Law Enforcement and Treatment Courts

Wednesday, June 13, 2018

Justice Programs Office
School of Public Affairs

National Drug Court Resource Center
• Introduction Zephi Francis, Justice Programs Office.
• The role of law enforcement in treatment court programs Ronald Thrasher, Oklahoma State University.
• Engagement strategies to increase participation from law enforcement Alex Casale, State of New Hampshire.
• Education and training approaches to inform law enforcement about treatment services Jac Charlier, Justice Initiatives Center for Health and Justice.
• Law enforcement as advocates for treatment court programs Kallie Steffens, Second Circuit Drug Court in South Dakota.
• Questions and Answers (Q&A).
Overview of the NDCRC

- Online resource collection.
- State Net.
- Drug court map.
- Webinars.
- Newsletters and listservs.
- National and state conferences.
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Many Hats/Many Roles

• Roles for the treatment team.
• Roles for the treatment client.
• Roles for officer assigned to the treatment court.
Roles for the Treatment Team

• Information provider.
  o Criminal / arrest / suspect records.
  o Contact (FI) records / informant (CI) records.
  o Changes in drug usage and distribution trends.
• Client locator (cops can find people).
• 24/7 client monitor.
• Computer aided dispatch (CAD) services.
• Security (office, hearings, home visits).
Roles for the Client

• Community resource.
  o Finding a job.
  o Finding transportation (i.e. police bicycle impound).

• Family resource.
  o Area community services.

• Alibi services.
  o “If I mess up, I go straight to prison.”
  o Warning sign, “drug court client-frequent police visits.”
Insight and education
- Options beyond, “cuff & stuff.”
- Opportunities for unique training.

Professional development.
- Networking / working as a professional peer.

Opportunity to give back.
- Cost savings, treatment vs. incarceration.
- Savings to the community.
- Savings to the family.
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Informational Meetings

- Invite local chiefs, state police, sheriffs, jail, and probation to an informational meeting.
- Have the invitation go out from a well respected officer and judge.
- Supply food and/or coffee.
- Bring law enforcement who already work in a treatment court to present and/or to be in the audience.
- Have program informational flyers or other written materials to hand out.
Training for Current Law Enforcement

- Invite law enforcement to your local trainings and conferences.
- Have experts present on their experience in the field and to report on studies.
Mentor or Job Shadowing

- Connect law enforcement with their counterparts in other locations.
- If possible, connect them with someone in another state.
- Make sure the jurisdiction is similar in size and/or population.
Learning Styles

- Different learning styles need different information.
- Some need statistics.
- Some need a few good anecdotes/stories.
- While others need to experience a hard case turning around and graduating.
Be Patient

• It can take time to change how someone looks at a treatment court.
• With time and experience, law enforcement will see that engaging with treatment courts will benefit the community.
• Not everyone will agree or be engaged, and we need to be ok with that.
Topics for Discussion

- The role of law enforcement in treatment court programs.
- Engagement strategies to increase participation from law enforcement.
- Education and training approaches to inform law enforcement about treatment services.
- Law enforcement as advocates for treatment court programs.
Justice Leaders Systems Change Initiative (JLSCI)

• A systems approach to systems change.
• Provides comprehensive education for local teams of police, judges, treatment, and community partners to improve outcomes in working with people with addictions.
• Local jurisdictions create and implement practical, collaborative responses to substance abuse and addiction among participants.
Self-Study Courses

• Free, online courses offering strategies and solutions to stop cycles of drug use and crime based on the Justice Leaders Systems Change Initiative (JLSCI).
• Offered by top national researchers in addiction and criminal justice.

MODULES

• *The Neuroscience of Addiction.*
• *Evidence-Based Sentencing for Drug Users.*
• *Medication-Assisted Treatment.*
• *Center for Health & Justice.*

Modules can be found at [www.2centerforhealthandjustice.org](http://www.2centerforhealthandjustice.org) or [www.register.judges.org](http://www.register.judges.org).
Police Roll Call Videos

Roll Call Video: What Happens When a Brain Is Addicted

Roll Call Video: Building Partnerships with Addiction Treatment

It's a Brain Disease: The Neuroscience of Addiction

Videos can be found at www.2centerforhealthandjustice.org.
National Institute for Drug Abuse’s (NIDA) 13 Principles

• A research-based guide.
• 13 principles.
• Drug treatment in the US.
• Evidence-based approaches to drug treatment.
• Available in Spanish.
Addiction is a complex but treatable disease that affects brain function and behavior.

No single treatment is appropriate for everyone.

Treatment needs to be readily available.

Effective treatment attends to multiple needs of the individual, not just his or her drug abuse.

Remaining in treatment for an adequate period of time is critical.

Behavioral therapies—including individual, family, or group counseling—are the most commonly used forms of drug abuse treatment.
Medications are an important element of treatment for many patients, especially when combined with counseling and other behavioral therapies.

An individual’s treatment and services plan must be assessed continually and modified as necessary to ensure that it meets his or her changing needs.

Many drug-addicted individuals also have other mental disorders.

Medically assisted detoxification is only the first stage of addiction treatment and by itself does little to change long-term drug abuse.

Treatment does not need to be voluntary to be effective.

Drug use during treatment must be monitored continuously, as lapses during treatment do occur.

Treatment programs should test patients for the presence of HIV/AIDS, hepatitis B and C, tuberculosis, and other infectious diseases as well as provide targeted risk-reduction counseling, linking patients to treatment if necessary.

NIDA’s 13 Principles
Police, Treatment and Community Collaborative (PTAC) Pre-Arrest Diversion Docs

PTAC Visual

PRE-ARREST DIVERSION: PATHWAYS TO COMMUNITY
POLICE, TREATMENT AND COMMUNITY COLLABORATIVE

TREATMENT
AND/OR
SOCIAL SERVICES
(INTERCEPT 0)

Self-
Referral
Active
Outreach
Naloxone
Plus
Officer
Prevention
Officer
Intervention*

AVAILABILITY OF ALL PATHWAYS MAXIMIZES OPPORTUNITIES

POLICE
Law Enforcement - Sheriff
State Troopers - Probation - Parole
(INTERCEPT 1, 3, 5)

COMMUNITY
Shared Goals/Outcomes/Solutions

Shared Problems/Challenges/Concerns

Lived Experience - Victims of Crime

Recovery Support - Peers - Engaged

PRE-ARREST DIVERSION: PATHWAYS TO COMMUNITY
POLICE, TREATMENT AND COMMUNITY COLLABORATIVE
PTAC Guiding Behavioral Health Principles

The Police, Treatment, and Community Collaborative (PTAC) Guiding Principles of Recovery believes that recovery is a holistic, person-driven process rooted in compassion and respect. PTAC also acknowledges that there is no one-size-fits-all plan as recovery is highly personalized and individualized. The following guiding principles must inform treatment and/or social service providers, and promote meaningful and impactful service delivery. These principles also recognize the need to identify options that are non-traditional from both treatment and recovery perspectives. This is not a prescriptive or exhaustive list, but rather a guide.
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Educational Approaches

- Crisis intervention training (CIT).
- Legislation involvement.
- Media involvement.
- Chief’s and sheriff’s conference.
- New hire training for all LE officers.
Statewide Demographics

**Total Number of Participants:** 755

**Gender Percentages:**
- Drug Court: Male 60%, Female 40%
- DUI Court: Male 40%, Female 60%

**Drug-free babies born to participants from FY12-FY17:** 26

**Race and Ethnicity:**
- Caucasian: 77%
- Native American: 23%
- Hispanic, African American, Other: 3%

**Drug of Choice:**
- Methamphetamine
- Opioids
- Marijuana

- FY15: Methamphetamine
- FY16: Methamphetamine
- FY17: Methamphetamine

**Percentage of Drug Court participants age 22-30:** 47%

**Percentage of DUI Court participants age 41+:** 46%

**The number of children of participants between from FY12-FY17:** 1,266

**Homeless upon Entry to Drug Court:** 28%

**Homeless upon Entry into DUI Court:** 13%

**Percentage Unemployed Upon Entry:**
- Drug Court: 69%
- DUI Court: 48%
Cost Savings

TREATMENT
$2,750 per client

Versus

INCARCERATION
Jail: $96.45 per day
Prison: $75.82 per day
Community Involvement

- Crisis intervention training (CIT).
- Work release center on weekends and holidays.
- Law Enforcement (LE) checks.
- Positive reinforcement with clients.
- Coffee with an officer.
- LE ability to educate the public on retention rates vs. the ‘lock up’ stigma.
Team Based Approaches

• Mental health services.
  o Trauma, abuse, medication assistance, DBT, MRT, couples counseling and individual sessions.
• Chemical dependency services.
  o IOP, CBISA, relapse prevention and residential services.
• Partnering agencies as referral sources.
  o Housing, employment and education services.

“Consistent attendance by all team members at staffings is associated with significantly better outcomes.”
Success Rates in South Dakota

Statewide

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<tr>
<td>Participants Served</td>
<td>456</td>
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<tr>
<td>Graduated</td>
<td>90</td>
</tr>
<tr>
<td>Terminated</td>
<td>80</td>
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<tr>
<td>Retention Rate</td>
<td>73% (NDCI* 70%)</td>
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<tr>
<td>Graduation Rate</td>
<td>59% (NDCI* 56%)</td>
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Sioux Falls

The drug court in the Second Judicial Circuit started in January of 2011. To date, the court has accepted 163 clients, and, of those, 55 clients have graduated from the program. The court is currently serving 48 active participants.

71% retention rate
Questions?