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SUBCHAPTER 1: GENERAL PROVISIONS

1-1 Purpose
This manual identifies the requirements for operation of Oklahoma Adult Drug Court programs funded by the Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS). Oklahoma abides by the “Drug Court Ten Key Components” developed by the Bureau of Justice Assistance in collaborations with the National Association of Drug Court Professionals.

- **Key Component 1**
  Drug courts integrate alcohol and other drug treatment (substance abuse) services with justice system case processing.

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

- **Key Component 3**
  Eligible participants are identified early and promptly placed into the drug court program.

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

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

- **Key Component 6**
  A coordinated strategy governs drug court responses to participants’ compliance.

- **Key Component 7**
  Ongoing judicial interaction with each drug court participant is essential.

- **Key Component 8**
  Monitoring and evaluation measure the achievement of program goals and gauge effectiveness.

- **Key Component 9**
  Continuing interdisciplinary education promotes effective drug court planning, implementation, and operations.

- **Key Component 10**
  Forging partnerships among drug courts, public agencies, and community-based organizations generates local support and enhances drug court program effectiveness.
1-2 Definitions

“Ancillary” means additional, secondary.

“ASAM” means the American Society of Addiction Medicine.

“ASAM levels of care” means the different options for treatment as described in the current edition of the ASAM PPC that vary according to the intensity of the services offered. Each treatment option is a level of care.

“Assessment” means those procedures by which a program provides an on-going evaluation process with the consumer as outlined in applicable rules throughout OAC 450 to collect pertinent information needed as prescribed in applicable rules and statutes to determine course of actions or services to be provided on behalf of the consumer.

“Criminogenic Risk” means the measure of likelihood that an individual will commit a criminal offense in the future.

“Criminogenic Risk Assessment” means a validated instrument that ascertains criminogenic risk.

“DCWEBS” means the ODMHSAS drug court web-based reporting system in which all participant data is entered to serve as a basis for data evaluation, reporting, and funding.

“Drug Court Team” means the individuals making up the team with the responsibility of administering drug court programs, as identified in Title 22 O.S. §471.1.D.

“ODMHSAS” means the Oklahoma Department of Mental Health and Substance Abuse Services.

“Participant” means an offender whom is accepted by the drug court team and whom has voluntarily decided to enter the program.

“Phasing Up” means the advancement of a participant from one phase of the program to the next.

“Recidivism” means the repeat criminal offenses of an individual whom has had prior offenses.

“Risk Need Responsivity” means a model of offender management that incorporates criminogenic risk, criminogenic treatment needs, and identification of how services should be provided in order to decrease the likelihood of the participant reoffending.
“Trauma Informed” means the capacity for a facility and all of its programs to recognize and respond accordingly to the presence of the effects of past and current traumatic experiences in the lives of its consumers.

**SUBCHAPTER 2: PROGRAM STRUCTURE**

2-1 **Governing Rules**
A drug court program, described in Title 22 O.S. §471.1, shall be an immediate and highly structured judicial intervention process for substance abuse treatment of eligible offenders which expedites the criminal case, and requires successful completion of the plea agreement in lieu of incarceration.

All drug court programs’ policy and practices shall be in compliance with the applicable sections of the most recent versions of:

2-1.1 The “Oklahoma Drug Court Act” Title 22 O.S. §471.1;
2-1.2 Oklahoma Adult Drug Court Manual published by the ODMHSAS;
2-1.3 ODMHSAS Drug Court Contracts;
2-1.4 Oklahoma Administrative Code (OAC) Title 450; and
2-1.5 Any other applicable state and federal laws

2-2 **Drug Court Team**
A drug court team shall be the group of professionals who are primarily responsible for the day to day operations of the program and administering the treatment and supervisory interventions. It is recommended that the drug court team establish Memorandums of Understanding (MOUs) with each relevant agency and office in order to identify expectations of each team members’ involvement with the program. The team members shall consist of:

2-2.1 Drug Court Judge: The judge is the leader of the drug court team. The National Drug Court Institute (NDCI) identifies nine core competencies of the drug court judge.

- **Core Competency 1:** Participates fully as a drug court team member, committing him or herself to the program, mission and goals, and works as a full partner to ensure their success.
  - Continues to schedule regular meetings, focused on program structure.
  - Regularly revisits program mission and goals and objectives with team to assure their efficacy and application.
  - Schedules team building activities designed to promote and encourage team members.

- **Core Competency 2:** As part of the drug court team, in appropriate non-court settings, such as staffing, the judge advocates for effective incentives and sanctions of program compliance or lack thereof.
  - Participates in scheduled staff meetings to review progress of participants.
  - Presides over court sessions.
✓ Solicits information regarding participants’ progress from every team member in attendance.
✓ Remains abreast of research regarding behavioral modification techniques and the imposition of incentives and sanctions.
✓ Imposes incentives and sanctions that are consistent while considering the individual needs of each drug court participant.
✓ Establishes separate meetings to ensure that policy and staffing issues are discussed.
✓ Delivers coordinated responses to participants in the courtroom.

  o **Core Competency 3:** Is knowledgeable of addiction, alcoholism, and pharmacology generally and applies this knowledge to respond to compliance in a therapeutically appropriate manner.
    ✓ Participates in the regular cross training with the team.
    ✓ Focuses on strengths based approaches.

  o **Core Competency 4:** Is knowledgeable of gender, age, and cultural issues that may impact the offender’s success.
    ✓ Participates in ongoing cultural awareness training.
    ✓ Promotes cultural competency among entire team through outside and cross-training activity.

  o **Core Competency 5:** Initiates the planning process by bringing together the necessary agencies and stakeholders to evaluate the current court processes and procedures and thereafter collaborates to coordinate innovative solutions.
    ✓ Acts as a mediator to develop and maintain resources and improve interagency linkages.

  o **Core Competency 6:** Becomes a program advocate by utilizing his or her community leadership role to create interest in and develop support for the program.
    ✓ Acts as a spokesperson for the court at various community events.

  o **Core Competency 7:** Effectively leads the team to develop all the protocols and procedures of the program.
    ✓ Regularly reviews protocols and procedures to assure their continued applicability and effectiveness.
    ✓ Monitors program process to ensure protocols and procedures are utilized.

  o **Core Competency 8:** Is aware of the impact that substance abuse has on the court system, the lives of the offenders, their families and the community at large.
    ✓ Assist in collection of data regarding the court’s impact on the offender population.
    ✓ Request and review process evaluation, ensure to reference original goals and objectives when doing so.
    ✓ Request and review outcome evaluation, share positive information and address negative information resulting therefrom.
Core Competency 9: Contributes to education of peers, colleagues, and judiciary about the efficacy of drug courts.
- Oversees integrity of program through quality assurance.
- Disseminates information about the court as frequently as possible.

2.2 District Attorney Representative: The district attorney representative serves as the gatekeeper for admission into the program and participates, in a non-adversarial manner, to focus on the benefits of providing a therapeutic environment and positive program outcomes. The National Drug Court Institute (NDCI) identifies nine core competencies of the drug court district attorney representative.

Core Competency 1: Participates fully as a drug court team member, committing him or herself to the program mission and goals and works as a full partner to ensure their success.
- Promptly conducts legal screens on offenders recommended to drug court.
- Assists in executing all participant waivers and contracts.
- Advocates for prompt sanctions in response to negative client behavior.
- Protects integrity for drug court program by monitoring effectiveness of community supervision.
- Maintains up to date records of participant performance.
- Moves for dismissal of participant from program based on factual history of non-compliance, when appropriate.

Core Competency 2: Participates as a team member, operating in a non-adversarial manner, promoting a sense of a unified team presence.
- Attends regularly scheduled court staffings.
- Solicits information regarding participant progress, or lack thereof, for all team members.
- Share information regarding status of the drug court and individual clients with drug court team members.
- Maintains up to date record of participant performance.

Core Competency 3: As part of the drug court team, in appropriate non-court setting, such as staffing, the prosecutor advocates for effective incentives and sanction for program compliance or lack thereof.
- Attends regularly scheduled staffings.
- Requests appropriate incentives and sanction, based on participant behavior.
- Researches efficacy of drug court’s behavior modification techniques.
- Argues for swift responses to participant behavior.
- Maintains up to date record on prior incentives and sanctions given to assure consistency.
Core Competency 4: Ensures community safety concerns by maintaining eligibility standards while participating in a non-adversarial environment which focuses on the benefits of therapeutic program outcomes.

- Moves for dismissal of drug court participants who no longer meet eligibility criteria.
- Monitors participant behavior for compliance and continued eligibility.

Core Competency 5: Monitors offender progress to define parameters of behavior that allow continued program participation and suggest effective incentives and sanctions for program compliance.

- Attends regularly scheduled staffings.
- Solicits information from team members regarding client compliance.
- Vehemently encourages sanctions for client noncompliance and seeks incentives for client compliance.
- Files motions or other legal document in order to remove noncompliant participants.
- Offers encouragement to participants while reminding them of consequences of noncompliance.

Core Competency 6: Is knowledgeable about addiction, alcoholism and pharmacology generally and applies that knowledge to respond to compliance in a therapeutically appropriate manner.

- Continues to research effective treatment modalities.
- Conducts regular quality assurance to ensure appropriate treatment.
- Attends and actively participates in all court sessions and staffing.

Core Competency 7: Is knowledgeable of gender, age and cultural issues that may impact the offender’s success.

- Continues to attend training opportunities to inform team members about cultural competencies.

Core Competency 8: Contributes to the team’s efforts in community education and local resource acquisition.

- Assist in researching any potential funding streams.

Core Competency 9: Contributes to education of peers, colleagues and judiciary in the efficacy of drug courts.

- Oversees integrity of drug court program through quality assurance.
- Disseminates information about drug court as frequently as possible.

2-2.3 Defense Representative: The drug court defense representative provides information to the drug court participant about the rigors of drug court, preserves all legal rights of the client, advocates for fair and equal treatment of client, participates in team meetings and attends non-
adversarial court proceedings. The National Drug Court Institute (NDCI) identifies ten core competencies of the drug court defense attorney representative.

- **Core Competency 1:** Participates fully as a drug court team member, committing him or herself to the program mission and goals and works as a full partner to ensure their success.
  - Promptly recommends offenders to drug court when appropriate.
  - Assists in executing all participant waivers and contracts.
  - Advocates for prompt incentives and sanctions in response to client behavior.
  - As counsel, shields client from ineffective care; as team members, protects integrity for drug court program by monitoring effectiveness of all components of client care and supervision.
  - Maintains up to date record of participant performance.
  - As counsel, serves as “voice of client” in pointing out deficiencies of drug court program; as team member, seeks productive means of addressing deficiencies.
  - Attends all staffings and actively listens for undue encroachment upon client liberties or disparate treatment of participants.
  - While never breaching attorney-client privilege, when appropriate, encourages clients to be forthcoming and honest regarding their recovery process.
  - Solicits information for drug court team members regarding client and shares relevant information with team members in appropriate and ethical manner.

- **Core Competency 2:** Evaluates offender’s legal situation and ensures that the offender’s legal rights are protected.
  - Insist that legal and clinical screens are promptly conducted.
  - Ensures prompt admittance into program and start of rehabilitative treatment.
  - Advises client regarding rigors of drug court program.
  - Advises client regarding all rights waived as participant in drug court in contrast to rights waived in traditional criminal proceedings.
  - Assure client understands all waivers and contracts prior to execution of said documents.
  - Advocates for client to have every opportunity for recovery before involuntary dismissal from program.

- **Core Competency 3:** Participates as a team member, operating in a non-adversarial manner, promoting a sense of a unified team presence.
  - Attends regularly scheduled court staffings.
  - While in court, allows client to address the bench.
Reaches consensus with team regarding effective means of addressing client behavior.

- **Core Competency 4:** Effectively advises the defendants on their legal rights, legal options, treatment options, program conditions and sentencing outcomes while developing a relationship with the offender that promotes the offender’s long term best interest.
  - Prior to recommending client to drug court, discuss legal options with client in unbiased manner.
  - Goes through each waiver and contract with client advising client about appropriate course of action.
  - Encourages client throughout the drug court process.

- **Core Competency 5:** Monitors client progress to support full participation and ensure appropriate provision of treatment and other rehabilitative services.
  - Questions client regarding effectiveness of treatment and ancillary services.
  - Conducts quality assurance of treatment and ancillary services.

- **Core Competency 6:** As part of the drug court team, in appropriate non-court setting, such as staffing, the defense representative advocates for effective incentives and sanctions for program compliance or lack thereof.
  - Advocates for prompt incentives and sanctions in response to client behavior.
  - Advocate for client’s general well-being and productive recovery without mitigating and defending client’s behavior.

- **Core Competency 7:** Is knowledgeable of gender, age and cultural issues that may impact the offender’s success.
  - Continues to attend training opportunities to inform team members about cultural competence.

- **Core Competency 8:** Is knowledgeable about addiction, alcoholism and pharmacology generally and applies that knowledge to respond to compliance in a therapeutically appropriate manner.
  - Continues to research effective treatment modalities.
  - Conducts regular quality assurance to ensure appropriate treatment.
  - Actively participates in staffings.
  - Attends all court sessions and staffing

- **Core Competency 9:** Contributes to the team’s efforts in community education and local resource acquisition.
  - Ongoing research of potential funding streams.

- **Core Competency 10:** Contributes to education of peers, colleagues and judiciary in the efficacy of drug courts.
  - Oversees integrity of drug court program through quality assurance.
  - Disseminates information about drug court as frequently as possible.
2.2.4 Drug Court Coordinator: The drug court coordinator oversees the activity of the team, conducts quality assurance of each team member, maintains client data, remains informed regarding budgetary concerns of the drug court and coordinates services from each discipline, and the local community, in a manner that is most therapeutic to the drug court participant. The National Drug Court Institute (NDCI) identifies twelve core competencies of the drug court coordinator representative.

- **Core Competency 1**: Participates fully as a drug court team member, committing him or herself to the program mission and goals and works as a full partner to ensure their success.
  - Assists in scheduling planning meetings conducive to the schedule of each drug court team member.
  - Compromises with team members regarding structure of program, including creating a program mission along with goals and objectives, during planning process meetings.
  - Memorializes all agreed upon terms of the program structure.
  - Helps to promote all productive work environments where each team member can participate.
  - Gathers information needed to keep team members informed.

- **Core Competency 2**: As part of the drug court team, in appropriate non-court settings, such as staffings, the coordinator reports on previous incentives and sanctions or lack thereof.
  - Creates file for each drug court participant.
  - Maintains ongoing log of incentives and sanctions given to each participant including the date and reason given.
  - Assures consistency of incentives and sanctions while ensuring each participant is treated as an individual.

- **Core Competency 3**: Is knowledgeable about addiction, alcoholism and pharmacology generally and applies that knowledge to suggest responses.
  - Continues to research effective treatment modalities.
  - Conducts regular quality assurance to ensure appropriate treatment.
  - Actively participates in staffing.

- **Core Competency 4**: Is knowledgeable of gender, age and cultural issues that may impact the offender’s success. Prior to recommending client to drug court, discuss legal options with client in unbiased manner.
  - Continues to seek out and arrange training opportunities to inform team members about cultural competency.
  - Conducts regular quality assurance to assure application of cultural competence by all team members.

- **Core Competency 5**: Develops team resource strategy to acquire funding. Writes grant applications and manages the program’s budget.
Creates opportunities to obtain funding and build linkages by supporting team in community outreach and lobbying activities.

- Build relationship with any potential funder, including private organizations.
- Regularly invites potential funders to drug court events.
- Prepare and submit grant applications.
- Keep bookkeeping system up to date.
- Work with evaluators to obtain persuasive data for potential funders.
- Create long term funding strategy.

Core Competency 6: Participates in the planning process to create and to memorialize program eligibility standards, operating procedures and rules. Assist in the development of the client contract, confidentiality releases and entry procedures. Create memoranda of understanding and linkage agreements.

- Tailor each required document, including client contract, to the needs of the drug court program.
- Work with each discipline to assure all documented procedures, contract, releases, etc. reflect the best, most therapeutic, interest of the client.
- Periodically reviews all documents and procedures for continued applicability and efficacy.

Core Competency 7: Negotiates and monitors treatment and ancillary service contracts. Conducts site visits, reviews progress reports and assists in audits and certification monitoring. Creates and monitors standards for urine collection and compliance reporting. Ensure gender, age, and culturally specific treatment services.

- Conducts regular and ongoing quality assurance
- Arranges cultural competence training.

Core Competency 8: Creates and maintains a data collection system to monitor client compliance, identify trends and provide a basis for evaluation.

- Consistently inputs data.
- Reviews information collected and shares with team members.
- Works with evaluator to interpret statistical relevance.

Core Competency 9: Create interagency linkages to address client’s ancillary needs in the areas of culture, age, and gender needs, medical and mental health provision, educational, vocational, skills training and employment training and placement.

- Develop memoranda of understanding with providers willing to offer services to drug court clients.
- Monitor drug court participant’s involvement with ancillary services.

Core Competency 10: Develop police and corrections linkages to improve supervision and agency coordination.
Keep law enforcement informed about progress of drug court clients and supervision efforts.
- Extend invitations to all drug court events.
- Share statistical data showing positive impact of drug court on local community.

- **Core Competency 11**: Educate referral sources and the community on eligibility standards and program goals. Encourage team members to educate in their fields and in the community. Develop teambuilding activities and conduct staff replacement training.
  - Maintain community outreach.
  - Continue to arrange team building activities designed to promote and encourage team members.

- **Core Competency 12**: Manage daily operations and filing systems. Develop and maintain fee systems.
  - Oversees collection of fees.
  - Maintains and updates drug court participant files.

### 2.2.5 Drug Court Treatment Provider

The drug court treatment provider provides rehabilitative therapy sessions, case management, and monitoring for drug court participants in keeping with the holistic recovery of the drug court participant. The National Drug Court Institute (NDCI) identifies nine core competencies of the drug court treatment provider.

- **Core Competency 1**: Participates fully as a drug court team member, committing him or herself to the program mission and goals and works as a full partner to ensure their success.
  - Attends regularly scheduled staffings.
  - Provide information regarding drug court participant’s progress to each team member.
  - Productively communicates with team so each member can make informed choices regarding drug court participants.
  - Protects integrity of drug court by providing competent treatment.
  - Remains abreast of best practice of the files.
  - Maintains up to date record of participant performance.

- **Core Competency 2**: Ensures that the participant receives the highest level of care available, at a reasonable cost, by all contracted and ancillary service providers. Develop post program services, client outreach, mentor programs and alumni associations.
  - Conducts regular quality assurance of all treatment and ancillary services.
  - Performs case autopsy on charts of participants who are discharged from the program as a method of quality improvement.
  - Creates treatment environment that is encouraging and restorative.
  - Maintains competent staff.
✓ Regularly reviews all client charts and maintains up to date record of participant performance.

○ Core Competency 3: Ensures that offenders are evaluated in a timely and competent process and that placement and transportation are effectuated in an expedited manner.
  ✓ Promptly processes referrals to drug court by completing treatment screens efficiently.
  ✓ Secures assistance from ancillary services as needed for participants.

○ Core Competency 4: Assists in providing advanced training in substance abuse, addiction, and treatment methodologies so as to provide the team with a meaningful basis to implement incentives and sanctions systems and design program protocols and procedures.
  ✓ Provides ongoing training to all team members.
  ✓ Supports most therapeutic application of incentives and sanctions.

○ Core Competency 5: As part of the drug court team, in appropriate non-court settings, such as staffings, the treatment provider advocates for effective incentives and sanctions for program compliance.
  ✓ Assures incentives and sanctions are given on a consistent and fair basis.
  ✓ Recommends therapeutic incentives and sanctions.
  ✓ Considers client behavior and shares relevant information with team.

○ Core Competency 6: Is knowledgeable of gender, age and cultural issues that may impact the offender’s success.
  ✓ Continues to attend training opportunities to inform team members about cultural competence.

○ Core Competency 7: Is knowledgeable about addiction, alcoholism and pharmacology generally and applies that knowledge to respond to compliance in a therapeutically appropriate manner.
  ✓ Continues to research effective treatment modalities.
  ✓ Conducts regular quality assurance.
  ✓ Actively participates in staffings.
  ✓ Attends all court sessions and staffing.

○ Core Competency 8: Contributions to the team’s efforts in community education and local resource acquisition.
  ✓ Ongoing research of potential funding streams.

○ Core Competency 9: Contributes to education of peers, colleagues and judiciary in the efficacy of drug courts.
  ✓ Maintains integrity of drug court program through quality assurance.
  ✓ Disseminates information about drug court as frequently as possible.
2-2.6 Drug Court Community Supervision Provider: The drug court community supervision officer actively monitors drug court participants outside of the drug court setting including conducting home and job visits. All client contact is documented and visits logged to help encourage positive participant behavior. The National Drug Court Institute (NDCI) identifies eight core competencies of the drug court community supervision provider.

- **Core Competency 1:** Participates fully as a drug court team member, committing him or herself to the program mission and goals and works as a full partner to ensure their success.
  - Promptly recommends offender to drug court when appropriate.
  - Assists in executing all participant waivers and contracts.
  - Advocated for prompt incentives and sanctions in response to client behavior.
  - Maintains up to date record of participant performance.
  - Attends and participates in client staffings by providing progress reports, making recommendations, and identifying supervision and ancillary services needed.

- **Core Competency 2:** Provides coordinated and comprehensive supervision so as to minimize participant manipulation and splitting of program staff. Develop post program services, client outreach, Mentor programs, and Alumni Associations.
  - Coordinates continuum of care through regular contact with treatment provider.
  - Advocates for continuum of care beyond treatment continuum to be inclusive of other community-based sources.

- **Core Competency 3:** Develops effective measures for drug testing and supervision compliance reporting that provide the team with sufficient and timely information to implement incentives and sanctions system.
  - Provides progress reports prior to client staffings.
  - Conduct home and field visits using strength's based approach.
  - Collect alcohol and drug testing in accordance with policy and report results to the team in a timely fashion.
  - Recommend appropriate incentives and sanctions based upon information gleaned from supervision.
  - Continually assess and review supervision and drug testing protocols and terms and conditions of supervision/probation regularly to ensure they are still working for the target populations.

- **Core Competency 4:** Coordinates the utilization of community-based services such as health and mental health services, victims' services, housing, entitlements, transportation, education, vocational training, job skills training and placement to provide a strong foundation for recovery.
  - Make on-going referrals for target population that is consistent with the treatment case plan.
Core Competency 5: Is knowledgeable about addiction, alcoholism and pharmacology generally and applies that knowledge to respond to compliance in a therapeutically appropriate manner.

✓ Continues to participate in on-going cross training to remain knowledgeable about addiction, alcoholism, and pharmacology.
✓ Utilize motivational interviewing techniques when interacting with the target population.
✓ Note relapse triggers and behaviors in the target population and report in a timely manner to the team.

Core Competency 6: Is knowledgeable of gender, age and cultural issues that may impact the offender’s success.

✓ Continues to participate in on-going cross training to remain knowledgeable about gender, age and cultural issues of the community and target population.

Core Competency 7: Contributes to the team’s efforts in community education and local resource acquisition.

✓ Acts as spokesperson to community leaders and organizations.
✓ Provides statistical information to use for grant writing or other funding acquisition.

Core Competency 8: Contributes to education of peers, colleagues and judiciary in the efficacy of drug courts.

✓ Acts as a spokesperson to peers, colleagues, and the judiciary.

2-2.7 The drug court policy manual shall:

- Identify each member of the drug court team;
- Identify the roles of each member of the drug court team;
- Identify the continuing education expectations for each team member;
- Be signed by each member of the drug court team; and
- Identify the approved procedure when the drug court judge is not available for staffing or court hearings.

2-3 Program Phases
The drug court program provides phases or levels toward program completion. Generally, the first phase focuses on orientation and stabilization with phase goals becoming progressively more difficult.

2-3.1 Phase completion shall be based not just on time in the program, but also:

- Progress toward treatment goals;
- Compliance with court orders; and
- Compliance with phase or level requirements.

2-3.2 The drug court participant handbook shall include requirements to complete each program phase or level which:

- Are clearly defined and measurable;
- Are standardized, but have the ability to be modified in order to best meet participants’ needs and serve diverse populations;
Identify the active treatment portion of the program is designed to be completed within twelve (12) months.
- May include a period of aftercare. If aftercare is identified in the program structure, it is designed to be completed within six (6) months.
- Include treatment attendance requirements.
- Include supervision requirements, including random substance testing.
- Identify any program fee requirements and anticipated payment schedule.
- Identify the participants’ responsibility of requesting phase or level advancement.

2-4 Eligibility Criteria and Referrals
Prompt identification and placement of eligible offenders into the drug court program is a priority in order to enhance positive outcomes. The drug court shall prioritize offenders for admission who are addicted to drugs or alcohol (high need) and whom are a substantial risk for reoffending or failing to complete a less intensive disposition (high criminogenic risk).

2-4.1 The drug court policy manual shall have identified eligibility criteria which:
- Are objective;
- Are well-defined; and
- Include exclusionary criteria.

2-4.2 The drug court policy manual shall identify the process by which eligible offenders are identified and considered for the drug court program including:
- Target timeline for legal eligibility review;
- Target timeline for treatment eligibility review. Treatment eligibility review shall include the administration of an approved criminogenic risk assessment and substance use disorder screen by a trained clinician, if one has not been conducted in the prior six (6) months; and
- Target timeline for the drug court team to review and determine eligibility.

2-5 Participant Orientation
Drug court participants shall be informed of their choice to decline or accept participation into the program. In order for applicants to make an informed decision regarding program participation, new participants shall receive a complete orientation to the program no later than ten (10) days after their plea into the program.

2-5.1 The drug court policy manual shall identify the procedures for participant orientation which:
- Identify the team member(s) responsible for completing program orientation;
- Are provided to all participants within the designated time period;
Include the distribution and review of the participant handbook that is written at a sixth grade reading level or below; and
Include the documentation of a signature and date that participant has been provided the orientation and a copy of the participant handbook.

2-6 Incentives, Sanctions, and Therapeutic Adjustments
The drug court model is based on the principle of behavior modification, rewarding positive behavior and sanctioning criminal behavior or administrative program violations. Research identifies that certainty and immediacy of drug court team responses to behavior are the two most important factors in the successful administration of incentives and sanctions.
Participants shall receive consequences without regard to their gender, race, ethnicity, nationality, socioeconomic status, or sexual orientation. Sanctions shall be provided without expressing anger or ridicule. Participants shall not be shamed or subjected to foul or abusive language. It is recommended that incentives be provided at a greater frequency than sanctions by a four (4) to one (1) ratio.

2-6.1 Incentives: The drug court places as much emphasis on incentivizing productive behavior as much as reducing crime and substance abuse. As participants progress through the program, incentives for achievements may decrease.

2-6.2 Progressive Sanctions: Jail sanctions shall be imposed judiciously and sparingly. Unless a participant poses an immediate risk to public safety, jail sanctions are imposed after less severe consequences have been ineffective at deterring infractions. As participants advance through the program, sanctions for infractions may increase in magnitude. Drug courts should impose sanctions in advance of a participant’s regularly scheduled court hearing. Sanctions should only be imposed by drug court judges’ order. Participants may be terminated from the program as per the Oklahoma Drug Court Act.

2-6.3 Therapeutic Adjustments: Therapeutic adjustments are appropriate if participants are otherwise compliant with their treatment and supervision requirements but are not responding to their treatment interventions. Such therapeutic adjustments include a modification of the treatment plan and may impact intensity or type of services provided. Modifications in treatment services should be based on the recommendations of the treatment professional.

2-6.4 The drug court policy manual shall identify the process for implementation of incentives and sanctions which:
- Identifies the regular monitoring of the delivery of incentives and sanction to ensure they are administered equivalently to all participants;
- Identifies the opportunity for participants to be heard to explain their perspectives concerning factual controversies and the imposition of incentives, sanctions, and therapeutic adjustments;
o Identifies that participants will receive a clear justification for why a particular consequence is or is not being imposed; and
o Identifies a written schedule of predictable sanctions and the right of the drug court team to use a reasonable amount of discretion to modify a presumptive consequence in light of circumstances presented in each situation.

2-6.5 The drug court participant handbook shall identify the process for implementation of incentives and sanctions which:
o Identifies which behaviors may elicit an incentive, sanction, or therapeutic adjustment;
o Identifies the range of consequences that may be imposed for identified behaviors;
o Identifies that a participant may be sanctioned to serve a term of confinement of six (6) months in an intermediate revocation facility operated by the Department of Corrections;
o Graduation criteria and the legal and collateral consequences. Graduation criteria should typically include a requirement for at least ninety (90) days of sobriety, employment or school attendance, and sober housing;
o Termination criteria and the legal and collateral consequences; and
o The right of the drug court team to use a reasonable amount of discretion to modify a presumptive consequence in light of circumstances presented in each situation.

SUBCHAPTER 3: SUPERVISION

3-1 Supervision
Reliable monitoring of participant behavior is a vital component of the success of a drug court program. Occurring in both office settings and in participants’ home and job, supervision shall be performed in a respectful manner. According to the NDCI, community supervision has seven (7) identified functions: (1) Protection of the public; (2) Providing accountability; (3) Enhancing drug refusal skills; (4) Identifying environmental threats; (5) Catching impending signs of relapse; (6) partnering with treatment; and (7) Enforcing community obligations.

3-3.1 The drug court policy manual shall include supervision information which:
o Describes the communication requirements between the team member responsible for community supervision and the drug court coordinator or designee, minimally occurring on a weekly basis.
o Identifies the documentation requirements of supervision contacts with participants.

3-3.2 The drug court participant handbook shall include:
o A specialized set of terms and conditions for community supervision which shall be reviewed with participants at regular intervals.
3-2 Substance Testing
Frequent and random substance testing is an essential element of the supervision of drug court participants. An accurate testing protocol is the most objective and efficient way to establish a framework for accountability and to gauge each participant’s progress. The testing process, coupled with immediate program responses, compels the participants to address their substance use. Substance testing shall be used as a tool to support recovery and engagement, not solely as a means to support sanctions.

3-2.1 The drug court policy manual shall identify the process of substance testing including:
  o Method(s) of testing which should be (a) scientifically valid, (b) legally defensible, and (c) therapeutically beneficial;
  o Individual(s) responsible for collection of samples;
  o Chain of custody for samples;
  o Minimal frequency of substance testing, no less than twice per week in phase one;
  o Results reporting; and
  o Process for lab confirmation upon participant objecting to test results.

3-2.2 The drug court participant handbook shall identify the participant requirements for substance testing including:
  o Method by which participant will be notified to submit to test and timeline by which they must respond;
  o Consequences of not submitting to substance test;
  o Explanation of a dilute sample and consequences of submitting a dilute sample;
  o Consequences of submitting a modified or tampered sample;
  o Established rules for collection of sample;
  o Identification of any restrictions to over the counter (OC) or prescription (Rx) medications or supplements; and
  o Process for requesting lab confirmation, including any required fee to do so.

3-3 Team Staffing
Frequent staffing provides an open forum in which everyone involved in a case can gather to share information, discuss issues, and reach consensus on the next step(s) toward a participant’s successful rehabilitation and completion of the drug court program.
The drug court team shall have team staffing prior to the drug court docket. The drug court program model supports all members of the team having input with the judge being the ultimate arbiter of factual controversies and making the final decisions concerning the imposition of incentives or sanctions that affect a participant’s legal status or liberty. While the specific roles of the team members...
differ, the goal of maintaining a therapeutic environment shall be forefront in decisions.

3-3.1 The drug court policy manual shall identify the process of team staffing including:
- Addressing participants on an individual basis;
- Include team discussion on the implementation of incentives and sanctions;
- Include team discussion of treatment and support service’s needs;
- Allow for input from all team members;
- Resolving any disagreements between team members so as to present a united front in court;
- Frequency of team staffing;
- Location and time of team staffing; and
- Team members whom regularly attend team staffing.

3-4 Court Hearings
The drug court team shall hold court hearings no less frequently than every two weeks for those in the first phase of the program and no less than every four weeks until participants are in the last phase of the program. Frequent court hearings establish and reinforce the drug court’s policies, ensure participants’ needs are being met, and provide supervision and accountability of each drug court participant. Participants shall ordinarily appear before the same judge throughout their enrollment in the drug court program. Studies have consistently found that drug court participants perceive the quality of their interactions with the judge to be among the most influential factors for success in the program.

3-4.1 The drug court policy manual shall identify the process for court hearings including:
- Frequency of court hearings;
- Location and time of court hearings; and
- Team members whom regularly attend court hearings.

3-4.2 The drug court participant handbook shall identify the participant requirements for court hearings including:
- Typical attendance requirements by program phase;
- Current location and time of court hearings; and
- Any rules or restrictions set by the drug court with regard to behavior, attire, and attendance expectations.

SUBCHAPTER 4: TREATMENT

4-1 Treatment Services
Behavioral health treatment services are a vital component of the success of a drug court program. Individualized to each participant’s needs, treatment
services shall be based in sound theory and provided through evidence-based interventions. According to the NDCI, behavioral health treatment services have three (3) identified functions: (1) Motivation; (2) Insight; and (3) Behavioral skills.

4-1.1 Treatment services provided to drug court participants shall include:
- A continuum of care for substance abuse treatment including ASAM levels of care: detoxification (including ambulatory), residential, sober living, day treatment, intensive outpatient, and outpatient services. Placement into a particular level of care shall only occur when supported by the most recent version of the ASAM Patient Placement Criteria. If identified level of care is not readily available, interim services at the next available ASAM level of care shall be provided;
- The provision of six (6) to ten (10) hours of services, ordinarily, during the initial phase of treatment and approximately 200 hours of services over nine (9) to twelve (12) months. However, the drug court allows for flexibility to accommodate individual differences in each participant’s response to treatment;
- Behavioral or cognitive behavioral treatments that are manualized and have been demonstrated to improve outcomes for addicted persons involved in the criminal justice system;
- Medications, as clinically appropriate based on medical necessity as determined by a treating physician with expertise in addiction psychiatry, addiction medicine, or closely related field;
- Screening for mental illness and history of trauma/PTSD (Post Traumatic Stress Disorder);
- Offering treatment services immediately upon identification of clinical eligibility (prior to plea);
- Group-based and individual-based interventions for all participants;
- Gender specific services;
- Parenting classes;
- Anger management classes;
- Family/domestic relations classes;
- Criminal thinking intervention;
- Skill building and problem solving intervention;
- Relapse prevention;
- Mental health treatment (as clinically appropriate);
- *(Recommended)* Aftercare follow-up contacts.

4-1.2 The drug court policy manual shall include treatment information which:
- Describes the communication requirements between the treatment representative(s) and the drug court coordinator or designee, minimally occurring on a weekly basis in writing;
- If multiple treatment providers are utilized, identified the procedure by which the agency is selected to provide services to each participant;
- If the drug court program utilizes a treatment agency that is not contracted with ODMHSAS for drug court treatment services, the drug
court team shall determine annually that the treatment agency is certified by ODMHSAS, a federally recognized tribal entity, Veteran's Affairs, or equivalent certifying agency if the agency is out of state. If a drug court participant enters a facility which does not meet the criteria listed above, the drug court team shall not identify this participant as active for purposes of drug court funding or active participant count.

4-1.3 The drug court participant handbook shall include:
- Typical attendance requirements by program phase;
- Contact information for treatment provider;
- A description of the treatment providers’ reporting requirements to the drug court team;
- Treatment services available; and
- Duration of treatment services.

4-2 Service Collaboration
In addition to behavioral health treatment needs, drug court participants frequently have multiple needs requiring service agency collaboration (ex. housing, medical, transportation, etc.). Holistic care is recognized as the standard of care in drug court programs. ODMHSAS encourages the use of peer support programs such as Alcoholics Anonymous, Narcotics Anonymous, SMART Recovery, etc. However, if attendance at a peer support program is mandated, drug court programs shall offer both secular and non-secular options for attendance.

4-2.1 The drug court policy manual shall include service collaboration information which:
- Identifies partnering community and state agencies which provide services to drug court participants;
- Identification of the participants’ right to refuse care for ancillary services; and
- Identifies resources and services to special populations served by the drug court program (ex. veterans, families with children, etc.).

SUBCHAPTER 5: PARTICIPANT RIGHTS

5-1 Confidentiality
Open communication between multiple agencies and offices is a hallmark of the drug court program model. However, much of the information necessary to discuss, all information related to identity, diagnosis, prognosis, or treatment of any patient in a substance abuse program, is protected by 42 CFR Part 2. As
such, drug court programs shall maintain the ability to communicate this protected health information through appropriate participant written consent. A consent for release of information shall not be valid if: (A) The expiration date has passed; (B) The release has not been filled out with all required information identified in 5-1.1; or (C) The participant does not give consent freely and voluntarily.

5-1.1 The drug court policy manual shall identify confidentiality practices which:
- Require the use of consents for release of information, prior to disclosure of information, which include:
  (A) The statement, in bold font, “The information authorized for release may include records which may indicate the presence of a communicable disease”;
  (B) The specific name or general designation of the program or person permitted to make the disclosure;
  (C) The name or title of the individual or the name of the organization to which disclosure is being made;
  (D) The name of the consumer whose records are to be released;
  (E) A description of the information to be disclosed;
  (F) The dated signature of the consumer, or authorized representative, or both when required;
  (G) Purpose of the disclosure;
  (H) An expiration date, event or condition which, shall ensure release will last no longer than reasonably necessary to serve the purpose for which it is given; and
  (I) If the release is signed by a person authorized to act for a consumer, a description of the authority of such person to act;
- Identify the team member responsible for collection of consents for release of information;
- Identify the secure storage procedure of any records which contain protected health information; and
- Identify circumstances in which protected health information may be disclosed without consent for release of information (ex. child abuse/neglect, cause of death, immediate threat to self, etc.).

5-1.2 The drug court participant handbook shall identify confidentiality information including:
- A brief description of protected health information;
- The role of consents for release of information in the drug court program; and
- The limits to confidentiality.

5-2 Consumer Rights
Aside from being a drug court best practice which has been shown to enhance positive outcomes, the respectful treatment of drug court participants is a right of each person in the program. Drug court participants shall have those protections
identified in OAC Title 450 Chapter 15, which identifies the rights of individuals receiving services, either voluntarily or involuntarily, in a public or private agency, corporation, partnership, or entity operated or certified by ODMHSAS or with which ODMHSAS contracts to provide the physical custody, detention or treatment of consumers. Dual relationships are a consumer rights’ issue which is expected to occur from time to time. Especially in rural areas, former interactions between drug court team members and participants (ex. employee/employer, familial, etc.) should be recognized as an important issue to the drug court team and steps taken to minimize the impact on the participant should occur.

5-2.1 The drug court policy manual shall identify consumer rights information which:
  o Identifies that drug court team members shall avoid creating new dual relationships with drug court participants (ex. employee/employer, romantic, etc.);
  o Establishes agreed upon guidelines by the drug court team for instances of prior relationships between drug court team members and drug court participants. This shall include notification and documentation requirements and steps to minimize impact of prior relationship on participation;
  o Identifies a grievance process which provides participants the ability to make formal complaints regarding alleged violations of consumer rights. Policy shall: (A) Identify the team member responsible for coordinating the program’s grievance process; and (B) Identify the team members authorized to make decisions on a grievance.

5-2.2 The drug court participant handbook shall identify consumer rights information which:
  o Identifies the participant’s rights to respectful treatment while in the program;
  o Identifies a grievance process which shall: (A) Identify the method by which participants can file a grievance; (B) Identify a timeframe for the grievance process which allows for an expedient resolution, not to exceed fourteen (14) days; and (C) Include the provision of written notification to the participant of the outcome and mechanism by which the participant can appeal the outcome.
  o Include the phone number to the ODMHSAS Consumer Advocate’s Office.

**SUBCHAPTER 6: FISCAL RESPONSIBILITIES**

6-1 Participant Fees
Drug court programs shall follow the requirements of the “Oklahoma Drug Court Act” and ODMHSAS Drug Court contracts with regard to the charge and collection of participant fees.
6-1.1 The drug court policy manual shall identify:
   o The procedure for the collection of participant fees;
   o The amount of participant fees to be charged to program participants.

6-1.2 The drug court participant handbook shall clearly identify:
   o Amount of participant fees, detailed by type of fee (ex. program fee, supervision fee, etc.);
   o Required schedule for payment of fees; and
   o Participant expectations of fee collection (ex. receipt issued, etc.)

6-2 Accounting Procedures
Drug court programs shall have accounting practices which follow the “Recommended Drug Court Accounting Procedures” published by the State of Oklahoma Auditor and Inspector.

6-3 Expenditure Reports
Drug court programs shall submit quarterly expenditure reports to ODMHSAS as detailed in FY2016 Oklahoma Adult Drug Court Administrative Contract requirements.

SUBCHAPTER 7: DATA REPORTING

7-1 Data Reporting
Drug courts shall participate in the ODMHSAS required data reporting and evaluation process. This shall minimally include: (A) Coordinators enter required data into the ODMHSAS drug court web-based reporting system, DCWEBS, by the first (1st) of each month; and (B) Treatment providers enter data into the Medicaid Management Information System (MMIS) in accordance with established procedures.

7-2 Performance Improvement
Evaluation and performance improvement are important components of drug court programs. Research identifies that programs which utilize data to impact program functions have better outcomes that those programs which do not. Further, drug court programs which meet outside of traditional staffing and court hearings to target performance improvement measures similarly show improved results.

ODMHSAS provides outcomes and other select reports, on at least a quarterly basis, to each drug court program. Many program evaluation reports are available on DCWEBS and additional information may be requested from ODMHSAS to assist with program evaluation.

7-2.1 The drug court policy manual shall identify business meetings on at least an annual basis which:
Include all drug court team members;
Include a review of program outcomes and other data reports;
Focus on performance improvements; and
Include a review of the policy manual, participant handbook, and team organizational processes.

**SUBCHAPTER 8: DOCUMENTATION**

**8-1 Documentation**

Drug court programs shall maintain documentation requirements which minimally include:

**8-1.1 Drug Court File:** The drug court file shall be stored separately from treatment and public records and shall be maintained in a secured, locked environment not accessible to individuals whom are not a part of the drug court team, including program participants. The drug court file shall minimally include:

- Plea date;
- Current case number;
- Documentation of any prior felony charges, including case number and county/state of prior felony charge;
- Current program phase;
- Current status (AWOL, In-custody, Active, IRF, etc.)
- Graduation/Revocation date, as applicable;
- Signed acknowledgement of participant handbook receipt;
- Signed participant contract;
- Documentation of final disposition, as applicable;
- Chronological reports which contain information regarding supervision contact with a participant including: (A) Date, (B) Time, (C) Location, (D) Team members’ signature. This includes, but is not limited to, home visits, office visits, substance testing, missed appointments, and telephone calls. If supervision is provided by staff of state or municipal supervision entities, such as Department of Corrections, their documentation requirements shall supersede this section;
- Screening reports from treatment providers;
- Treatment update reports from treatment providers;
- Consents for release of information;
- Requests for travel, if the drug court program requires such requests;
- Documentation signed by participant, or copy provided to participant at time of sanctioning, identifying violation and requirements of completing sanction including date sanction is to be completed;
- Substance testing records which identifies: (A) Substance tested for; (B) Method of testing; (C) Results; (D) Signature of individual administering test; and (E) Participant signature;
- Documentation of phase ups, including dates; and
- Copies of participant receipts, when drug court fines or fees are not collected directly by the court clerk.
8-1.2 Treatment Record: The treatment record shall maintain the original treatment documentation and shall remain with the respective treatment agency in accordance with applicable sections of OAC Title 450.

8-1.3 Public Court Record: The public court record shall be stored separately from the drug court file and treatment record in accordance with applicable state and federal laws.