

INTERNAL WORKING DOCUMENT

Best Practice Standard V - Substance Abuse Treatment

Objective:

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 nonclinically indicated goals. Treatment providers are trained and supervised to deliver a continuum of evidence-based interventions that are documented in treatment manuals.

N	Non-Compliant
P	Partially Compliant
C	Compliant

Dec	Apr	Aug

NOTES

C Team Representation				
One or two agencies are primarily responsible to manage delivery of service				
Mental health representation is clinically trained				
Substance abuse treatment representation is clinically trained				
Core team member treatment providers regularly attend staff meetings and court hearings				
Client information is conveyed to the Drug Court team in an efficient and timely manner				
H Provider Training & Credentials				
Mental health representation is licensed and certified				
Substance abuse treatment representation is licensed and certified				
Treatment providers receive three days of preimplementation training				
Treatment providers receive periodic booster trainings				
Treatment providers receive monthly individualized supervision and feedback				

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Treatment providers maintain fidelity to evidence-based treatments				
Treatment providers have experience working with the criminal justice population				
D Treatment Dosage and Duration				
Participants receive six to ten hours of counseling per week during the first phase of treatment				
Participants receive approximately two-hundred hours of counseling over nine to twelve months				
Treatment is flexible to allow for individual needs and differences of the participants				
E Treatment Modalities				
Participants receive one individual counseling session with treatment or case manager per week during the first phase of the program				
Participants are screened for their suitability for group-based services				
Treatment groups have a minimum of four participants				
Treatment groups do not exceed twelve participants				
Treatment groups have two facilitators				
Group membership is based on gender, trauma, and co-occurring psychiatric symptom				
Services are offered to participants who require individualized sessions or specialized groups				
I Peer Support Groups				
Participants regularly attend self-help or peer support groups in addition to counseling				
Self-help and peer support groups follow a structured model or curriculum (12-Step model, Smart Recovery model)				
Participants attend a facilitated preparatory group to know what to expect before starting peer support groups				

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Treatment providers provide participants with an evidence-based preparatory intervention (12-Step Facilitation Therapy)				
A Continuum of Care				
Participants have access to detoxification services				
Participants have access to residential services (inpatient, medically monitored)				
Participants have access to sober living services				
Participants have access to day treatment services or intensive outpatient services.				
Participants have access to outpatient services				
All participants' level of care is based on a treatment needs assessment or reevaluation				
Participants receive the level of care that is warranted from their assessment results				
All participants receive equivalent services				
F Evidence-Based Treatments				
Participants receive behavioral or cognitive-behavioral counseling interventions				
Interventions are documented in treatment manuals				
Treatment providers are trained to deliver the interventions reliably according to the manual				
Fidelity to the treatment model is maintained through continuous supervision of the treatment providers				
B In-Custody Treatments				
Participants are not incarcerated to obtain access to detoxification services				
Participants are not incarcerated to obtain access to sober living quarters				
Treatment providers do not administer in-custody treatment				
G Medications				

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Participants have access to medically assisted treatment				
Treating physicians have expertise in addiction psychiatry, addiction medicine, or a closely related field				
Participants are prescribed psychotropic or addiction medication by a medical professional based on medical necessity				
J Continuing Care				
Participants complete a final phase of the Drug Court focusing on relapse prevention and continuing care				
Participants prepare a continuing care plan together with their counselor to ensure they will continue to engage in prosocial activities and remain connected with a peer support group after Drug Court				
For at least the first ninety days after discharge from the Drug Court, treatment providers attempt to contact previous participants periodically to check on their progress, offer brief advice and encouragement, and provide referrals for additional treatment when indicated				

100%
99%-80%
79%-0%

- **Compliant**
- **Partially Compliant**
- **Non-Compliant**

Dec
Apr
Aug

Total Compliance: