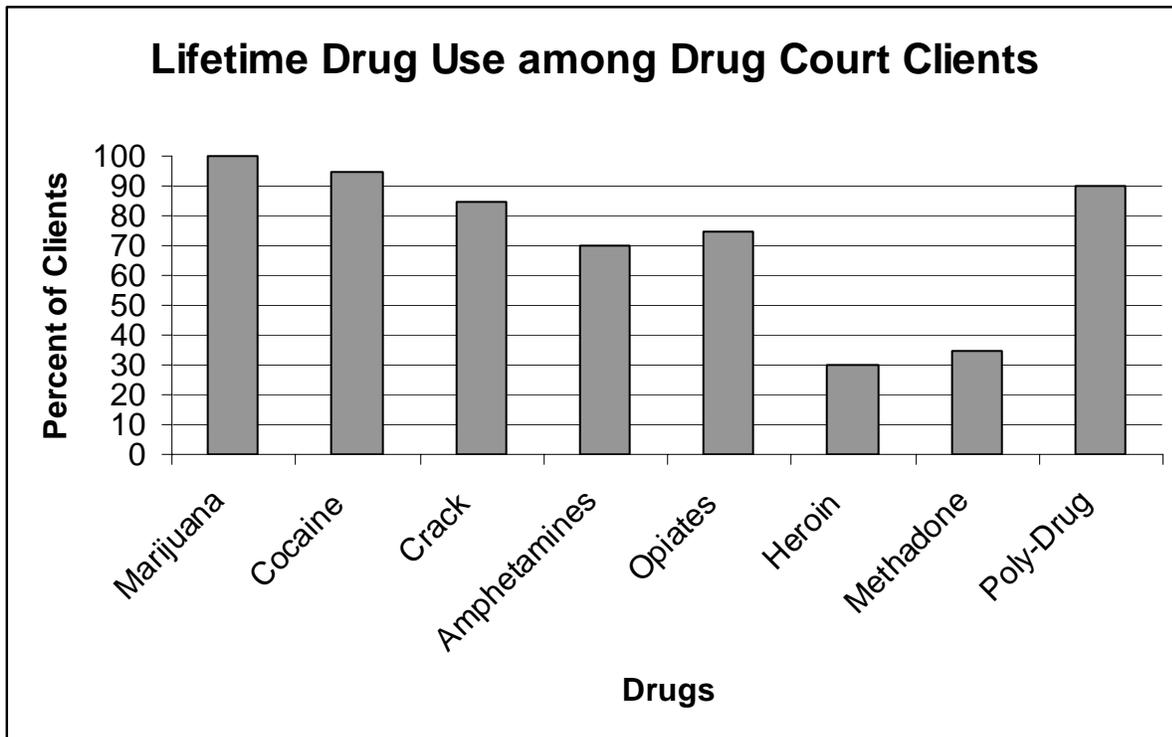
Table 1.

Gender	
Male	16
Female	4
Race/Ethnicity	
Caucasian	14
African-American	2
Native-American	2
Bi-racial	2
Age	
18-30	9
31-40	4
41-50	6
51+	1
Employment	
Full-Time	9
Part-Time	2
Unemployed	8
Missing	1
Education	
Less than High School	2
High School/GED	17
College Degree	1

As part of the Kentucky Addiction Severity Index (ASI), the participant is asked to provide information regarding their substance use and/or abuse history. This includes types of substances used, age when substance was first used, and how often the substance has been used in the past 30 days. Figure 1, as seen below, illustrates the types of substances used by participants. As in other Drug Court programs throughout the state, marijuana is used most often; in this case, 100% of Drug Court participants used marijuana prior to entering the program. While marijuana is often first used when the participants were in their teenage years, in this population of Drug Court participants, some used marijuana the first time at 8-10 years of age. The majority of participants (95%), also

reported using cocaine, 85% of participants reported using crack and hallucinogens, and more than 50% of all participants reported using amphetamines, barbiturates, or opiates prior to entering the program. A large percentage (90%) of participants reported being poly-substance users, with the earliest poly-substance use reported at 13 years of age.

Figure 1.



Key Component #4. Drug Courts provide access to a continuum of alcohol, drug, and other related treatment and rehabilitation services.

In order to properly assess the treatment needs of each participant, the treatment coordinator completes an Individual Program Plan (IPP) at the outset of the participant’s involvement in the Drug Court program. Although substance abuse treatment is comprised of certain basic components, each participant’s IPP is individualized to fit their own specific needs. As participants are beginning individual and/or group therapy sessions, they meet with the treatment coordinator on several occasions to assist in developing their IPP. During these sessions, the treatment coordinator

and participant discuss each treatment phase as well as any personal goals which the individual may wish to achieve. The IPP is re-evaluated and modified at each phase change and during the phases if necessary. The treatment coordinator refers to the IPP approximately once every two weeks to ensure that the participant is adhering to the prescribed plan of action. Both the treatment coordinator and the participant are involved in the development, evaluation, and modification of the IPP.

The Henry/Oldham/Trimble Drug Court has created a partnership with Seven Counties Services, Inc. to provide participants with a blend of treatment options, including intensive out patient, individual, and family therapy sessions. The Drug Court also works with JADAC, a residential substance-abuse treatment facility based in Louisville, Kentucky. Inpatient services may be necessary when and if the participant is unable to maintain abstinence or if the participant requires substantive detoxification.

Treatment sessions are goal-oriented and motivational in nature with an emphasis on substance use/abuse education. During Phase I, participants are required to attend two group sessions per week, each lasting approximately three hours. Participants are also required to attend a minimum of three AA/NA meetings per week. Phase II participants must attend no less than two group sessions per week as well as a minimum of two AA/NA meetings per week. In Phase III of the program, participants are required to attend one group session and at least one AA/NA meeting per week.

Participants also attend individual counseling sessions at least once per week throughout all three phases of the program; however, they may choose to meet with the treatment coordinator more often. During individual treatment sessions the participant may discuss housing or employment issues, questions regarding group therapy or AA/NA meetings, homework concerns, or

any other relevant topic. Individual sessions are planned for an hour but may run longer depending on the needs of the participant.

Treatment providers report to the Drug Court treatment coordinator on a regular basis to inform them of the participants' progress. Treatment providers and the coordinator also communicate via telephone to relate each participant's progress to the team during weekly staffing sessions.

Data regarding group and individual treatment sessions can be seen below in Figures 2 and 3. It should be noted that due to staff changes which occurred early in the program, monthly statistics are not available for the entire period covered by this evaluation. With that in mind, the following figures show evidence of an increasing pattern of treatment sessions as the number of participants increased. Monthly statistics reported that between December, 2003 and February, 2005 a total of 421 group treatment sessions were conducted, as well as 221 individual sessions, and 22 family/support sessions.

Figure 2.

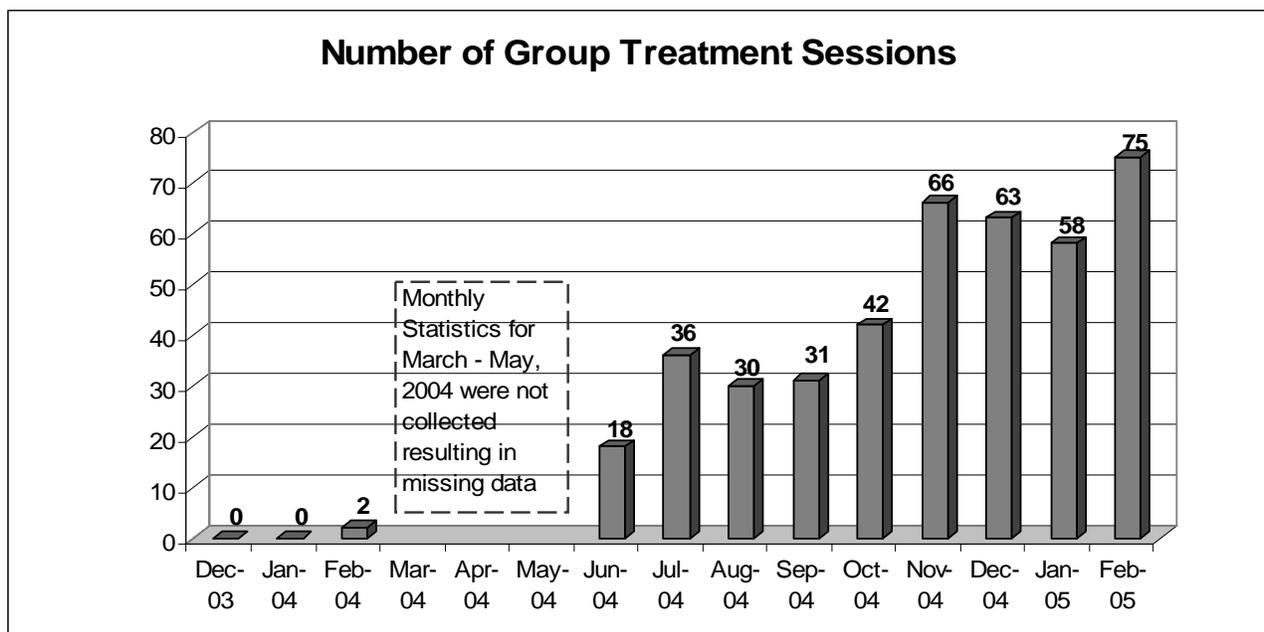


Figure 3.

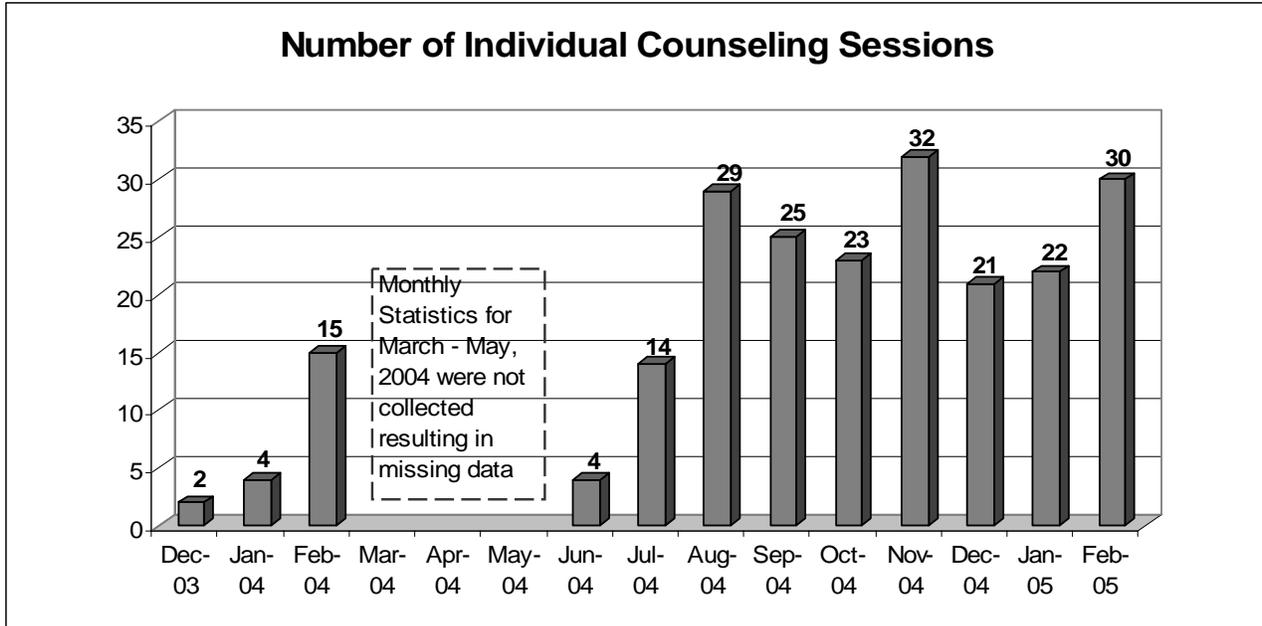
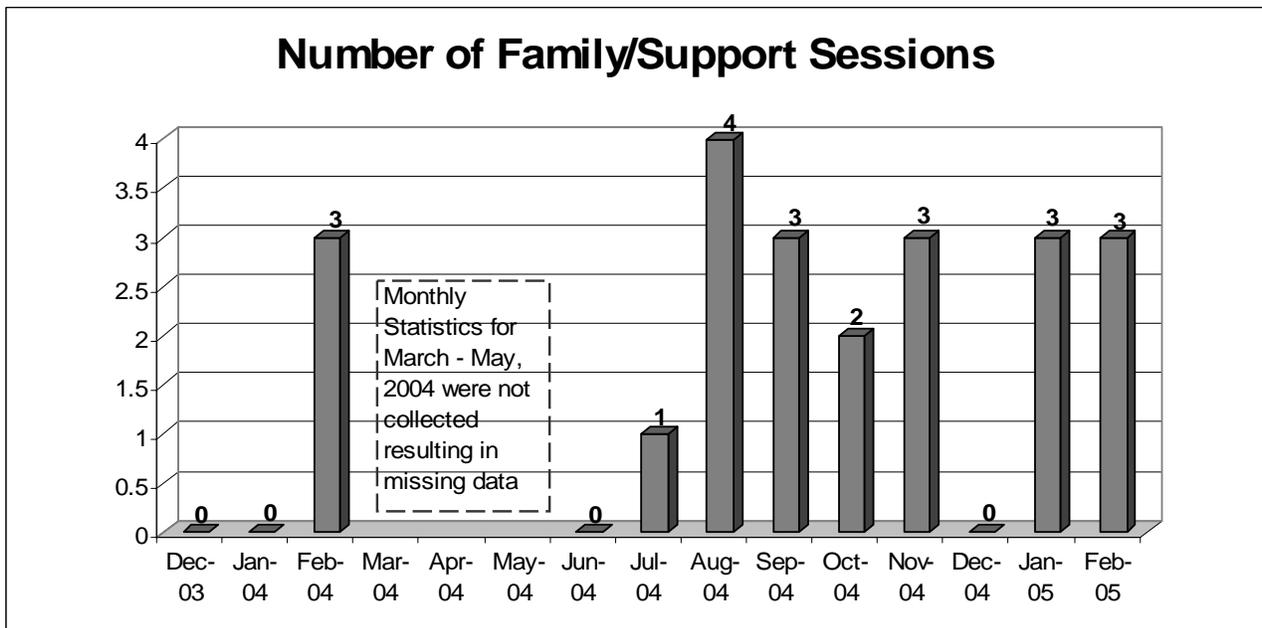


Figure 4.



Key Component #5. Abstinence is monitored by frequent alcohol and other drug testing.

The Henry/Oldham/Trimble Drug Court program requires participants to remain abstinent throughout the program. In order to help ensure that participants adhere to this rule, the Drug Court employs frequent urine testing. A baseline urinalysis is performed before the participant's case is officially transferred from the criminal court docket to the Drug Court docket. This first test, as well as all other urine screens, are conducted in the probation office. A 10-panel screen is used and tests the participants for the following substances: marijuana, cocaine, opiates, phencyclidine (PCP), benzodiazepines, methaqualone, propoxyphene, barbiturates, amphetamines, and methamphetamines. Participants are randomly tested a minimum of three times per week in Phase I, twice per week in Phase II, and once per week in Phase III. All drug tests are observed by either the treatment coordinator or another member of the Drug Court team depending on the gender of the participant.

Positive Urine Screens:

During the current evaluation period, December, 2003 through February, 2005, the Drug Court conducted a total of 834 urinalyses. As Figure 5 illustrates, the number of drug screens increased as more participants were enrolled in the program, with the fewest (11 screens) in January, 2004 and the most (147 screens) in January, 2005. Figure 6 shows the number of panels conducted for the months of June, 2004 through February, 2005. Data showing the number of panels used during urinalyses is unavailable prior to June, 2004. However, in the months since this data was gathered, a total of 3285 panels were analyzed with an average number of 365 panels per month.

Figure 5.

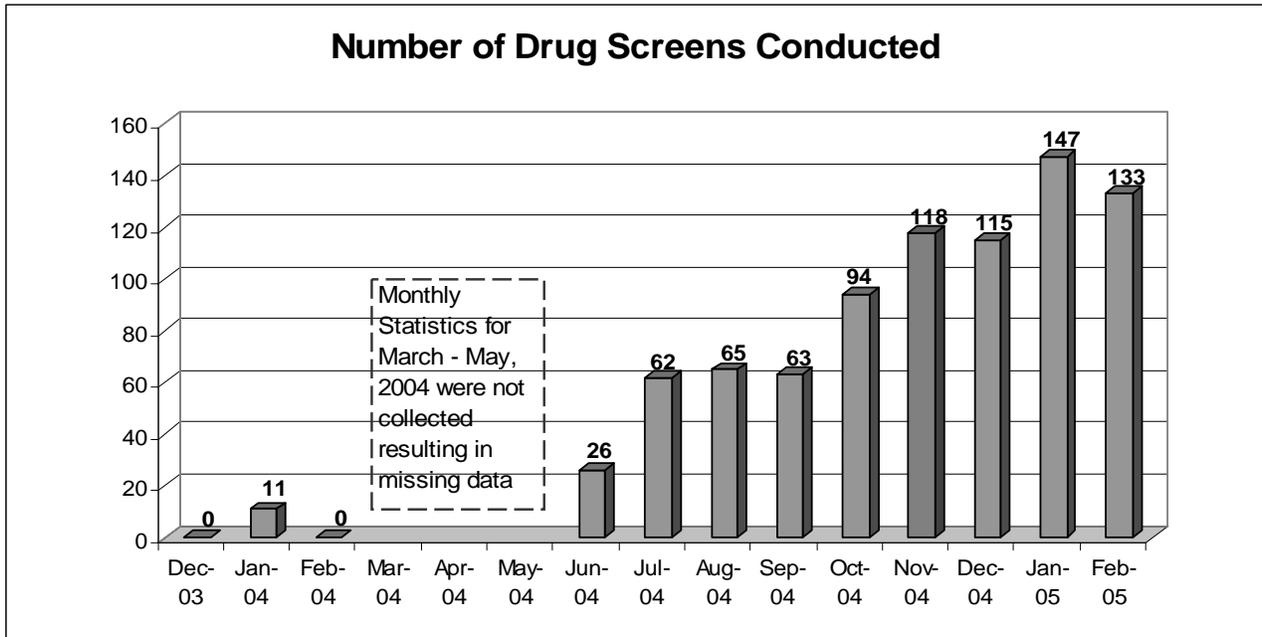
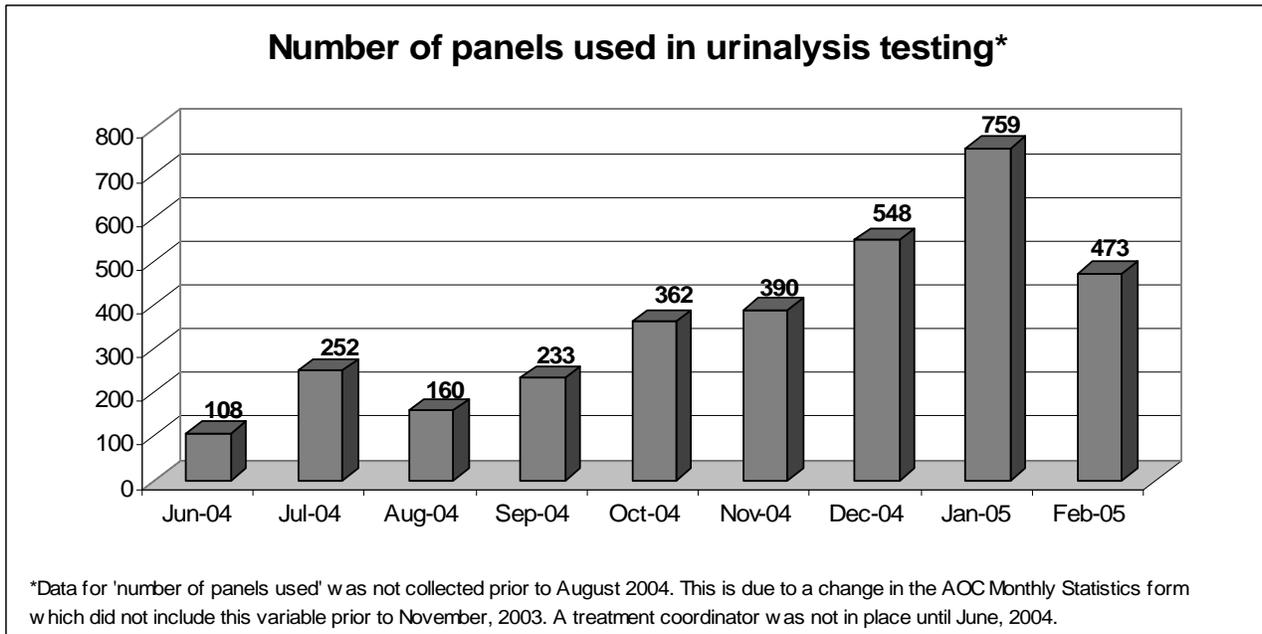


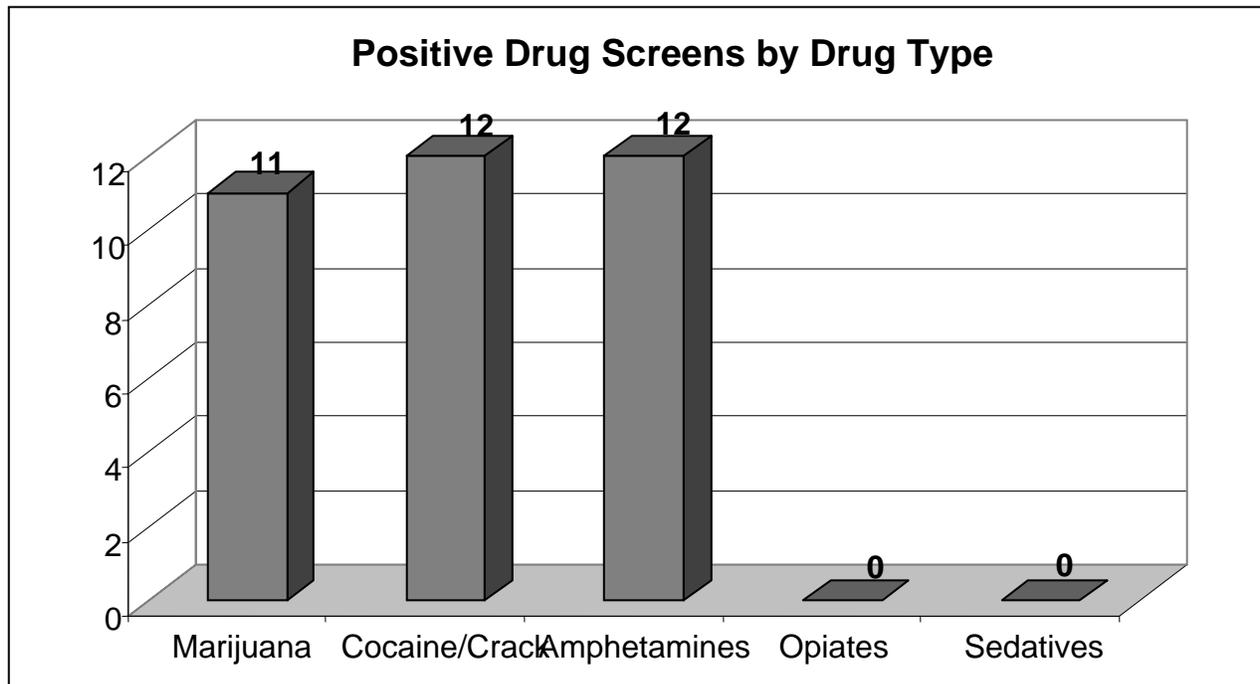
Figure 6.



Because the Drug Court program enrolls participants with a history of substance abuse, team members understand that some participants will have setbacks in their recovery process. The Henry/Oldham/Trimble Drug Court program follows a strict sanctioning procedure for positive

urinalysis results. If immediate results show a positive reading, participants are asked to explain the test results and to admit to their drug use. If the participant denies any substance use, the test is sent to the laboratory for confirmation. In cases where the test is confirmed as positive, the participant is required to pay laboratory fees; however, if the test is returned as negative the Drug Court pays the fees. The following chart shows that during the current evaluation period, participants tested positive most often for cocaine and/or crack use followed by amphetamine and marijuana use. It should be noted that participants may have tested positive for more than one substance.

Figure 7.



Key Component #6. A coordinated strategy governs Drug Court responses to participants' compliance.

The Henry/Oldham/Trimble Drug Court program has been developed to conform to state and national Drug Court standards. When participants enter Drug Court, they are given a handout which details the phase system for the program (Table 2). This handout explains the purpose of each phase and informs the participant of the minimum requirements and treatment goals. After the participant is accepted into the Drug Court program, they are given a copy of the Kentucky Drug Courts Participant Handbook and an Agreement of Participation. The treatment coordinator meets with each individual to explain the Drug Court requirements and discuss any concerns the participant may wish to address.

Table 2.

DRUG COURT PHASE SYSTEM

The Drug Court treatment program consists of 3 phases and can be completed in 18 months.

PRETREATMENT PHASE:

A Pre-treatment period of about one month will precede the beginning of Phase I, when the participant will meet with drug court staff 3-5 times to assess needs and develop an Individual Program Plan (IPP). The participant will be oriented to the drug court program, given an handbook, and given the opportunity to ask questions and express concerns. Learning challenges will be identified and addressed. An interpreter will be included during all stages of the treatment program for participants with limited English speaking skills. During all phases, each participant will be expected to keep a weekly calendar and call each day to see if he is to be drug tested. In addition to AA/NA, other self-help groups or activities that support a client's recovery efforts will be encouraged.

PHASE I Stabilizing Period

Phase I is described as the stabilizing period, lasting 3 months. The primary modality of treatment will be intensive outpatient with referrals for intensive treatment if indicated by assessment. The goal of Phase I is to move toward early recovery.

Minimum requirements and treatment objectives include:

1. to attend one drug court session per week;
2. to provide a minimum of 3 drug screens each week which reflect no use of drugs;
3. to attend and document a minimum of 3 AA/NA meetings per week, complete meeting reports, purchase an AA/NA book, obtain a sponsor, and demonstrate an understanding of Steps 1 through 4 of the 12 steps;
4. to attend intensive outpatient treatment 2 times per week for 3 hours per sessions;
5. to attend 1 individual counseling session per week;
6. to attend any recommended family counseling;
7. to begin to make necessary arrangements to pay court obligations;
8. to maintain court-approved stable housing;
9. to maintain court-approved employment, training and/or educational referrals;
10. to comply with any necessary medical referrals;
11. to write in a daily journal and bring the journal to all counseling sessions;
12. to meet with a probation officer and/or case specialist a minimum of 2 times per week; and
13. to maintain a daily curfew of 10:00 p.m.

Table 2 cont.

PHASE II Educational Period

Phase II is the educational period and the primary modality of treatment is outpatient treatment. A participant will be in this phase for 4-6, months with the goal of understanding the process of change.

Minimum requirements and treatment objectives include:

1. to attend 1 drug court session every other week;
2. to provide a minimum of 2 drug screens each week which reflect no use of drugs;
3. to attend and document a minimum 2 AA/NA meetings per week, maintain regular contact with a sponsor, and demonstrate an understanding of steps 5 through 8 of the 12 steps;
4. to attend group 2 times per week for 1 ½ hours per session;
5. to attend 1 individual counseling session every 2 weeks;
6. to attend any recommended family counseling;
7. to develop a payment plan to satisfy any restitution, court costs, and child support;
8. to maintain court-approved stable housing;
9. to maintain court-approved employment, training, and/or education referrals;
10. to comply with any necessary medical referrals;
11. to write in a daily journal and bring it to individual counseling session every 2 weeks;
12. to meet with a probation officer and/or case specialist a minimum of 1 time per week;
13. to research at least 2 areas of recreational interests and present this information to the group;
14. to demonstrate an understanding of the concept of “victim empathy” by discussing this in at least 1 individual counseling session; and
15. to maintain a daily curfew of 11:00 p.m.

PHASE III Motivational Period

Phase III is the self-motivational period and the primary modality of treatment is outpatient counseling. The projected length of time for this phase is 4 months. The goal of Phase III is to take responsibility for one’s own recovery.

Minimum requirements and treatment objectives include:

1. to attend 1 drug court session every 3 weeks;
2. to provide a minimum of 1 drug screen each week which reflects no use of drugs;
3. to attend and document a minimum of 1 AA/NA meeting per week, maintain regular contact with a sponsor, and demonstrate an understanding of steps 9 through 12 of the 12 steps;
4. to attend group 1 time per week for 1 ½ hours per session;

Table 2 cont.

5. to attend 1 individual counseling session every 3 weeks;
6. to continue attending any recommended family counseling;
7. to demonstrate an understanding of the concept of “family recovery and relapse” by discussing this in an individual counseling session;
8. to pay a substantial amount of restitution, court costs, and child support, etc.;
9. to maintain court-approved stable housing;
10. to maintain court-approved employment, training, and/or educational referrals;
11. to continue writing in a daily journal and discuss with counseling as requested
12. to meet with a probation officer and/or case specialist a minimum of 1 time per week;
13. to mentor a new drug court participant;
14. to maintain a daily curfew of 12:00 a.m.; and
15. to complete an exit calendar, exit interview, and plan for aftercare. One of the last tasks as a participant will complete in Phase III is to work in conjunction with his/her counselor on developing an aftercare plan which includes resources the participant will utilize to continue his/her recovery.

Phase Structure.

Phase I is approximately three months in length and involves intensive outpatient treatment. If the participant requires a higher level of treatment he/she is referred to a residential treatment facility. Phase I of the program is a stabilization period. The participant is “oriented to the Drug Court program, receives a handbook, and is given the opportunity to ask questions and express concerns.” Upon enrollment in the program, participants are required to cease all substance use; Phase I is where they learn which methods can be used to accomplish this task. In addition to the treatment components discussed in Key Component #4 (pg. 20) participants are also required to attend court sessions once per week in Phase I. Participants are also required to meet with the

treatment coordinator once per week as well as their probation officer (if applicable) three times per week. It is also in this first phase that participants are required to obtain an AA/NA sponsor.

In Phase II the focus is on relapse prevention. Education is the main goal of this phase and the participant is encouraged to understand “the process of change.” Phase II lasts approximately four to six months. As in Phase I, participants are required to remain compliant with the rules and regulations set forth in the Drug Court handbook. Participants who have progressed to Phase II must attend court sessions once every two weeks, meet with the treatment coordinator at least once every two weeks, and meet with their probation officer (if applicable) one to two times each week.

Phase III of the program teaches the participant how to apply the skills he/she has developed in the previous phases. The estimated length of stay in this phase is approximately four months. During Phase III, the participant is instructed to take responsibility for his/her actions and recovery. Participants in this final phase of the program must attend court sessions once every three weeks. Meetings with the treatment coordinator and probation office (if applicable) are also reduced. Before completing this phase and graduating, each participant must complete an exit interview and an exit calendar. It is during this phase that the participant will develop an aftercare plan that will help to ensure his/her recovery progress after completion of the Drug Court program.

At the time of this evaluation, the Henry/Oldham/Trimble Drug Court program had enrolled 20 participants. In-house records and monthly statistics showed 15 participants in Phase I, four participants in Phase II, and one in Phase III (Figure 8). Since the program began, seven promotions from Phase I to Phase II and one promotion from Phase II to Phase II have been awarded. There have been no demotions from Phase III to Phase II and two demotions from Phase II to Phase I. (Figure 9).

Figure 8.

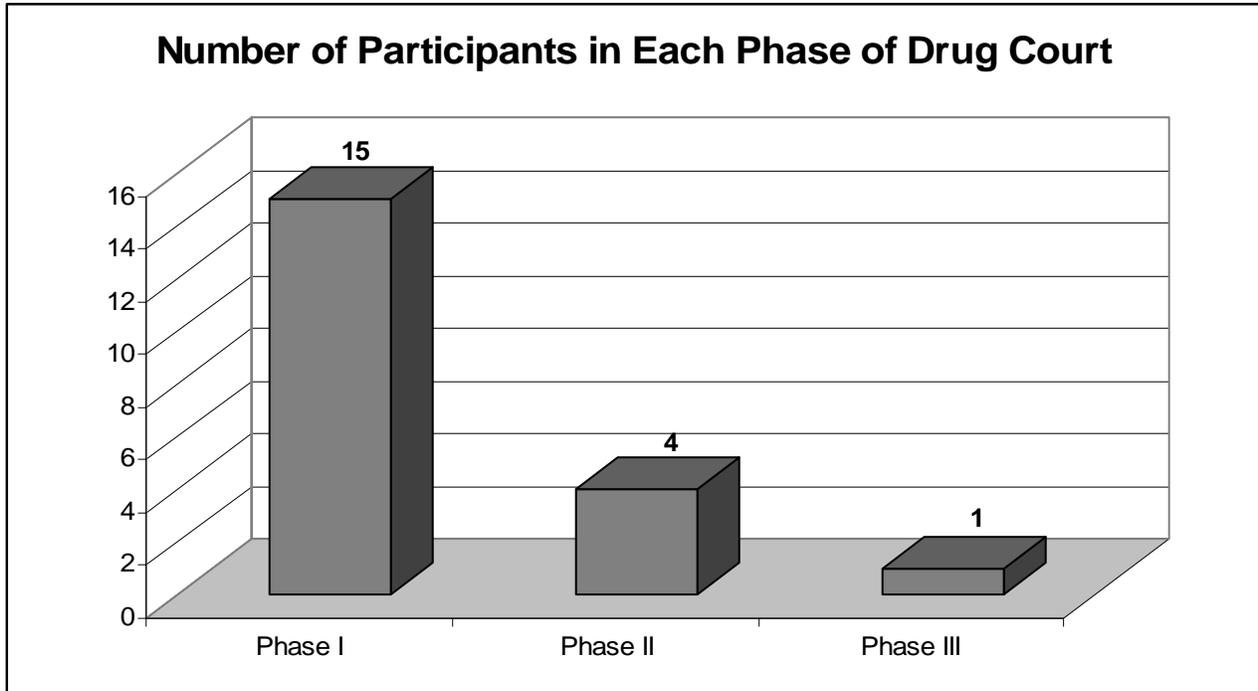
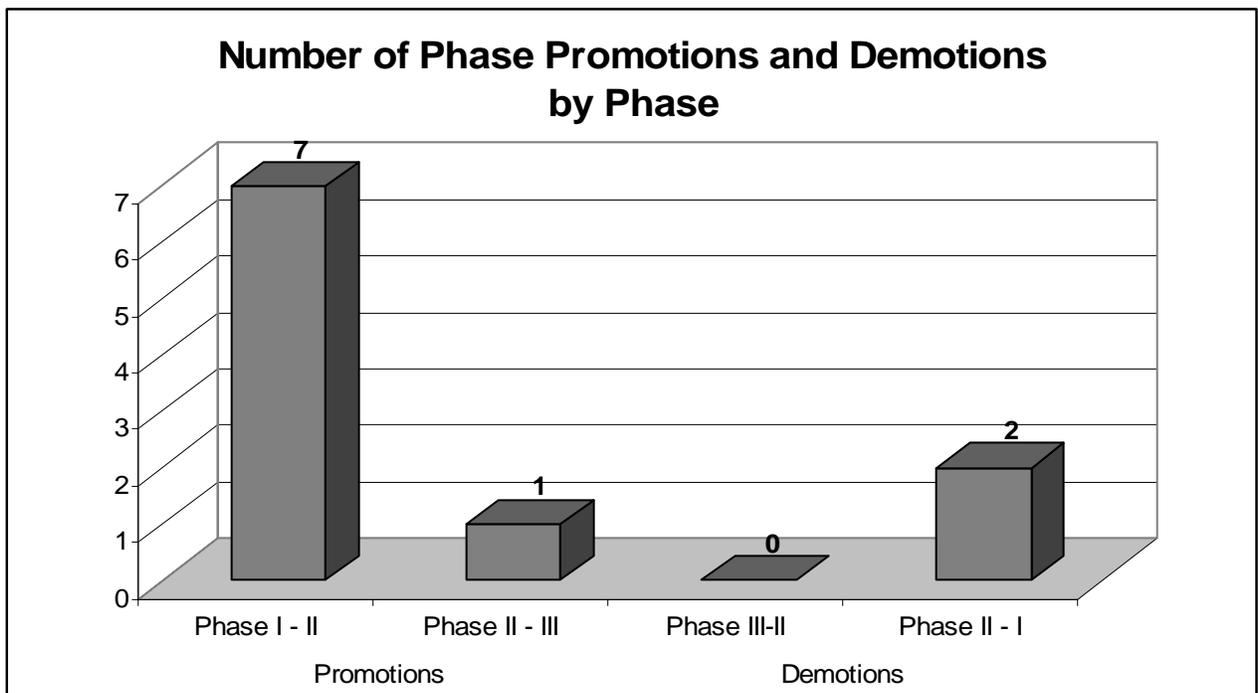


Figure 9.



Rewards.

In keeping with state and national standards, the Henry/Oldham/Trimble Drug Court maintains a system of rewards based on positive actions and achievements. Participants who remain compliant with program rules and regulations will receive various forms of recognition from program staff. Rewards typically given to clients who successfully progress through the program include extended curfew, travel passes, and tickets to sports activities. The participant may also receive verbal recognition from the Judge and members of the Drug Court team as well as applause from other participants during court sessions. Although rewards are used in a consistent and predictable manner, certain situations may arise that warrant reward. The team members discuss these on a case-by-case basis. After reaching the goals set forth by each phase and completing the required amount of treatment, a participant will be promoted to the next phase. Figure 9, above, shows a total of eight phase promotions which had been given at the time of this report.

Sanctions.

Sanctions, like rewards, are used in a timely and consistent manner. The Drug Court team has developed a graduated schedule of sanctions so that individuals are made aware of the sanctioning process from the time they begin the program (Table 3, below). In this way the team can remain consistent when conferring sanctions. Likewise, participants are less likely to question the fairness of any sanction in particular given this sanctioning schedule. Although the entire team is included when determining a particular sanction, the Judge retains the right to finalize the decision. Sanctions can range from writing or reading assignments to as much as 30 days in jail. Participants receive sanctions for failing to appear in court or at required treatment sessions, testing positive for substance use, committing new crimes, or failing to comply to Drug Court rules and regulations. Participants can also be demoted from their current phase if the team considers this a

necessary course of action. The chart below shows that, as a result of non-compliant behavior, the sanction utilized most often is incarceration. Approximately 40% of all sanctions used have included jail sentences, 34.5% were community service sanctions, while 21.8% of participants received some other sanction such as additional homework assignments or curfew restrictions. During the timeframe covered in this evaluation two phase demotions were given as sanctions (Figure 10).

Figure 10.

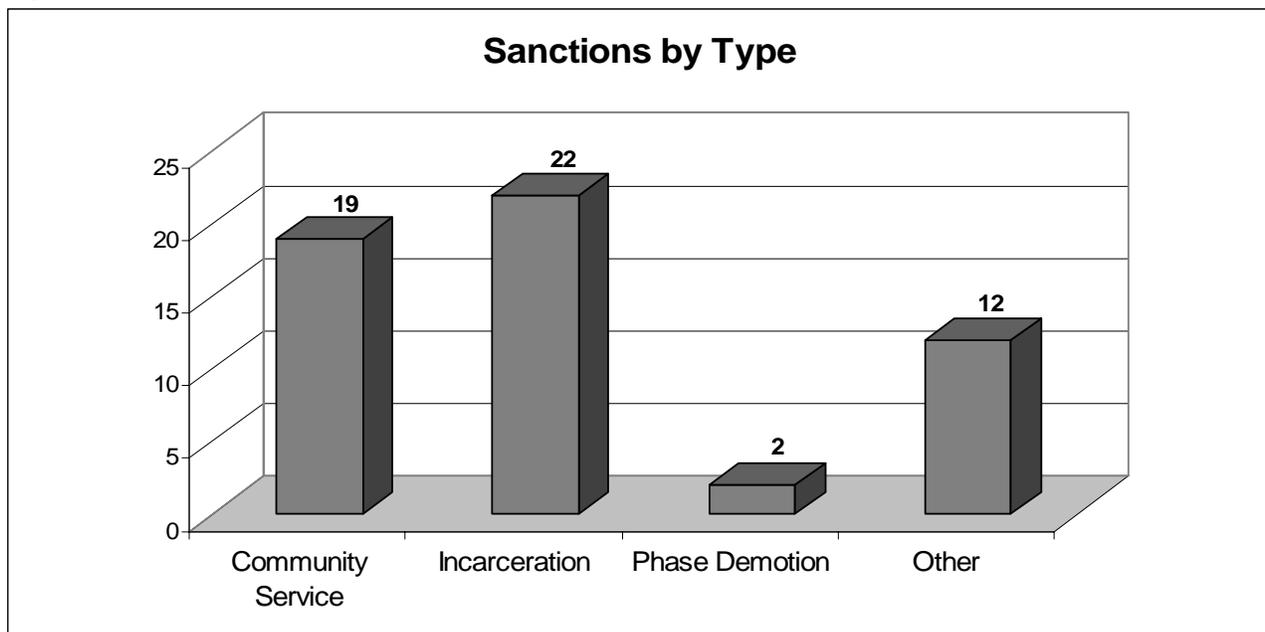


Table 3.

12TH JUDICIAL DRUG COURT SANCTIONS LIST	
<u>Violation</u>	<u>Sanction</u>
1. 1 st Missed/Positive Screen 2 nd Missed/Positive Screen 3 rd Missed/Positive Screen 4 th Missed/Positive Screen	4-8 Hours Community Service Detention: One Weekend Detention: One Week Detention: 10 Days
NOTE: Positive Screens may substitute Detention for Treatment	
2. 1 st Missed Group/AA/NA Meeting 2 nd Missed Group/AA/NA Meeting 3 or more missed Group/AA/NA Meetings	Make up with another group or 5 hours Community Service Make up with another group AND 5-10 hours Community Service Detention
3. Failure to complete assignment	Extra Assignments and readings. 2 Hours Community Service
NOTE: If assignments are not turned in during court, client has until 4:00 P.M. on the same day to bring them to the Drug Court office	
4. Failure to complete ordered Community Service	Additional hours of Community Service or Detention with work release to perform Community Service
5. Failure to complete ordered Community Service	Cooperate with Drug Court staff in locating approved housing. Temporary living arrangements at an approved shelter or halfway house.
6. Loss of job	Given 1-2 weeks to find a new job. Community Service until a job is found. If in Phase II or Phase III, possible demotion of Phase.
7. Turning self in late to jail	Extra days in custody
8. New offenses while in Drug Court	Judge review on a case-by-case basis
9. Failure to appear for court or jail	Warrant Issued
10. Tampering With Urine Screen	Possible Termination
11. Absconding from Drug Court	Warrant Issued

Program rules and termination.

Participants who regularly fail to comply with Drug Court rules may be terminated from the program. Such acts of non-compliance can include, but are not limited to, absconding from the program, consistently testing positive for substances, committing additional crimes, and engaging in violent activities. Although these acts can, in some cases, be cause for termination, each case is reviewed individually and a decision is made by the team that serves the best interest of the participant, other participants within the program, and the program itself. The participant is notified of his/her termination by the Judge during a regular Drug Court session. Participants who are on a diversion track will be returned to the regular court docket where their case will be set for final sentencing. Probation track participants who are terminated from the program will be scheduled for a probation revocation hearing.

Key Component #7. Ongoing judicial interaction with each Drug Court participant is essential.

The Henry/Oldham/Trimble Drug Court team is committed to cultivating an encouraging, yet supervisory, relationship between the judge and the participants. When the Judge relates to the participant in a supportive manner, as opposed to the adversarial relationship that the participant might expect, the participant is more likely to succeed in the program. “Drug Courts require judges to step beyond their traditionally independent and objective arbiter roles and develop new expertise” (DCPO, 1997). The Drug Court team in Henry, Oldham, and Trimble counties support this idea and consistently depend on judicial interaction to reinforce the program’s supervision. The Judge in this Drug Court helped to establish the program in this community and is committed to its success. By providing an intense level of supervision and a source of accountability, the Judge develops a relationship with each participant that aids in his/her progress in the Drug Court program. By

attending all staffing meetings and inquiring into the participants' lives, the judge monitors the participants' progress. The Judge speaks with the treatment coordinator on a regular basis and also makes himself available to all other team members. During observations of staffing and court sessions, researchers noted that the Judge played an active role in the both the operation of the program and the lives of the participants. The pre-court staffing session takes place in the courtroom and all members of the team were present. The Judge inquired into the progress of each participant while allowing team members to voice opinions and make recommendations. General announcements were made first, including the discussion of a new policy regarding diluted urinalysis samples. Pending the Judge's approval, the new policy would impose a warning for the first occurrence, a sanction for the second occurrence along with an order from the bench for an evaluation by a doctor to rule out medical causes, and jail time for the third occurrence. Following the discussion of this and other new program business, the treatment coordinator introduced each participant's case and progress since his/her last court appearance. Possible rewards and sanctions were discussed as well as the education, employment, and social status of the participants. Treatment providers representing Seven Counties Services, Inc., provided a detailed account of each participant's status. The Judge listened attentively to each progress report and, after considering the input of all team members, decided on a course of action for each participant.

Immediately following the staffing, participants were called into the courtroom and the Drug Court session began. With the exception of the attorneys and the therapist, all other team members moved to the rear of the courtroom so that the participants could sit directly in the front of the Judge and remain active in the court session. University of Kentucky researchers noted that the Judge addressed the participant first and maintained eye contact throughout their interaction. Participants rose and stood before the Judge while their case was presented and, after being dismissed by the Judge, remained in the courtroom throughout the entire court session.

Key Component # 8. Monitoring and evaluation measure the achievement or program goals and gauge effectiveness.

This report is part of an on-going evaluation of the Henry/Oldham/Trimble adult Drug Court conducted by the University of Kentucky Center on Drug and Alcohol Research. The current evaluation includes data from the court's inception in December, 2003, through February, 2005. This report is submitted per Bureau of Justice Assistance requirements for an externally-conducted process evaluation of all federally-funded Drug Courts.

One piece of this process evaluation is a researcher-led focus group that includes all Drug Court team members. The focus group follows a Logic Model approach (adopted from Harrell, 1996) which allows the Drug Court to participate in its own program development and evaluation. The researcher asks the treatment team to brainstorm and identify various key components of their program. These ideas are revisited as part of a future outcome evaluation in order to examine which components have changed or remained static, which methods did and did not succeed, and what obstacles they felt the program needed to overcome in the future. Program development and evaluation is an integral part of every new program's development process and is essential to program sustainability.

The end result of this focus group is a one-page graphic representation of the important elements of the team's mission. The team was asked to identify their target population, discuss the short- and long-term goals for their participants, therapeutic activities, community resources available to the program, characteristics of their participants, factors that influenced Drug Court activities, and concerns regarding program operations.

Target Population.

Drug Court team members began by discussing the target population of the program. Males and females over the age of eighteen are admitted into the Drug Court. Although staff members

stated that residents of the 12th circuit are preferable, they will consider individuals living outside the area. All participants enrolled in the Drug Court have either violated their parole or have been charged with a Class D felony. In keeping with Bureau of Justice Assistance mandates, individuals who are classified as “violent offenders” are excluded from the Drug Court program. Team members also noted that potential candidates must meet chemical dependency criteria. In cases of drug trafficking, the team examines the individual’s previous criminal and substance use history. If the individual does not present with substance abuse issues and is selling drugs simply for profit, he/she is excluded from participation. However, if the individual is clearly trafficking to support their own drug habit, the Drug Court requests that the charges be amended to possession and the individual is then considered for enrollment. Some team members also noted that individuals with severe cognitive impairments are handled on a case-by-case basis when being considered for the Drug Court program. If the particular individual “could not benefit from the services provided by the program” they are no longer considered as appropriate candidates.

Initial Goals.

The Drug Court team also discussed the short-term goals for the participants who have been accepted into the program. The team agreed that the primary concern was the reduction and cessation of substance use. Participants are required from the outset of the program to submit negative urine screens. As relapse is expected during the program, team members encourage participants to “take one day at a time – just like AA says.” All participants are required to call in daily to determine if they are scheduled for a drug test that day. Participants are also expected to keep all appointments, including appearance at court sessions, attendance at individual and group therapy sessions, and any other required appointments. The Drug Court team also encourages participants to be respectful and “meet a minimum behavioral standard” throughout their participation in the program. Participants are also informed that they must cease any criminal

activity and that any new charges will result in sanctioning and possible termination from the program. Participants are required to obtain stable housing and employment. Participants who are in school may be required to obtain part-time employment, but this is handled on an individual basis. Community service is mandatory if the participant is not employed or in school. Participants are also required to attend AA/NA meetings and obtain a sponsor. Daily journaling is required as well as additional writing assignments given to the participant by the therapist, treatment coordinator, or judge. The team also mentioned that participants are expected to follow the requirements of each phase as well as any additional responsibilities that are deemed appropriate for the participant's progress.

Long-Term Goals/Outcomes.

By accomplishing these short-term goals, participants can progress through all three phases and move toward graduation. In order to successfully complete the program, participants must reach certain long-term goals established by the Drug Court program. During the focus group, team members noted that a key objective for participants is to have "some footing in recovery." They agreed that participants need to have a 6-month period of abstinence before graduating. Participants are also required to obtain and maintain stable employment. One team member stated "hopefully we have provided them appropriate referrals for educational and vocational training or job skills analysis. It's so self-reinforcing – they go and really feel good about gaining some skills." Other staff members agreed that employment and educational training is an important component of the Drug Court. The Henry/Oldham/Trimble Drug Court program also stresses the importance of becoming involved in social activities that do not include substances. Although mentoring new Drug Court participants is not a requirement of the program, graduating participants are encouraged to take part in this activity. Another long-term goal discussed during the focus group dealt with the

halt of criminal activity. Team members agreed that the program stresses the importance of a drug-free and crime-free life. A team member pointed out that, “we don’t want to teach people how to use without getting involved in the criminal justice system – but to lead a drug free life.”

Treatment Activities.

Team members were next asked what type of therapeutic activities participants were involved in to help them in reaching their abstinence goals. All participants begin the program by attending six hours of group therapy per week. As participants progress through the programs, the group treatment requirements are lowered. In Phase II participants attend three hours per week and in Phase III they attend one and a half hours of group therapy per week. Individual therapy sessions are also provided if requested by the participant or deemed appropriate by the therapist. When a participant requires more intensive substance abuse treatment the Drug Court program works with JADAC and Ten Broeck, area residential treatment facilities, to provide the necessary level of treatment. Other treatment components are available, such as a three-hour per month family session and a women’s based treatment session which meets once per week for an hour and a half. Participants are also required to attend AA/NA meetings on a regular basis. Team members agreed that this posed a problem for Drug Court participants as there are no meetings in Henry, Oldham, or Trimble counties, so participants must travel outside the district. Additional recovery groups such as Creative Spirit and New Directions in Life are located in the area and participants are encouraged to attend. The Drug Court also requires participants to complete written assignments. These assignments may be in the form of curriculum coursework, chemical use histories, journals, and reports on treatment steps. Team members also noted that they are attempting to incorporate an art therapy component into the Drug Court program.

Available Resources

Drug Court programs across the state often rely on community resources to supply valuable services to participants. The Henry/Oldham/Trimble Drug Court has worked to establish relationships with numerous community organizations in an attempt to provide participants with a vast array of benefits. Team members agreed that adult educational and employment programs are crucial to a participant's success. The Board of Education and Jefferson Community College works with the Drug court to provide educational opportunities to participants. Links with employment services in the area such as Adecco, CBS, and vocational rehabilitation agencies have also been established. The police department in each county assists the Drug Court with curfew checks and site visits in addition to attending court and staffing sessions in order to provide input regarding participant status and referral suggestions. The probation/parole office also assists the Drug Court by conducting drug screens, site visits, and attending court sessions and staffings. Team members also noted that the local ministry is an excellent resource, with the churches providing community service opportunities and non-substance related network connections. Other agencies that provide community services options include Goodwill, the animal control shelter, and the local jails. Participants can also contact the Tri-County Community Action Center and the Red Cross for clothing, emergency funds for utilities and similar necessities. During this discussion the staff stated that they would like to offer medical services to Drug Court participants and hopes to do so in the future. One team member stated that it would be beneficial "to have a physician we could refer people to for health screens."

Client Background Characteristics.

The next topic discussed in the focus group was the individual characteristics of participants who were referred and subsequently enrolled in the Drug Court program. Team members stated that

a large percentage of participants were white males who were long term residents of the area. Most participants are unemployed prior to entering the program. This can be a result of having been incarcerated prior to Drug Court entry; however, team members noted that many participants have only had part-time or erratic employment and “a lot of them have never had a steady job.” Cocaine and marijuana were identified by the participants as their drugs of choice. Staff also noted that, surprisingly, many participants are injection drug users, and that they will “just use anything they can get their hands on.” Most participants are from low to middle socio-economic backgrounds. Participants range in age from 18 to 50 and most have a high-school education or GED.

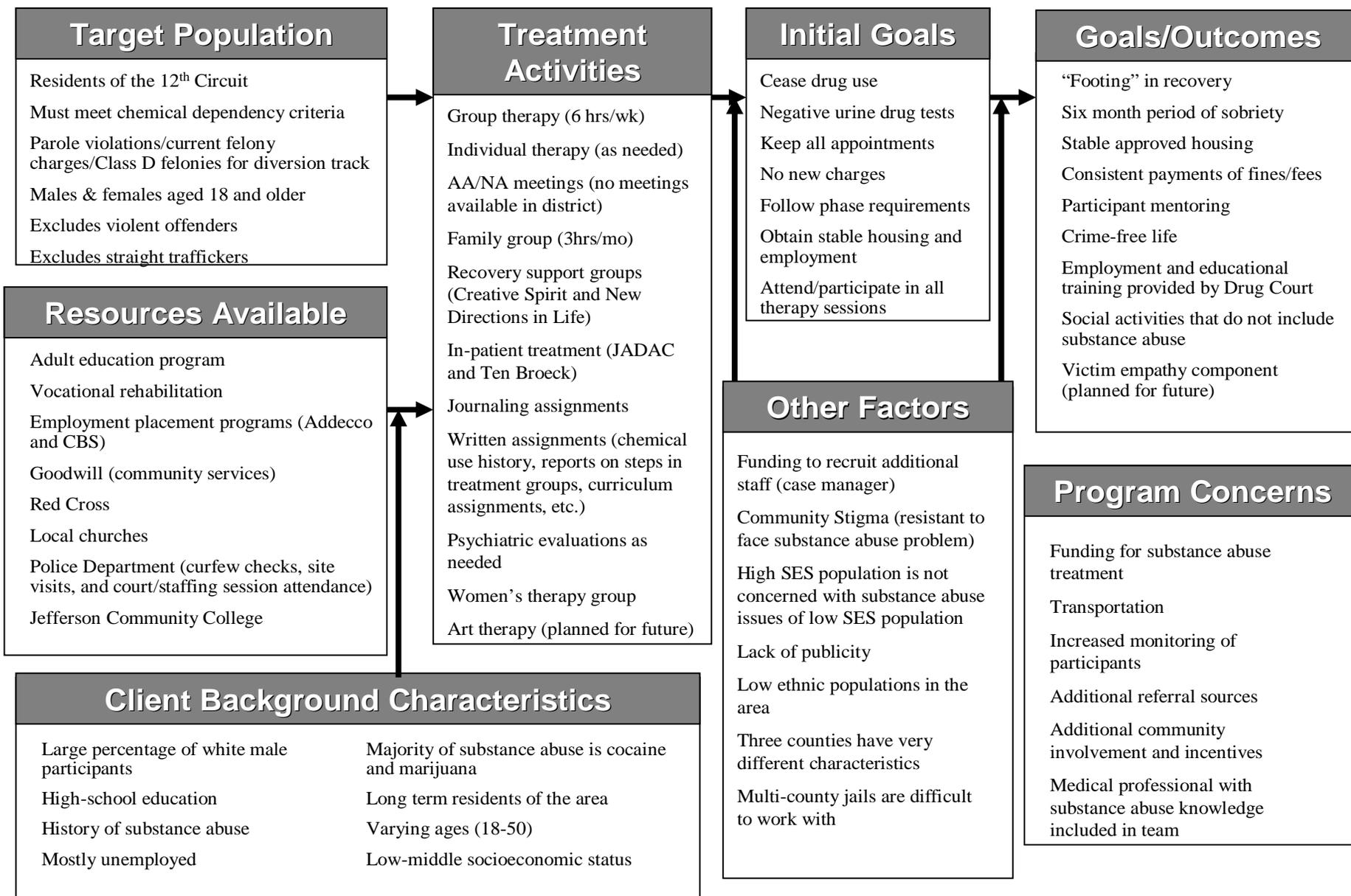
Other Factors.

The Drug Court team was asked to identify any factors that may influence the success or failure of the participants or program. Staff members immediately recognized the need for community education. They believed that there is a stigma surrounding substance abuse and substance abuse treatment. Team members also stated that they have noticed a lack of interest among higher income residents toward the substance abuse issues of those in lower income brackets. A lack of media attention was also discussed. Some staff felt that a number of individuals working with the Drug Court program wanted to “stay away from media exposure.” Team members also agreed that Henry, Oldham, and Trimble counties have very different characteristics, which can cause difficulties in terms of program management and community involvement.

Program Concerns.

The last topic covered in the focus group dealt with any additional concerns which had not been previously mentioned and which team members believe are important issues for the Drug Court. As with many Kentucky Drug Courts, funding for continued treatment is a concern. Staff

members want to ensure that there are “enough funds to provide the treatment [the participants] need.” Another concern that occurs frequently in Kentucky is the lack of transportation in rural areas. Team members also indicated their desire to improve drug testing and monitoring procedures. They believed that testing should be more random and that participants should be monitored on a more intensive basis. This led other team members to voice their concern over staffing issues. As the number of participants continues to grow, team members are concerned that additional staffing will be necessary in order to properly monitor participant status and program needs. As mentioned previously there is a lack of AA and NA meetings in the area. Although team members stated that “getting new programs started in this area is difficult” they would like to see more AA/NA options made available to Drug Court participants. Staff repeated their concern regarding the lack of community awareness and hoped to continue to educate residents about the persistent substance abuse problems in each county and the need for treatment. A final remark was made regarding the need for medical personnel who have experience with substance abuse issues.



During Program Impact and Outcomes.

As with all Kentucky Drug Courts, the primary focus of the Henry/Oldham/Trimble Drug Court is to help participants become clean and sober and cease criminal activities. In order to achieve this goal, the Drug Court team has combined substance abuse treatment and intense supervision to effectively serve the needs of all participants. The following data regarding program retention is one measure that provides insight into the progress of participants during their involvement in Drug Court.

Retention in Drug Court.

Retention in Drug Court, similar to other substance abuse treatment programs, has been correlated with more successful long-term outcomes for participants (Peters, Hawes, and Hunt, 2001; see related substance abuse literature including Zhang, Friedmann, and Gerstein, 2003 and Simpson, Joe, and Rowan-Szal, 1997). The Henry/Oldham/Trimble Drug Court team is committed to not only engaging participants in the program but also retaining them until graduation. For the majority of the reporting period (December, 2003 – February, 2005) the number of active participants in the Drug Court program has risen steadily.

Figure 11.

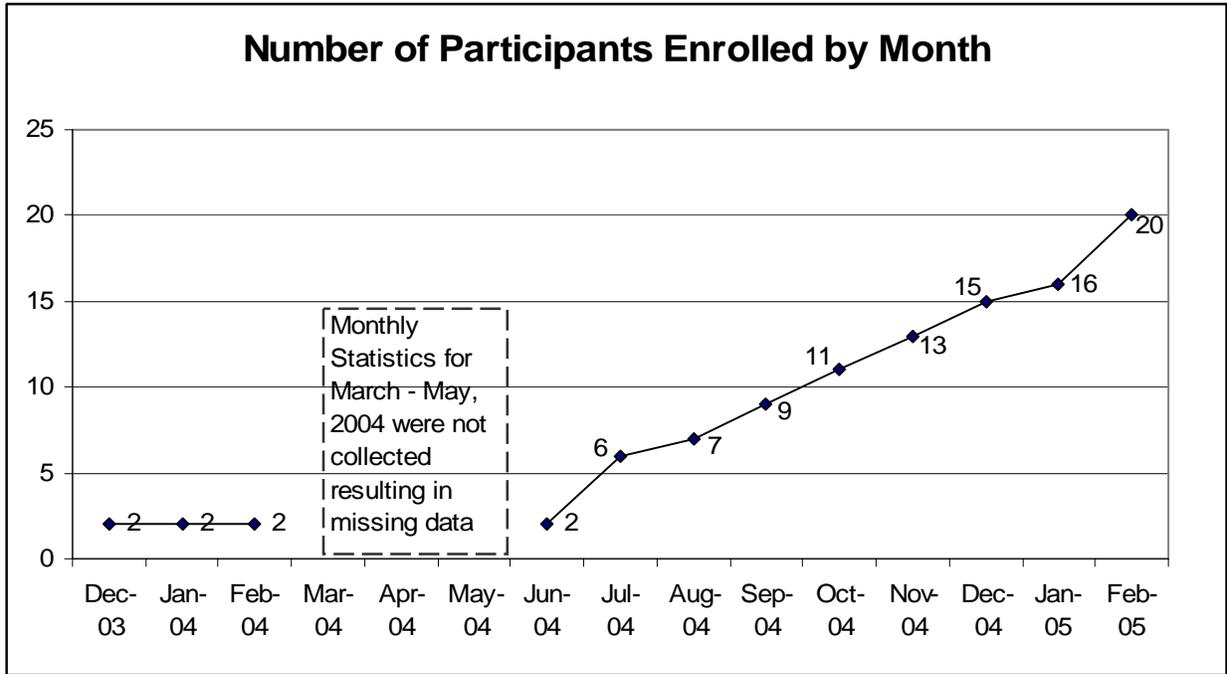
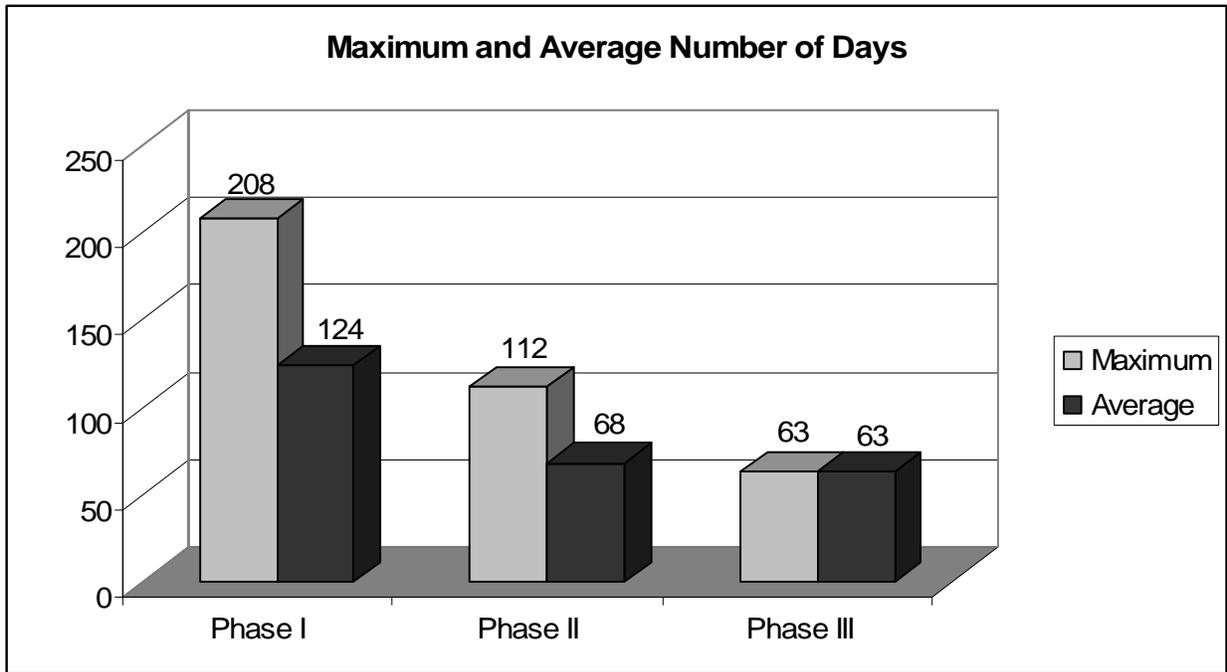


Figure 12.



Graduates.

At the time of this report the Henry/Oldham/Trimble Drug Court had not graduated any participants. However, the team has developed a plan for future graduation ceremonies. When a participant graduates there will be a formal ceremony during the regular Drug Court session with an informal reception immediately following. During the ceremony the participant will be allowed to speak to guests, team members, and other participants. A guest speaker from the community will also be invited to attend and participate in the ceremony. The participant will be allowed to invite any family members or friends that he wishes to be present. Community leaders, businesses, and local agencies involved in Drug Court will also be invited as well as the media, if the participant so chooses. The participant will be given a token of achievement to commemorate his treatment progress and graduation from the Drug Court program.

Employment.

Employment problems are a reliable predictor of early dropout from treatment among adults in community-based substance abuse treatment programs (Platt, 1995). The participants in the Henry/Oldham/Trimble Drug Court are required to obtain and maintain employment throughout the length of their stay in the program. A participant who is enrolled in school is allowed to work on a part-time basis; however, all other individuals not seeking to further their education must obtain a full-time job.

Participants are required to be employed for a minimum of 30 hours per week and must maintain this employment status in order to progress to Phase II of the program. Team members report that, at times, a participant's employment schedule has interfered with court sessions and treatment meetings, but that all parties have worked together to see that all requirements are

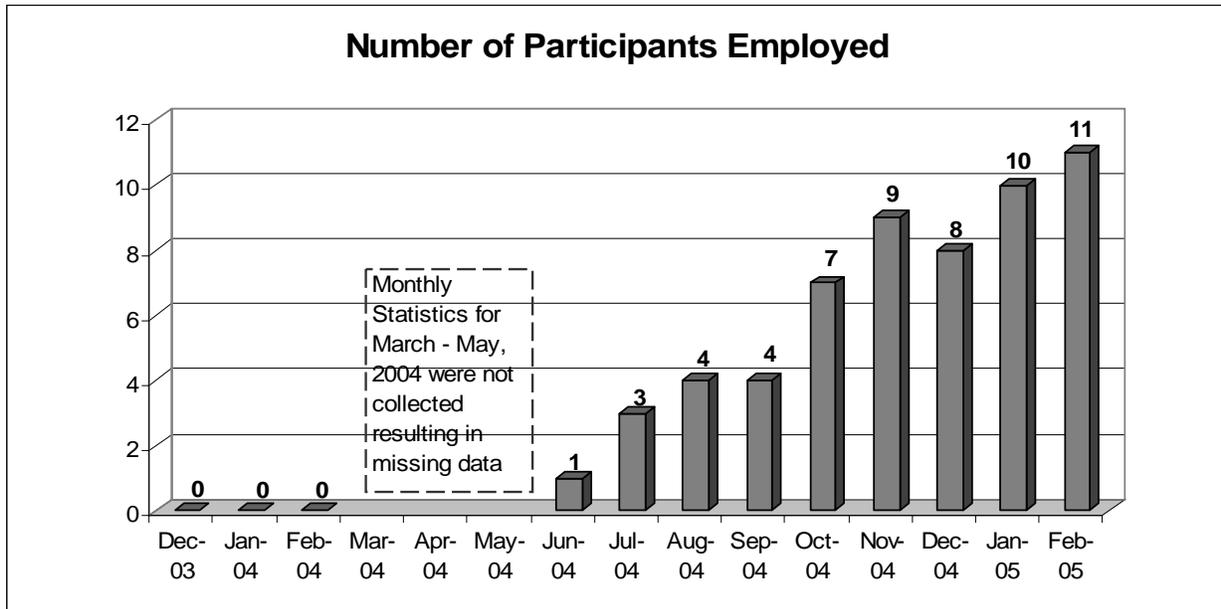
successfully fulfilled. Adjustment is required on both sides; while the participant is obligated to comply with all Drug Court requirements, the treatment coordinator and the rest of the team tries to accommodate the participants' schedule as much as possible.

Each participant's employment is verified by the treatment coordinator every two weeks. This is accomplished via phone calls to the employer, pay stubs, and/or site visits. In the case that a participant has trouble finding a job, he/she is referred to an employment office or a vocational rehabilitation center. The Drug Court team also continues to network within the community in order to partner with businesses that are willing to offer jobs to Drug Court participants.

The main employers in the area are manufacturing companies and various hospitality businesses such as restaurants and hotels. Many employers enforce policies which prohibit the hiring of felons. Team members report that, quite often, there is a stigma attached to individuals with previous felony convictions and many employers are hesitant to work with the Drug Court. In order to decrease this stigma, the Drug Court team meets with various businesses to educate them about the advantages of hiring Drug Court participants. It is hoped that, in time, employers stand behind the program and offer more jobs to Drug Court participants.

In the case that a participant does not obtain or fails to maintain employment, he/she is required to perform community service work. At the time of this report, 10 participants were employed full time and one participant was employed part-time. Four participants were enrolled in school on a full-time basis and therefore are not required to hold a full-time job. The remaining six participants were in the process of finding employment. The chart below illustrates that as enrollment increases, employment rates increase as well.

Figure 13.



Key Component # 9. Continuing interdisciplinary education promotes effective Drug Court planning, implementation, and operations

Each member of the Henry/Oldham/Trimble Drug Court team understands the importance of continuing education regarding Drug Court operations. Several members of the team attended the national Drug Court trainings provided by the Drug Court Planning Initiative (DCPI). The Judge and the treatment coordinator also attended the national DCPI Drug Court conference held in Milwaukee in June, 2004. Team members plan on attending future trainings, including the treatment coordinator who intends to take part in the DCPI national coordinator training workshop. By continuing their education, team members hope to increase their knowledge of substance use/abuse, Drug Court procedures, and general treatment principals which will aid them in developing a cohesive, interdisciplinary, and successful Drug Court program.

Key Component # 10. Forging partnerships among Drug Courts, public agencies, and community-based organizations generates local support and enhances Drug Court effectiveness.

A diverse group of professionals have been involved with the Drug Court since the early planning stages. Members from the Public Defenders office, a judge from the 12th Circuit Court, family court representatives, and treatment professionals have long been committed to establishing a successful program in this area. The team also includes members of the probation and parole office, sheriff's office, treatment providers, and Commonwealth Attorney's office. This combination of diverse professions and interests help ensure that the Henry/Oldham/Trimble Drug Court represents all facets of the judicial and treatment elements necessary to a successful operation.

During the focus group, team members reported that developing relationships with area businesses and agencies has long been a priority. The team has demonstrated this belief by working to forge links with both public and private organizations. The local police department is a critical component of the Drug Court team and provides valuable services such as site visits, curfew checks, and participation in staffing and court sessions. The sheriff's department also brings a wealth of information to the team by providing insight into the community, the participants, and possible Drug Court candidates. Links with employment services and vocational rehabilitation programs have been established by the Drug Court team to assist participants obtain part- and full-time employment. Adult education programs have been enlisted to help participants complete their high-school education, GED, or further their education by enrolling in vocational or college classes. Community services agencies such as Goodwill and the Red Cross have proven to be valuable resources when participants need clothing, food, or monetary assistance. The Drug Court team has also joined with Seven Counties Services, Inc. to

provide participants with individual, group, and other treatment options. Relationships with residential facilities such as JADAC and Ten Broeck have been formed for participants who need a more intensive level of substance abuse treatment.

SUMMARY AND CONCLUSION

A diverse group of professionals from Henry, Oldham and Trimble Counties have joined together to establish a cohesive and dedicated Drug Court program. The Drug Court has changed and progressed since its creation. A wider range of sanctions has been developed in order to appropriately handle infractions and acts of non-compliance, and the addition of a treatment coordinator has allowed the Drug Court team to provide more supervision and accountability with the participants. Finally, community resources have increased to include numerous public and private organizations interested in assisting Drug Court participants.

The following information discusses the individual strengths of the Henry/Oldham/Trimble Drug Court program as well as provides recommendations for the continuation and improvement of the program.

Strengths.

The individuals who make up this Drug Court team work well together and are committed to not only developing a successful program, but also helping participants to become clean and sober. Each member of the team provides valuable insight while keeping an open mind regarding the opinions of others. The Judge is an active member of the team and works toward developing a personal, yet supervisory, role with each participant. Both defense counsel and prosecutor approach the Drug Court with a non-adversarial relationship and strive to do what is best for all participants while protecting the rights of their clients. The treatment coordinator is a

vital member of the team and continually strives to effectively monitor and provide assistance to each participant. Drug Court files are meticulously maintained and efforts are continually made to improve record-keeping techniques. Program procedures are thoroughly considered and discussed by all team members. As seen by the data throughout this evaluation, the Drug Court continues to enroll and move participants through each of the phases. Although the Drug Court has encountered many challenges, such as a lack of transportation and an ongoing struggle to educate the community, the team strives toward meeting and overcoming those challenges.

Recommendations.

1. Continue operation of Drug Court Program in accordance with the ten Key Components.
2. Develop methods to increase participant enrollment in order to reach target goal established in the original grant application. It is recommended that the team review and resolve any individual or program-related issues which may be hindering the enrollment process.
3. Continue to develop relationships with area businesses and local community service agencies in order to provide participants with a variety of employment, education, and treatment options.
4. Recruit male staff member to assist with supervision of the growing number of participants, namely, drug tests, curfew checks, and site visits.

References Cited

- Belenko, S. (2001). *Research on Drug Courts: A critical review 2001 update*. New York: Center on Addiction and Substance Abuse at Columbia University.
- Harrell, A. (1996). *Evaluation strategies for human services programs*. Washington, D.C.: Urban Institute.
- Hora, P. (2002). A dozen years of drug treatment courts: Uncovering our theoretical foundation and construction of a mainstream paradigm. *Substance Use and Misuse*, 37, 1469-1488.
- Kentucky Administrative Office of the Courts. (last updated 2/2004). *Kentucky Drug Courts*. (Map). Retrieved 3/14/05 from:
http://www.kycourts.net/AOC/drugcourt/AOC_DC_Sites.shtm
- Kentucky Atlas and Gazetteer. (undated). Retrieved 2/3/05 from:
<http://www.uky.edu/KentuckyAtlas/>
- Kentucky Department of Corrections. (2002). *Recidivism 1999-2000*. Frankfort, KY: Author.
- Kentucky State Police. (2004). *Crime in Kentucky: Commonwealth of Kentucky 2003 crime report*. Frankfort, KY: Author. Retrieved from:
<http://www.kentuckystatepolice.org/pdf/crimefacts2003.pdf>
- Leukefeld, C.G., Logan, T.K., Farabee, D., Watson, D., Spaulding, H., & Purvis, R. (1999). Drug dependency and HIV testing among state prisoners. *Population Research and Policy Review*, 18 (1/2), pp. 55-69.
- Logan, T.K., Williams, K., Leukefeld, C., & Minton, L. (2000). A process evaluation of a Drug Court: methodology and results. *International Journal of Offender Therapy and Comparative Criminology*, 44(3), pp. 369-394.
- Logan, TK, Hiller, M. L., Leukefeld, C. G., & Minton, L. (in press). Drug Court outcomes: Criminal justice involvement, social adjustment, and self-reported drug use. *Journal of Offender Rehabilitation*.
- Logan, T.K. & Messer, J. (2001). *Kentucky Drug Court Addiction Severity Index*. Lexington, KY: Center on Drug and Alcohol Research.
- Peters, R.H., Haas, A.L., & Hunt, M.W. (2001). Treatment dosage effects in drug court programs. In Hennessy, J.J. & Pallone, N.J. (eds.). *Drug Courts in operation: Current research*, pp. 63-72. New York, NY: The Haworth Press.

- Satel, S.L. (1998). Observational study of courtroom dynamics. *National Drug Court Institute Review*, 1(1), 43-72.
- Simpson, D. D., Joe, G. W., & Rowan-Szal, G. A. (1997). Drug abuse treatment retention and process effects on follow-up outcomes. *Drug and Alcohol Dependence*, 47, 227-235.
- United States Census Bureau. (last revised 2/1/05). *US Census State and County Quick Facts for Adair County, Kentucky*. Retrieved from: <http://quickfacts.census.gov/qfd/states/21/21209.html>
- United States Census Bureau. (last revised 2/1/05). *US Census State and County Quick Facts for Casey County, Kentucky*. Retrieved from: <http://quickfacts.census.gov/qfd/states/21/21239.html>
- United States Department of Justice. (1997). *Defining Drug Courts: the key components*. Washington, DC: Department of Justice, Office of Justice Programs, Drug Courts Program Office.
- Zhang, Z., Friedmann, P.D., and Gerstein, D.R. (2003). Does retention matter? Treatment duration and improvement in drug use. *Addiction*, 98, 673-684.