

Drug Court Treatment Best Practice Checklist

Self- assessment for Oklahoma's Adult Drug Court
Treatment Providers

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Oklahoma Department of Mental Health and Substance Abuse Services

Recovery is Reality in Oklahoma

ODMHSAS Drug Court Treatment Best Practices Checklist

Below you will find a checklist of drug court best practices covering four program areas: *Substance Abuse Treatment; Complimentary Treatment and Social Services; Multidisciplinary Team; and Census and Caseload*. This checklist is intended to be used as a guide for quickly identifying adherence to best practices (using the Overview of Results section) and providing feedback on specific best practice standards.

Treatment Provider:

Date:

Overview of Results

Standards Section	Score
1. Substance Abuse Treatment	/20
2. Complimentary Treatment and Social Services	/28
3. Multidisciplinary Team	/12
4. Census and Caseload	/12
Overall Score	/72

Individual Standards Results

Volume I. Section V. Substance Abuse Treatment

Participants receive substance abuse treatment based on a standardized assessment of their treatment needs. Substance abuse treatment is not provided to reward desired behaviors, punish infractions, or serve other non-clinically indicated goals. Treatment providers are trained and supervised to deliver a continuum of evidence-based interventions that are documented in treatment manuals.

1. Substance Abuse Treatment

Overall _____ / **20**

Standard	Continuum of Care: Drug court offers a continuum of care for substance abuse treatment including detoxification, residential, sober living, day treatment, intensive outpatient, and outpatient services.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		

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Standard	Continuum of Care: Standardized placement criteria govern the level of care that is provided.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Continuum of Care: Adjustments to the level of care are predicated on each participant's response to treatment and are not tied to the Drug Court's programmatic phase structure.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Continuum of Care: Participants do not receive punitive sanctions or an augmented sentence if they fail to respond to a level of care that is substantially below or above their assessed treatment needs.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	<p>Team Representation: One or two treatment agencies are primarily responsible for managing the delivery of treatment services for Drug Court participants.</p> <p>If more than two agencies provide treatment to Drug Court participants, communication protocols are established to ensure accurate and timely information about each participant's progress in treatment is conveyed to the Drug Court team.</p>	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		

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Standard	Team Representation: Clinically trained representatives from treatment agencies are core members of the Drug Court team and regularly attend team meetings and status hearings.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Treatment Dosage and Duration: Participants receive a sufficient dosage of substance abuse treatment to achieve long-term sobriety and recovery from addiction. <ul style="list-style-type: none"> ✓ Initial phase: 6-10 hours of treatment ✓ Total program: 200 hours over 9-12 month ✓ Flexible requirements to accommodate individual differences in treatment needs 	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Treatment Modalities: Participants meet with a treatment provider for at least one individual session per week during the first phase.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Treatment Modalities: The frequency of individual sessions may be reduced subsequently if doing so would be unlikely to precipitate a behavioral setback or relapse.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Treatment Modalities: Participants are screened for their suitability for group interventions, and group membership is guided by evidence-based selection criteria including: gender, trauma history, and co-occurring psychiatric symptoms.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		

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Standard	Evidence-Based Treatments: Treatment providers administer behavioral or cognitive-behavioral treatment that are documented in manuals and have been demonstrated to improve outcomes for addicted persons involved in the criminal justice system.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Evidence-Based Treatments: Treatment providers are proficient at delivering the interventions and are supervised regularly to ensure continuous fidelity to the treatment models.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Medications: Participants are prescribed psychotropic or addiction medications based on medical necessity as determined by a treating physician with expertise in addiction psychiatry, addiction medicine, or closely related field.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Provider Training and Credentials: Treatment providers are licensed or certified to deliver substance abuse treatment, have substantial experience working with criminal justice populations, and are supervised regularly to ensure continuous fidelity to evidence-based practices.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Peer Support Groups: Participants regularly attend self-help or peer support groups in addition to professional counseling.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	The peer support groups follow a structured model or curriculum such as the 12 step or Smart Recovery models.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		

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Standard	Peer Support Groups: Before participants enter the peer support groups, treatment providers use an evidence-based preparatory intervention, such as 12-step facilitation therapy, to prepare the participants for what to expect in the groups and assist them to gain the most benefits from the groups.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Continuing Care: Participants complete a final phase of the Drug Court focusing on relapse prevention and continuing care.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Continuing Care: Participants prepare a continuing-care plan together with their counselor to ensure they continue to engage in prosocial activities and remain connected with a peer support group after their discharge from Drug Court.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Continuing Care: For at least the first ninety days after discharge from the Drug Court, treatment providers attempt to contact previous participants periodically to check progress, offer brief advice and encouragement, and provide referrals for additional treatment when indicated.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		

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Volume II. Section VI. Complimentary Treatment and Social Services

Participants receive complimentary treatment and social services for conditions that co-occur with substance abuse and are likely to interfere with their compliance in Drug Court, increase criminal recidivism, or diminish treatment gains.

2. Complimentary Treatment and Social Services

Overall _____ / 28

Standard	Scope of Complimentary Services: The Drug Court provides or refers participants for treatment and social services to address conditions that are likely to interfere with their response to substance abuse treatment or other Drug Court services (responsivity needs), to increase criminal recidivism (criminogenic needs, or to diminish long-term treatment gains (maintenance needs).	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Sequence and Timing of Services: In addition to treatment services targeting addiction Phase One: Services primarily address responsivity needs (housing, mental health, withdrawal, etc.) Interim Phases: Services address criminogenic needs Later Phases: Services address the maintenance of treatment gains by enhancing long-term adaptive functioning (vocational and educational counseling)	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Clinical Case Management: Participants meet individually with a “clinical case manager” or comparable treatment professional at least weekly during the first phase.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		

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Standard	Housing Assistance: As needed, participants receive assistance finding safe, stable, and drug free housing beginning in the first phase of the Drug Court, and ongoing as necessary.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Housing Assistance: Participants are not excluded from participation in Drug Court because they lack a stable place of residence.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Mental Health Treatment: Participants are assessed using a validated instrument for major mental health disorders that co-occur frequently in Drug Courts.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Mental Health Treatment: Participants in need of mental health treatment receive necessary services beginning in the first phase of Drug Court.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Mental Health Treatment: Participants receive psychiatric medication based on a determination of medical necessity or medical indication by a qualified medical provider.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Mental Health Treatment: Applicants are not denied entry to Drug Court because they are receiving a lawfully prescribed psychiatric medication.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		

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Standard	Mental Health Treatment: Participants are not required to discontinue lawfully prescribed psychiatric medications as a condition of graduating from Drug Court.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Trauma-Informed Services: Participants are assessed using a validated instrument for trauma history, trauma-related symptoms, and posttraumatic stress disorder (PTSD).	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Trauma-Informed Services: Participants with PTSD receive an evidence-based intervention that teaches them how to manage distress without resorting to substance abuse or other avoidance behaviors, desensitizes them gradually to symptoms of panic and anxiety, and encourages them to engage in productive actions that reduce the risk of re-traumatization.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Trauma-Informed Services: Participants with PTSD or severe trauma-related symptoms are evaluated for their suitability for group interventions and are treated on an individual basis or in small groups when necessary.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Trauma-Informed Services: Female participants receive trauma-related services in gender-specific groups.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Trauma-Informed Services: All Drug Court team members, including court personnel and other criminal justice professionals, receive formal training on delivering trauma-informed services.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		

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Standard	Criminal Thinking Interventions: Participants receive an evidence-based criminal thinking intervention after they are stabilized clinically and are no longer experiencing acute symptoms of distress (cravings, withdrawal, depression, etc.)	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Criminal Thinking Interventions: Staff members are trained to administer a standardized and validated cognitive-behavioral criminal thinking intervention such as Moral Reconciliation Therapy, Thinking for a Change, or Reasoning and Rehabilitation.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Family and Interpersonal Counseling: When feasible, at least one reliable family member/friend is enlisted to provide firsthand observations to staff about participants' conduct outside of the program, to help participants arrive on time for appointments, and help participants satisfy other reporting obligations in the program.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Family and Interpersonal Counseling: After participants are stabilized clinically, they receive an evidence-based cognitive behavioral intervention that focuses on improving their interpersonal communication and problem-solving skills, reducing family conflicts, and eliminating associations with substance-abusing and antisocial peers and relatives.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		

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Standard	Vocational and Educational Services: Participants with deficient employment or academic histories receive vocational or education services beginning in a last phase of Drug Court.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Vocational and Educational Services: Vocational or educational services are delivered after participants have found safe and stable housings, their substance abuse and mental health symptoms have resolved substantially, they have completed a criminal thinking intervention, and are spending more of their time interacting with prosocial and sober peers.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Vocational and Educational Services: Vocational interventions are standardized and cognitive behavioral in orientation. They teach participants to find a job, keep a job, and earn a better or higher-paying job in the future through continuous self-improvement.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Vocational and Educational Services: Participants are required to have a stable job, be enrolled in a vocational or educational program, or be engaged in comparable prosocial activity as a condition of graduating from Drug Court.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Vocational and Educational Services: Continued involvement in work, education, or comparable prosocial activity is a component of each participant's continuing care plan.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		

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Standard	Medical and Dental Treatment: Participants receive immediate medical or dental treatment for conditions that are life-threatening, cause serious pain or discomfort, or may lead to long-term disability or impairment.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Medical and Dental Treatment: Treatment for nonessential or non-acute conditions that are exacerbated by substance abuse may be provided in a late phase of Drug Court or included in the participant's continuing care plan.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Prevention of Health-Risk Behaviors: Participants complete a brief evidence-based educational curriculum describing concrete measures they can take to reduce their exposure to sexually transmitted and other communicable diseases.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Overdose Prevention and Reversal: Participants complete a brief evidence-based educational curriculum describing concrete measures they can take to prevent or reverse drug overdose.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		

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Volume II. Section VIII. Multidisciplinary Team

A dedicated multidisciplinary team or professionals manages the day-to-day operations of Drug Court, including reviewing participant progress during pre-court staff meetings and status hearings, contributing observations and recommendations within team members' respective areas of expertise, and delivering or overseeing the delivery of legal, treatment and supervision services.

3. Multidisciplinary Team

Overall / 12

Standard	Team Composition: The Drug Court team comprises representatives from all partner agencies involved in the creation of the program, including but not limited to judge, coordinator, prosecutor, defense counsel, treatment representative, community supervision officer, and law enforcement.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Pre-Court Staff Meetings: Team members consistently attend pre-court staff meetings to review participant progress, determine appropriate actions to improve outcomes, and prepare for status hearings in court.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Sharing Information: Team members share information as necessary to appraise participants' progress in treatment and compliance with the conditions of the Drug Court.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Sharing Information: Partnering agencies execute memoranda of understanding (MOUs) specifying what information will be shared among team members.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		

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Standard	Sharing Information: Participant provide voluntary and informed consent permitting team members to share specific data elements relating to participants’ progress in treatment and compliance with program requirements.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Sharing Information: Scope of the disclosure must be limited to the minimum amount necessary to achieve the intended aims of the disclosure.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Sharing Information: Team members may ordinarily share information pursuant to a valid waiver to the degree necessary to ensure that participants are progressing adequately in treatment and complying with other conditions of the program.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Sharing Information: Minimum information provided includes... <ul style="list-style-type: none"> ✓ Assessment results pertaining to a participant’s eligibility for Drug Court and treatment and supervision needs; ✓ Attendance at scheduled appointments; ✓ Drug and alcohol testing results (if treatment has access); ✓ Attainment of treatment plan goals, such as completion of a required counseling regimen; ✓ Evidence of symptom resolution, such as reductions in drug cravings or withdrawal symptoms; ✓ Evidence of treatment-related attitudinal improvements, such as increased insight or motivation for change; ✓ Attainment of Drug Court phase requirements, such as obtaining and maintaining employment or enrolling in an educational program; ✓ Compliance with electronic monitoring, home 	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)

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	<p>curfews, travel limitations, and geographic or association restrictions;</p> <ul style="list-style-type: none"> ✓ Adherence to legally prescribed and authorized medically assisted treatments; ✓ Procurement or unauthorized prescriptions for addictive or intoxicating medications; ✓ Commission of or arrests for new offenses; and ✓ Menacing, threatening, or disruptive behavior directed at staff members, participants or other persons. 	
Notes		
Standard	<p>Team Communication and Decision Making: Team members contribute relevant insights, observations, and recommendations based on their professional knowledge, training, and experience.</p>	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	<p>Status Hearings: Team members attend status hearings on a consistent basis. During the status hearings, team members contribute relevant information or recommendations when requested by the judge or as necessary to improve outcomes or protect participants' legal interests.</p>	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		

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Standard	Team Training: Team members attend continuing education workshops on at least an annual basis to gain up-to-date knowledge about best practices on topics including substance abuse and mental health treatment, complimentary treatment and social services, behavior modification, community supervision, drug and alcohol testing, team decision making, and constitutional and legal issues in Drug Courts.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Team Training: New staff hires receive a formal orientation training on the Drug Court model and best practices in Drug Courts as soon as practicable after assuming their position and attend annual continuing education workshops thereafter.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		

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Volume II. Section VIII. Census and Caseloads

The Drug Court serves as many eligible individuals as practicable while maintaining continuous fidelity to best practice standards.

4. Census and Caseloads

Overall _____ / 12

Standard	Drug Court Census: The Drug Court does not impose arbitrary restrictions on the number of participants it serves.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Drug Court Census: When the census reaches 125 active participants, program operations are monitored carefully to ensure they remain consistent with best practice standards.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Drug Court Census: If evidence suggests some operations are drifting away from best practices, the team develops a remedial action plan and timetable to rectify the deficiencies and evaluated the success of the remedial actions.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		
Standard	Clinician Caseloads: Caseloads for clinicians must permit sufficient opportunities to assess participant needs and deliver adequate and effective dosages of substance abuse treatment and indicated complimentary services.	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		

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Standard	<p>Clinician Caseloads: Program operations are monitored carefully to ensure adequate services are delivered when caseloads exceed the following thresholds:</p> <ul style="list-style-type: none"> ✓ 50 active participants for clinicians providing clinical case management; ✓ 40 active participants for clinicians providing individual therapy or counseling; and ✓ 30 active participants for clinicians providing both clinical case management and individual therapy or counseling. 	<input type="checkbox"/> Fully Met (1) <input type="checkbox"/> Partially Met (.5) <input type="checkbox"/> Not Met (0)
Notes		