Thirty-First Judicial District DUI / Drug Court
EVALUATION

Deliverable Two: First Phase of Process Evaluation—Report on compliance with the *Ten Components of Drug Courts* (Office of Justice Programs, 1997). Conducted Fall of 2009.

Based on Defining *Drug Courts: The Key Components*. U.S. Department of Justice—Office of Justice Programs; National Association of Drug Court Professionals; Drug Court Standards Committee. Developed in January, 1997.

Preface

The Key Components defining drug courts are designed to be inspirational, defining best practices. The results of this assessment should identify areas where benchmarks are not met—this should not be viewed as failure; rather it should be seen as an opportunity from which the drug court can improve. The data herein include individual responses confidentially collected from eight members of the 31st Judicial District Drug Court Team.

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planning, implementation, and operations
SCORE: 4.10/5

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SCORE: 3.46/5

Key Component #1: Overall score 4.43/5
Drug courts integrate alcohol and other drug treatment services with justice system case processing.

Purpose
The mission of drug courts is to stop the abuse of alcohol and other drugs and related criminal activity. Drug courts promote recovery through a coordinated response to offenders dependent on alcohol and other drugs. Realization of these goals requires a team approach, including cooperation and collaboration of the judges, prosecutors, defense counsel, probation authorities, other corrections personnel, law enforcement, pretrial services agencies, TASC programs, evaluators, an array of local service providers, and the greater community. State-level organizations representing AOD issues, law enforcement and criminal justice, vocational rehabilitation, education, and housing also have important roles to play. The combined energies of these individuals and organizations can assist and encourage defendants to accept help that could change their lives.
The criminal justice system has the unique ability to influence a person shortly after a significant triggering event such as arrest, and thus persuade or compel that person to enter and remain in treatment. Research indicates that a person coerced to enter treatment by the criminal justice system is likely to do as well as one who volunteers.
Drug courts usually employ a multi-phased treatment process, generally divided into a stabilization phase, an intensive treatment phase, and a transition phase. The stabilization phase may include a period of AOD detoxification, initial treatment assessment, education, and screening for other needs. The intensive treatment phase typically involves individual and group counseling and other core and adjunctive therapies as they are available (see Key Component #4). The transition phase may emphasize social reintegration, employment and education, housing services, and other aftercare activities.

Performance Benchmarks
A. Initial and ongoing planning is carried out by a broad-based group that meets regularly.
SCORE: 4.75/5
B. Court and treatment providers maintain ongoing communication about general problems that arise.
SCORE: 5.00/5

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C. The drug court's mission goals, eligibility criteria, operating procedures, and performance measures are collaboratively developed and defined.

SCORE: 4.38/5

D. Documents exist that detail drug court's mission, goals, eligibility criteria, operating procedures, and performance measures.

SCORE: 4.38/5

E. Mechanisms exist for shared decision-making and conflict resolution among drug court team members.

SCORE: 3.63/5

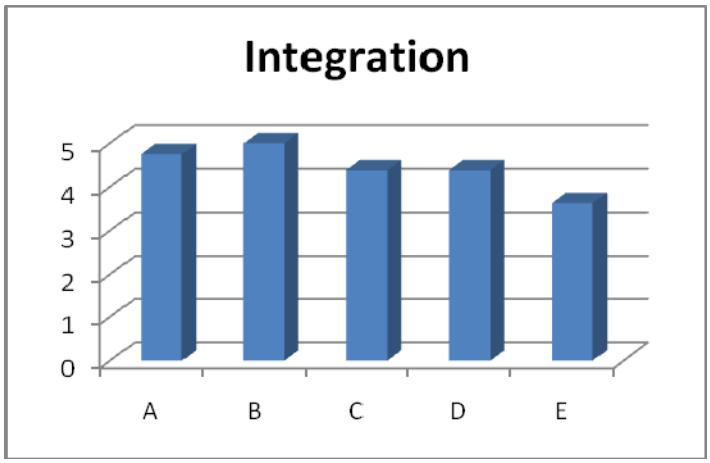

Figure 1: Key Component 1—Self-Assessment Scores by Integration.
Meyer's Instrument; conducted Fall 2009 via online tool.

Key Component #2: Overall score 4.13/5

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

Purpose

To facilitate an individual's progress in treatment, the prosecutor and defense counsel must shed their traditional adversarial courtroom relationship and work together as a team. Once a defendant is accepted into the drug court program, the team's focus is on the participant's recovery and law-abiding behavior—not on the merits of the pending case.

The responsibility of the prosecuting attorney is to protect the public's safety by ensuring that each candidate is appropriate for the program and complies with all drug court requirements. The responsibility of the defense counsel is to protect the participant's due process rights while encouraging full participation. Both the prosecuting attorney and the defense counsel play important roles in the court's coordinated strategy for responding to noncompliance.

Performance Benchmarks

A. Prosecutors, defense counsel, and judge are assigned to drug court for sufficient time to insure team-building, stability, and consistency.

SCORE: 4.63/5

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B. Prosecutors and defense counsel participate in program design, eligibility criteria, and case processing policies and procedures.

SCORE: 4.38/5

C. Prosecutors and defense counsel have a memorandum of understanding regarding defendants' admissions of AOD use during court reviews.

SCORE: 3.63/5

D. Defense counsel explains to defendant the drug court concept and procedures and advises client of alternative courses of action, including treatment and benefits of sobriety.

SCORE: 3.88/5

E. Prosecuting attorney promptly determines eligibility and participates in a coordinated strategy for responding to AOD use.

SCORE: 4.13/5

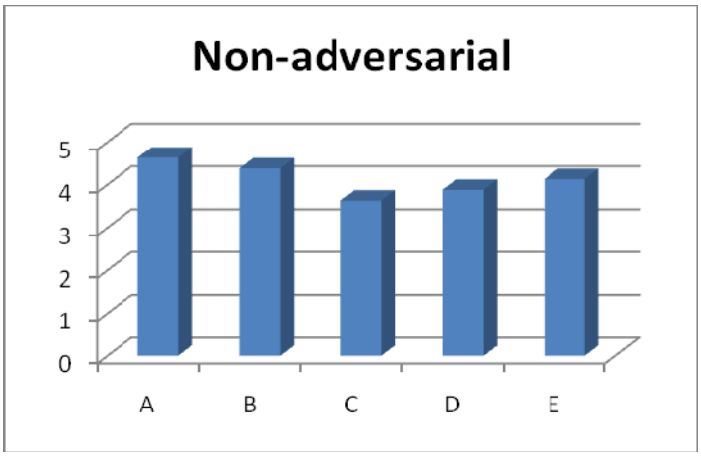

Figure 2: Key Component 2—Self-Assessment Scores by Non-adversarial. Meyer's Instrument; conducted Fall 2009 via online tool.

Key Component #3: Overall score 4.03/5

Eligible participants are identified early and promptly placed in the drug court program.

Purpose

Arrest can be a traumatic event in a person's life. It creates an immediate crisis and can force substance abusing behavior into the open, making denial difficult. The period immediately after an arrest, or after apprehension for a probation violation, provides a critical window of opportunity for intervening and introducing the value of AOD treatment. Judicial action, taken promptly after arrest, capitalizes on the crisis nature of the arrest and booking process.

Rapid and effective action also increases public confidence in the criminal justice system. Moreover, incorporating AOD concerns into the case disposition process can be a key element in strategies to link criminal justice and AOD treatment systems overall.

Performance Benchmarks

A. Eligibility screening is based upon written criteria and criminal justice personnel screen cases for referral.

SCORE: 4.25/5

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B. Eligible participants are promptly advised about program requirements and merits of participating.

SCORE: 4.75/5

C. Trained professionals screen eligible drug court individuals for AOD problems and treatment suitability.

SCORE: 4.38/5

D. Initial appearance before drug court judge occurs immediately after arrest or apprehension.

SCORE: 2.75/5

E. The court requires that eligible participants enroll in AOD services immediately.

SCORE: 4.00/5

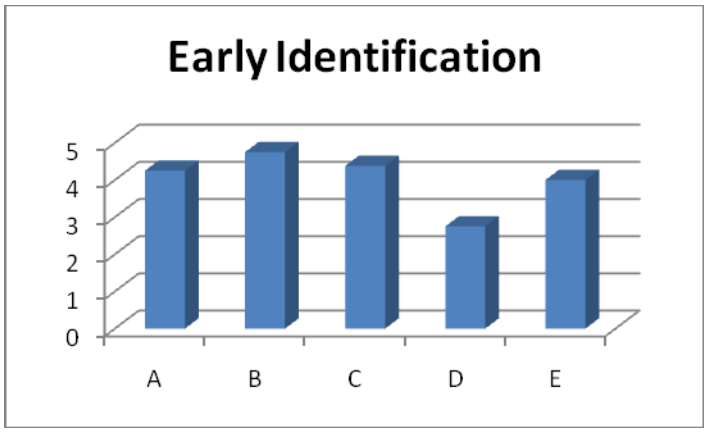

Figure 3: Key Component 3—Self-Assessment Scores by Early Identification. Meyer's Instrument; conducted Fall 2009 via online tool.

Key Component #4: Overall score 3.92/5

Drug courts provide access to a continuum of alcohol, drug, and other related treatment and rehabilitation services.

Purpose

The origins and patterns of AOD problems are complex and unique to each individual. They are influenced by a variety of accumulated social and cultural experiences. If treatment for AOD is to be effective, it must also call on the resources of primary health and mental health care and make use of social and other support services.

In a drug court, the treatment experience begins in the courtroom and continues through the participant's drug court involvement. In other words, drug court is a comprehensive therapeutic experience, only part of which takes place in a designated treatment setting. The treatment and criminal justice professionals are members of the therapeutic team.

The therapeutic team (treatment providers, the judge, lawyers, case managers, supervisors, and other program staff) should maintain frequent, regular communication to provide timely reporting of a participant's progress and to ensure that responses to compliance and noncompliance are swift and coordinated. Procedures for reporting progress should be clearly defined in the drug court's operating documents.

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While primarily concerned with criminal activity and AOD use, the drug court team also needs to consider co-occurring problems such as mental illness, primary medical problems, HIV and sexually-transmitted diseases, homelessness; basic educational deficits, unemployment and poor job preparation; spouse and family troubles—especially domestic violence—and the long-term effects of childhood physical and sexual abuse. If not addressed, these factors will impair an individual's success in treatment and will compromise compliance with program requirements. Co-occurring factors should be considered in treatment planning. In addition, treatment services must be relevant to the ethnicity, gender, age, and other characteristics of the participants.

Longitudinal studies have consistently documented the effectiveness of AOD treatment in reducing criminal recidivism and AOD use. A study commissioned by the Office of National Drug Control Policy found AOD treatment is significantly more cost-effective than domestic law enforcement, interdiction, or "source-country control" in reducing drug use in the United States. Research indicates that the length of time an offender spends in comprehensive study conducted by the State of California indicates that AOD treatment provides a $7 return for every $1 spent on treatment. The study found that outpatient treatment is the most cost-effective approach, although residential treatment, sober living houses, and methadone maintenance are also cost-effective. Comprehensive studies conducted in California and Oregon found that positive outcomes associated with AOD treatment are sustained for several years following completion of treatment.

For the many communities that do not have adequate treatment resources, drug courts can provide leadership to increase treatment options and enrich the availability of support services. Some drug courts have found creative ways to access services, such as implementing treatment readiness programs for participants who are on waiting lists for comprehensive treatment programs. In some jurisdictions, drug courts have established their own treatment programs where none existed. Other drug courts have made use of pretrial, probation, and public health treatment services.

Performance Benchmarks

A. Individuals are initially screened and periodically assessed to insure proper offender/treatment matching.

SCORE: 4.86/5

B. Treatment services are comprehensive, including detox, education, outpatient, intensive outpatient, inpatient, therapeutic communities, etc.

SCORE: 4.14/5

C. Treatment designs and delivery systems are sensitive and relevant to issues of race, culture, religion, gender, age, ethnicity, and sexual orientation.

SCORE: 4.86/5

D. Referral to auxiliary services (i.e., housing, vocational and educational training, social services, job placement, etc.), and special services (i.e., mental health, prenatal care, etc.), are available.

SCORE: 4.29/5

E. Funding for treatment is adequate, stable, and dedicated to drug court.

SCORE: 3.86/5

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F. Treatment services have quality controls and are accountable.
SCORE: 4.86/5

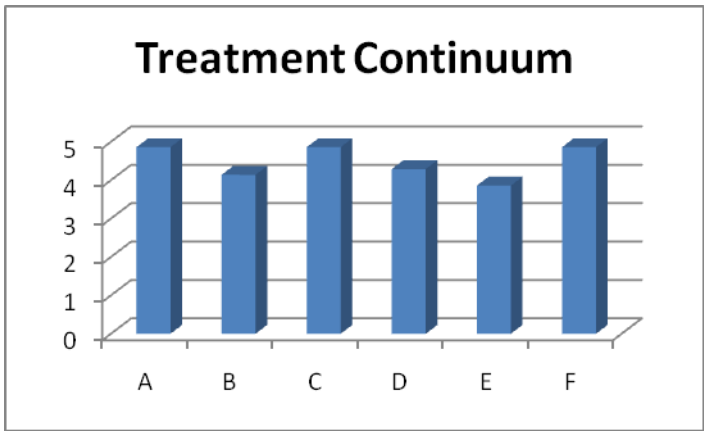

Figure 4: Key Component 4—Self-Assessment Scores by Treatment Continuum. Meyer's Instrument; conducted Fall 2009 via online tool.

Key Component #5: Overall score 4.29/5
Abstinence is monitored by frequent alcohol and other drug testing.

Purpose
Frequent court-ordered AOD testing is essential. An accurate testing program is the most objective and efficient way to establish a framework for accountability and to gauge each participant's progress. Modern technology offers highly reliable testing to determine if an individual has recently used specific drugs. Further, it is commonly recognized that alcohol use frequently contributes to relapse among individuals whose primary drug of choice is not alcohol.
AOD testing results are objective measures of treatment effectiveness, as well as a source of important information for periodic review of treatment progress. AOD testing helps shape the ongoing interaction between the court and each participant. Timely and accurate test results promote frankness and honesty among all parties.
AOD testing is central to the drug court's monitoring of participant compliance. It is both objective and cost-effective. It gives the participant immediate information about his or her own progress, making the participant active and involved in the treatment process rather than a passive recipient of services.

Performance Benchmarks
A. AOD testing policies and procedures are based on established guidelines, such as APPA.
SCORE: 4.00/5
B. Random testing of not less than two per week initially, decreasing with abstinence.
SCORE: 4.71/5
C. Scope of testing is sufficiently broad to detect drugs of abuse, including alcohol.
SCORE: 4.14/5

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D. Recognized standard collection and testing procedures are followed to insure high reliability of results.

SCORE: 4.86/5

E. Court is immediately notified when participant fails tests, gives adulterated sample, or doesn't test.

SCORE: 3.71/5

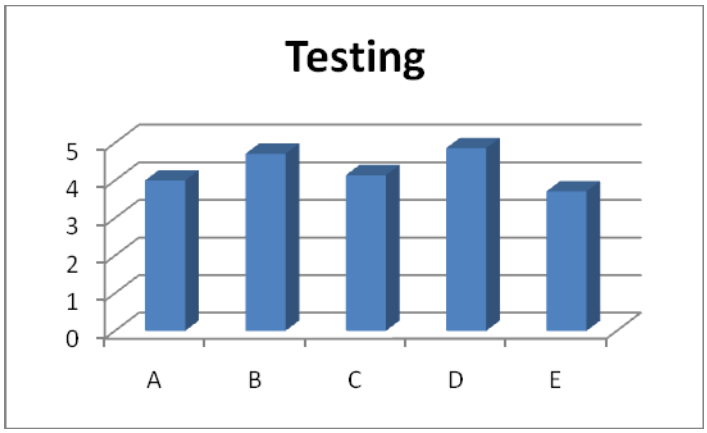

Figure 5: Key Component 5—Self-Assessment Scores by Testing.
Meyer's Instrument; conducted Fall 2009 via online tool.

Key Component #6: Overall score 4.57/5

A coordinated strategy governs drug court responses to participants' compliance.

Purpose

An established principle of AOD treatment is that addiction is a chronic, relapsing condition. A pattern of decreasing frequency of use before sustained abstinence from alcohol and other drugs is common. Becoming sober or drug free is a learning experience, and each relapse to AOD use may teach something about the recovery process.

Implemented in the early stages of treatment and emphasized throughout, therapeutic strategies aimed at preventing the return to AOD use help participants learn to manage their ambivalence toward recovery, identify situations that stimulate AOD cravings, and develop skills to cope with high-risk situations. Eventually, participants learn to manage cravings, avoid or deal more effectively with high-risk situations, and maintain sobriety for increasing lengths of time.

Abstinence and public safety are the ultimate goals of drug courts, many participants exhibit a pattern of positive urine tests within the first several months following admission. Because AOD problems take a long time to develop and because many factors contribute to drug use and dependency, it is rare that an individual ceases AOD use as soon as he or she enrolls in treatment. Even after a period of sustained abstinence, it is common for individuals to occasionally test positive.

Although drug courts recognize that individuals have a tendency to relapse, continuing AOD use is not condoned. Drug courts impose appropriate responses for continuing AOD use. Responses increase in severity for continued failure to abstain.

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A participant's progress through the drug court experience is measured by his or her compliance with the treatment regimen. Certainly cessation of drug use is the ultimate goal of drug court treatment. However, there is value in recognizing incremental progress toward the goal, such as showing up at all required court appearances, regularly arriving at the treatment program on time, attending and fully participating in the treatment sessions, cooperating with treatment staff, and submitting to regular AOD testing.

Drug courts must reward cooperation as well as respond to noncompliance. Small rewards for incremental successes have an important effect on a participant's sense of purpose and accomplishment. Praise from the drug court judge for regular attendance or for a period of clean drug tests, encouragement from the treatment staff or the judge at particularly difficult times, and ceremonies in which tokens of accomplishment are awarded in open court for completing a particular phase of treatment are all small but very important rewards that bolster confidence and give inspiration to continue.

Drug courts establish a coordinated strategy, including a continuum of responses, to continuing drug use and other noncompliant behavior. A coordinated strategy can provide a common operating plan for treatment providers and other drug court personnel. The criminal justice system representatives and the treatment providers develop a series of complementary, measured responses that will encourage compliance. A written copy of these responses, given to participants during the orientation period, emphasizes the predictability, certainty, and swiftness of their application.

Performance Benchmarks

A. The drug court team maintains frequent, regular communication to provide timely reporting of progress and non-compliance enabling the court to respond immediately.

SCORE: 4.43/5

B. Sanctions are developed jointly and are imposed after consultation with team members.

SCORE: 4.29/5

C. Imposed sanctions are graduated and commensurate with infraction.

SCORE: 4.43/5

D. Compliance with program requirements is rewarded.

SCORE: 4.86/5

E. Consequences for program compliance/non-compliance are clearly explained to participant before enrollment so participant has clear expectations.

SCORE: 4.86/5

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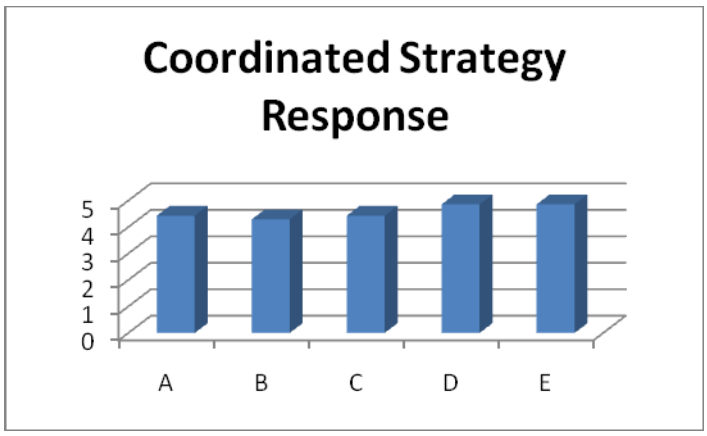

Figure 6: Key Component 6—Self-Assessment Scores by Coordinated Strategy Response. Meyer's Instrument; conducted Fall 2009 via online tool.

Key Component #7: Overall score 4.51/5

Ongoing judicial interaction with each drug court participant is essential.

Purpose

The judge is the leader of the drug court team, linking participants to AOD treatment and to the criminal justice system. This active, supervising relationship, maintained throughout treatment, increases the likelihood that a participant will remain in treatment and improves the chances for sobriety and law-abiding behavior. Ongoing judicial supervision also communicates to participants—often for the first time—that someone in authority cares about them and is closely watching what they do.

Drug courts require judges to step beyond their traditionally independent and objective arbiter roles and develop new expertise. The structure of the drug court allows for early and frequent judicial intervention. A drug court judge must be prepared to encourage appropriate behavior and to discourage and penalize inappropriate behavior. A drug court judge is knowledgeable about treatment methods and their limitations.

Performance Benchmarks

A. Regular status conferences are used to monitor participant performance.

SCORE: 5.00/5

B. Interval between status conferences is varied according to treatment protocols and participant progress.

SCORE: 4.29/5

C. Court-participant interaction demonstrates to participant observers the benefits of program compliance and consequences for non-compliance.

SCORE: 4.14/5

D. The court applies appropriate sanctions and incentives to match participant treatment progress.

SCORE: 4.14/5

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E. Program graduation is recognized as a significant achievement.
SCORE: 5.00/5

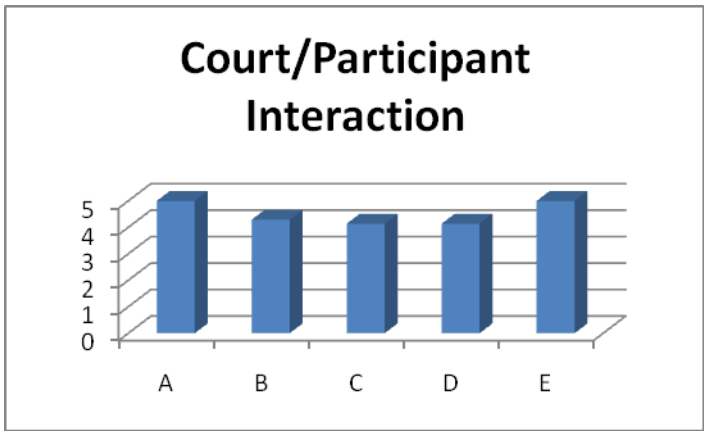

Figure 7: Key Component 7—Self-Assessment Scores by Court/ Participant Interaction. Meyer's Instrument; conducted Fall 2009 via online tool.

Key Component #8: Overall score 4.60/5
Monitoring and evaluation measure the achievement of program goals and gauge effectiveness.

Purpose
Fundamental to the effective operation of drug courts are coordinated management, monitoring, and evaluation systems. The design and operation of an effective drug court program result from thorough initial planning, clearly defined program goals, and inherent flexibility to make modifications as necessary.
The goals of the program should be described concretely and in measurable terms to provide accountability to funding agencies and policymakers. And, since drug courts will increasingly be asked to demonstrate tangible outcomes and cost-effectiveness, it is critical that the drug court be designed with the ability to gather and manage information for monitoring daily activities, evaluating the quality of services provided, and producing longitudinal evaluations.
Management and monitoring systems provide timely and accurate information about program operations to the drug court's managers, enabling them to keep the program on course, identify developing problems, and make appropriate procedural changes. Clearly defined drug court goals shape the management information system, determine monitoring questions, and suggest methods for finding information to answer them.
Program management provides the information needed for day-to-day operations and for planning, monitoring, and evaluation. Program monitoring provides oversight and periodic measurements of the program's performance against its stated goals and objectives.
Evaluation is the institutional process of gathering and analyzing data to measure the accomplishment of the program's long-term goals. A process evaluation appraises progress in meeting operational and administrative goals (e.g., whether treatment services are implemented as intended). An outcome evaluation assesses the extent to which the program is

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reaching its long-term goals (e.g., reducing criminal recidivism). An effective design for an outcome evaluation uses a comparison group that does not receive drug court services.

Although evaluation activities are often planned and implemented simultaneously, process evaluation information can be used more quickly in the early stages of drug court implementation. Outcome evaluation should be planned at the beginning of the program as it requires at least a year to compile results, especially if past participants are to be found and interviewed.

Evaluation strategies should reflect the significant coordination and the considerable time required to obtain measurable results. Evaluation studies are useful to everyone, including funding agencies and policymakers who may not be involved in the daily operations of the program. Information and conclusions developed from periodic monitoring reports, process evaluation activities, and longitudinal evaluation studies may be used to modify program procedures, change therapeutic interventions, and make decisions about continuing or expanding the program.

Information for management, monitoring, and evaluation purposes may already exist within the court system and/or in the community treatment or supervision agencies (e.g., criminal justice data bases, psychosocial histories, and formal AOD assessments). Multiple sources of information enhance the credibility and persuasiveness of conclusions drawn from evaluations.

Performance Benchmarks

A. Monitoring and evaluation processes began at planning stage and are ongoing.

SCORE: 4.43/5

B. Monitoring and management data is assembled in a useful format for regular review by program leaders, managers, and evaluators.

SCORE: 4.43/5

C. Program managers and leaders periodically review monitoring and management data to analyze program effectiveness, modify operations, and refine goals.

SCORE: 4.57/5

D. Written guidelines exist and are followed to protect confidentiality and unauthorized disclosure of personal information.

SCORE: 4.86/5

E. A non-independent evaluator or independent evaluator has been selected and an evaluation is in progress.

SCORE: 4.71/5

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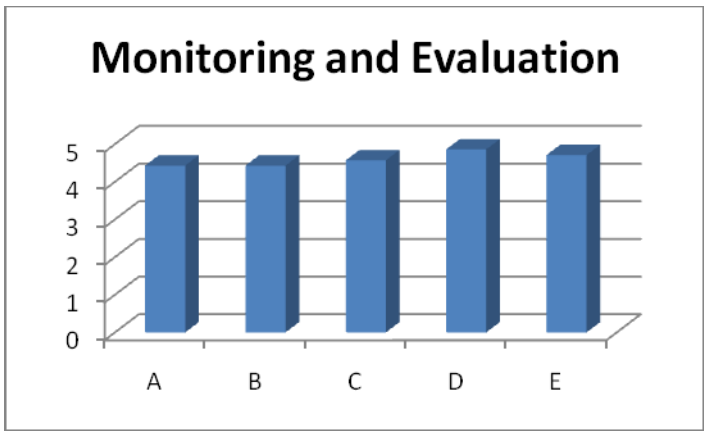

Figure 8: Key Component 8—Self-Assessment Scores by Monitoring and Evaluation. Meyer's Instrument; conducted Fall 2009 via online tool.

Key Component #9: Overall score 4.10/5

Continuing interdisciplinary education promotes effective drug court planning, implementation, and operations.

Purpose

Periodic education and training ensures that the drug court's goals and objectives, as well as policies and procedures, are understood not only by the drug court leaders and senior managers, but also by those indirectly involved in the program. Education and training programs also help maintain a high level of professionalism, provide a forum for solidifying relationships among criminal justice and AOD treatment personnel, and promote a spirit of commitment and collaboration.

All drug court staff should be involved in education and training, even before the first case is heard. Interdisciplinary education exposes criminal justice officials to treatment issues, and treatment staff to criminal justice issues. It also develops shared understandings of the values, goals, and operating procedures of both the treatment and the justice system components. Judges and court personnel typically need to learn about the nature of AOD problems and the theories and practices supporting specific treatment approaches. Treatment providers typically need to become familiar with criminal justice accountability issues and court operations. All need to understand and comply with drug testing standards and procedures.

For justice system or other officials not directly involved in the program's operations, education provides an overview of the mission, goals, and operating procedures of the drug court.

A simple and effective method of educating new drug court staff is to visit an existing court to observe its operations and ask questions. On-site experience with an operating drug court provides an opportunity for new drug court staff to talk to their peers directly and to see how their particular role functions.

Performance Benchmarks

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A. Key personnel have participated in training on the written operating procedures of the drug court.

SCORE: 4.71/5

B. Multi-disciplinary training is routine for new personnel and ongoing.

SCORE: 3.57/5

C. The judge, public defender, prosecutor, probation, and assigned law enforcement staff have undergone training in addiction and substance abuse treatment.

SCORE: 4.57/5

D. Team-building is part of the regular training process.

SCORE: 3.57/5

E. All personnel, including the Drug Court Coordinating Committee, have undergone training on diversity.

SCORE: 4.43/5

F. The drug court has an educational curriculum that is updated to provide for advances and needs.

SCORE: 3.71/5

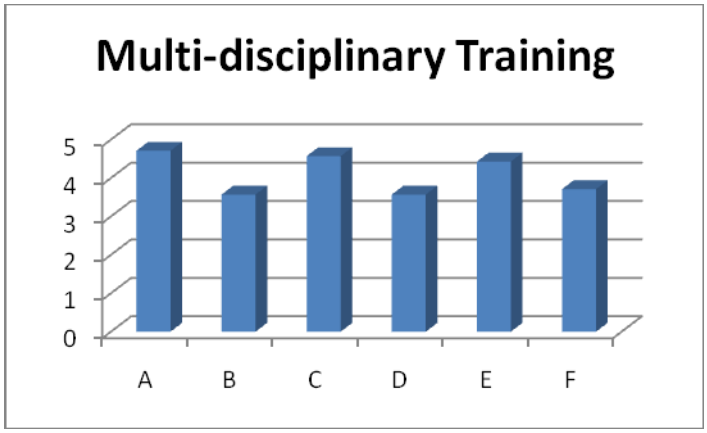

Figure 9: Key Component 9—Self-Assessment Scores by Multi-disciplinary Training. Meyer's Instrument; conducted Fall 2009 via online tool.

Key Component #10: Overall score 3.46/5

Forging partnerships among drug courts, public agencies, and community-based organizations generates local support and enhances drug court program effectiveness.

Purpose

Because of its unique position in the criminal justice system, a drug court is especially well suited to develop coalitions among private community-based organizations, public criminal justice agencies, and AOD treatment delivery systems. Forming such coalitions expands the continuum of services available to drug court participants and informs the community about drug court concepts.

The drug court is a partnership among organizations—public, private, and community-based—dedicated to a coordinated and cooperative approach to the AOD offender. The drug court

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fosters system-wide involvement through its commitment to share responsibility and participation of program partners. As a part of, and as a leader in, the formation and operation of community partnerships, drug courts can help restore public faith in the criminal justice system.

Performance Benchmarks

A. The drug court has appropriate linkages with the law enforcement community to provide support for and monitoring of participants.

SCORE: 4.71/5

B. Representatives from the court, community, treatment, health, and criminal justice agencies meet regularly to provide direction to the drug court program.

SCORE: 4.43/5

C. The drug court has a professional staff that reflects the diversity of the population served.

SCORE: 4.14/5

D. The drug court has a press briefing book and provides opportunities for community involvement through forums and informational meetings.

SCORE: 2.14 /5

E. Participation of public and private agencies and community organizations is formalized through a steering committee.

SCORE: 1.86 /5

Figure 10: Key Component 10—Self-Assessment Scores by Partnerships. Meyer's Instrument; conducted Fall 2009 via online tool.

Recommendations

Prioritizing areas to focus attention for improvement should begin with those ranging lowest in score. Since no scores lie in the bottom 30 percent [0 – 1.5], attention should then fall to scores in the middle 30 percent [1.6 – 3]. Components 3.D, 10.D, and 10.E fall in this range.

3.D: Initial appearance before drug court judge occurs immediately after arrest or apprehension

10.D: The drug court has a press briefing book and provides opportunities for community involvement through forums and informational meetings

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10.E: Participation of public and private agencies and community organizations is formalized through a steering committee

When prioritizing components, it is important to develop a documented plan to address concerns. Consider the feasibility of achieving the set goals, taking into account available resources and political realities.

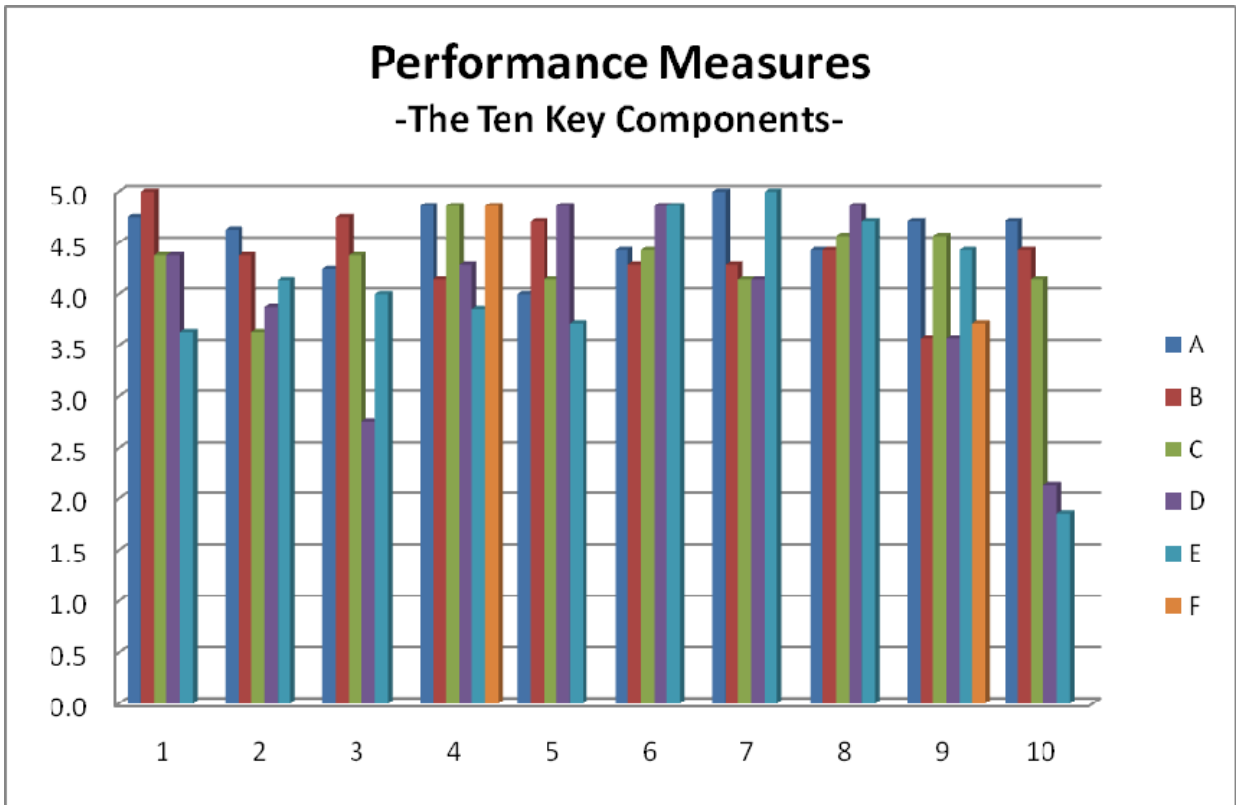

Figure 11: The Ten Key Components—Self-Assessment Scores by Performance Measure. Meyer's Instrument; conducted Fall 2009 via online tool.

The chart above graphically represents aggregate scores by perfomance measure. Within each component, there are between five and six performance measures.

Methodology

The *Drug Court Self-Assessment: Utilizing the Key Components as a Standard*, developed by Judge William G. Meyer (1998) was augmented to be delivered online. The survey was open between August 20, 2009 and December 22, 2009. A survey reminder was delivered to non-reponders on September 22, 2009. Confidential responses were solicited from ten members of the drug court team. Eight members responded to two requests for completion. Upon completion, data were analyzed by performance measure and component.

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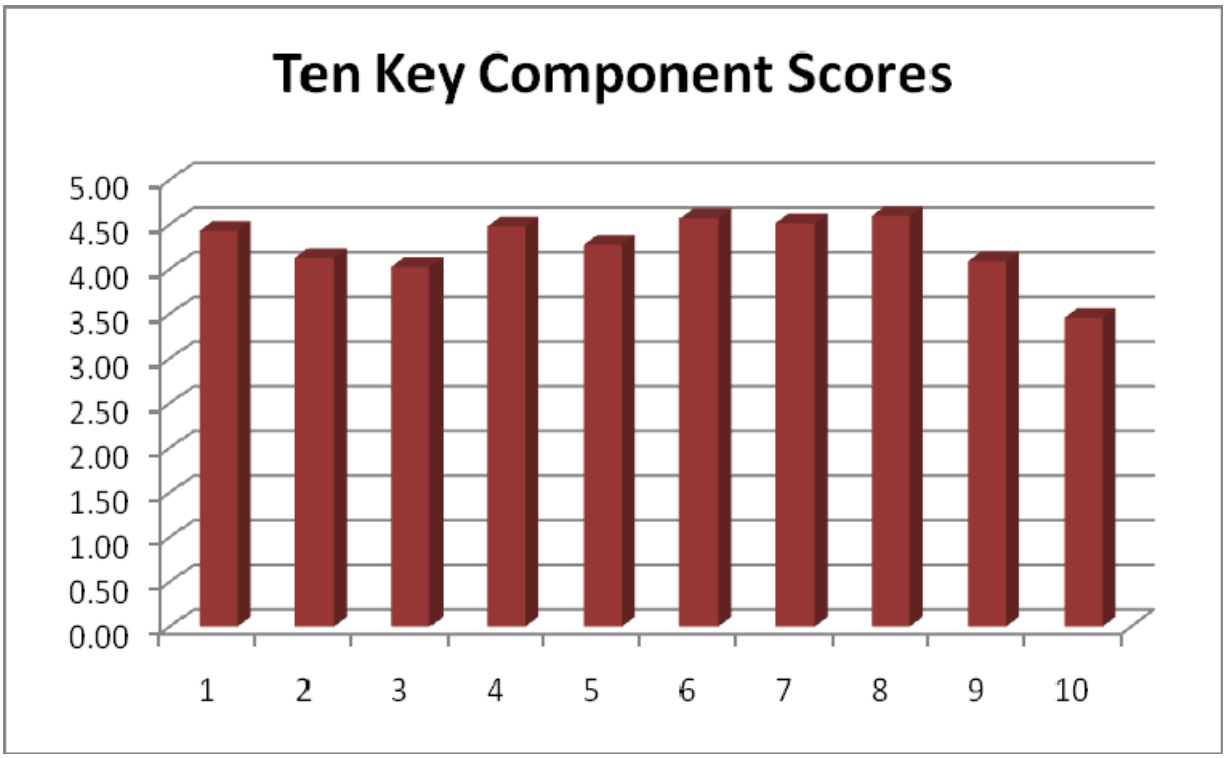

Figure 12: The Ten Key Components—Self-Assessment Scores by Component. Meyer's Instrument; conducted Fall 2009 via online tool.

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SWOT Analysis Results

SWOT analysis is a tool for strategic planning which involves the identification and evaluation of Strengths, Weaknesses, Opportunities and Threats. Its purpose is to define a strategy or direction and should help in making decisions on allocating resources to pursue the strategy, including capital and people. This framework facilitates the assessment of internal capabilities and resources as well as external factors influencing organizational achievement and profitability. This SWOT Analysis is based on interviews with the Drug Court Team members, conducted in July of 2009.

SWOT Factors Diagram

	Positive	Negative
Internal	**Strengths** • Internal attributes of the organization that can help achieve objectives • Defines what the organization does well (core competencies) and how these strengths can be leveraged	**Weaknesses** • Internal attributes of the organization that can impede progression of the plan and prevent achieving objectives • Identifies problem areas within the organization and defines the processes it struggles with the most • Can be mitigated by bringing in specific skill sets from external sources
External	**Opportunities** • Outside conditions that can help achieve objectives • Opportunities can include partnerships with other organizations and acquiring needed skill sets from outside sources and consultants	Threats • Outside conditions that might impede ability to achieve objectives • Threats can include any external factors that the organization does not directly control (poor economic conditions, political instability, etc.)

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	Positive	Negative
Internal	**Strengths** • Drug court is small so the staff have regular contact with participants (more hands-on, more supervision) • Regular contact requires more accountability from participants • Working relationships with the Judge, District Attorney, and Public Defender • One-on-one relationships with clients helps them feel we care • Graduates stay focused and do not get complacent • Structured treatment programs are required for participants • The Drug Court Team works well together • The Drug Court Team is committed to the program • Creates productive members of society (instead of burdens on society) • Intensity of program • The Drug Court Team identifies candidates who really want to change • Families are appreciative of the program (impacts participants, their families, and their children) • Good communication between Drug Court Team members • Drug Court gives people who want help an avenue to seek help • When we help someone become drug free, we help everyone (lower crime rate) • Brad/Staff • Fear of being drug tested • Skills participants learn during the program • Fear of what happens if they are not successful • Participants see their lives as better than they were before • Gives participants the opportunity to prove to themselves they can change and stop using • Reduces recidivism • Enhances access to treatment that is otherwise out of reach for participants • Assistance to participants to secure a job	**Weaknesses** • Need more community involvement • Need more team involvement • Need more judicial interaction • Need to avoid subjectivity on applicant/admission decisions (if we see they want to change, they are accepted; if they just want a "get out of jail free card," they are denied) • Lack of adequate halfway housing • An applicant's history can make or break their chances of being accepted; there is a lot of pre-judging based on family/relatives • Curfews during phase two are too lenient during transition • Participants have a difficult time completing the program because there are many hoops to jump through • Need medical/dental assistance • Some grads reoffend • There should be set standards for all clients (standards are different for different clients) • While on house arrest, participants should not get special privileges and we should not make exceptions • Avoiding drug dealers • Some grads should have never made it through; we are pushing them through for the numbers • Need more access to jobs • Program needs consistency • More attorneys need to apply their clients to Drug Court • Post-GED education • Consistent punishment for failed drug tests and missed meetings • All participants need to stay the full half-hour of Drug Court • Need to applaud accomplishments more and in front of other participants • Community is not yet enough aware of the program and its purpose • Wish we could offer psychological

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	• Assistance to participants to earn GED • Increases participants' self-esteem/self-worth • Helps adults become parents to their children • Gives participants an opportunity to break a cyclical addiction and establish a normal life • Drug Court Team members are volunteers and show genuine concern • Drug Court is accredited	support to help participants on a different level (self-esteem) • Some community members believe incarceration is the only fair punishment
External	**Opportunities** • We can expand the number of participants we accept • Successful grads have good family support • We could double the people we helped if we accepted more people (create more law-abiding citizens who contribute to society) • Continuation of DUI Court (proud of the addition and of how well participants are doing) • Ability to indirectly change many lives through the one life we directly change through Drug Court • Create a halfway house • Secure more funding following evaluation to help more people • More publicity about successes • Treatment center in McMinnville • Utilize evaluation to help community understand the program • Expansion for more specialty courts (mental health, domestic violence) • Create more exposure for Drug Court to increase awareness/knowledge	Threats • Economy/funding • Need to be more self-sufficient (45 participants would make us self-sufficient) • Participant ability to pay fees • Employment • Education for participants • Access to necessary resources • Treatment/counseling center is not local • Community perceptions (belief that criminals should be in jail)

Other comments:
Close supervision is key
I was skeptical, but I've been impressed by the change Drug Court has made in peoples' lives
Great program—for every one person we help, we in effect, help a multitude in the community
Businesses need incentives to hire Drug Court participants
Wonderful program
I feel blessed to be in a position where I can be active in Drug Court

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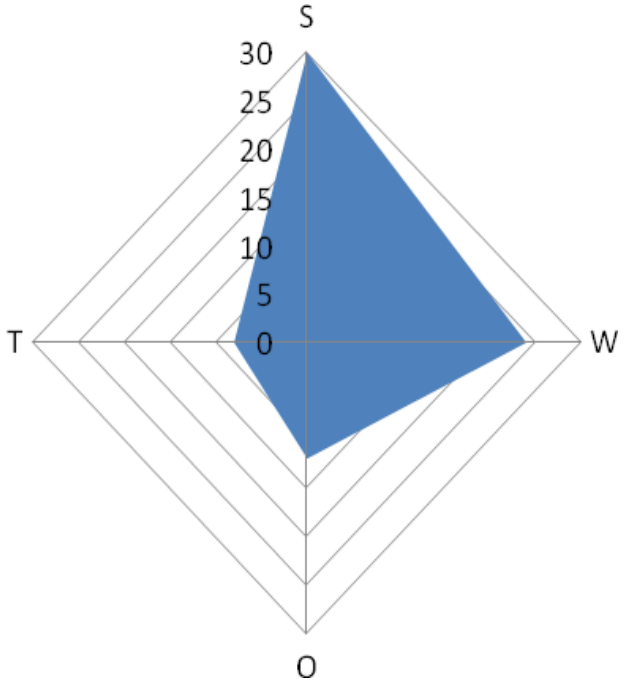

Recommendations:

- Celebrate and utilize strengths
- Identify underlying causes of weaknesses
- Evaluate and exploit opportunities
- Identify threats to minimize damage
- Carry findings forward by integrating them into subsequent planning and strategy development
- Revisit findings at suitable intervals to ensure that they are still valid

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