

**FY 2022**

**Problem-Solving Courts  
Annual Report**



Administrative Office of the Courts

November 2022

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## Executive Summary

Supporting Maryland's network of problem-solving court programs continues to be a vitally important part of the Judiciary's mission to provide fair, efficient, and effective justice for all. Except for a brief resumption of COVID-related (restricted) operations from January through March of 2022, fiscal year (FY) 2022 largely signified an operational return to normal for Maryland's problem-solving court (PSC) teams with in-person staffings, hearings, case management, graduations, and treatment sessions gradually overtaking the default position of virtual platforms. Throughout FY 2022, in Maryland and across the country, mask mandates were lifted, and people were once again permitted to dine closely in restaurants and attend indoor sporting events. Yet, a return to more normal operations for the Judiciary, the state, and country did not carry over to the individuals and families served by Maryland's PSCs. Statistics reported by the Maryland Department of Health indicate unintentional drug and alcohol-related overdoses increased by nearly 3% from January 2021 through September 2021, over the same time period in 2020. Anecdotally, Maryland's PSC teams also noted the persistence of pandemic-related substance use increases and associated complications such as heightened suicide risk, and negative mental and physical health effects. In response, PSC teams continued to look for ways to do better; to do more. In addition to increasing the frequency of case management contacts, treatment encounters, and drug testing, throughout FY 2022, teams expanded their monitoring and evaluation efforts to regularly measure program performance and fine-tune adherence to best practices. Using all tools available, Maryland's PSC teams continued to innovate, respond, and operate with an enhanced urgency and awareness.

Throughout Maryland, PSCs represent the most intensive, community-based programs available to address aberrant behavior associated with substance use disorder and mental illnesses. During FY 2022, 3,148 individuals participated in Maryland's PSCs. Judges and magistrates met with those program participants nearly 22,672 times in scheduled court hearings.

At the end of FY 2022, there were 62 PSCs in Maryland: 37 drug courts, seven truancy reduction courts, seven veterans' courts, eight mental health courts, two re-entry courts, and one Back-On-Track program.

PSCs vary considerably by jurisdiction and case type. However, all focus on collaborating with the service communities in their jurisdictions and stress a multidisciplinary problem-solving approach to address the underlying issues of individuals appearing in court.

Using its FY 2022 appropriation, the Judiciary provided more than \$7 million in grants to support PSCs in circuit and District Court locations. These funds were used for staffing, treatment, drug testing, travel and training, remote court needs, and ancillary services that directly benefit court participants.

The Judiciary continues to provide direct assistance to both planned and operational programs to support continued positive outcomes and sustainability. The Judiciary continues to set high expectations for monitoring and evaluating PSCs to maintain best practices.

### Problem-Solving Court Definition

Problem-solving courts address matters that are under the court's jurisdiction through a multidisciplinary and integrated approach that incorporates collaboration among court, government, and community-based organizations.

## Oversight

### *Administrative Office of the Court's (AOC) Office of Problem-Solving Courts*

As part of the Judiciary's mission to provide fair, efficient, and effective justice for all, the Office of Problem-Solving Courts (OPSC) assists PSC programs to develop, maintain, and advance a collaborative therapeutic system. OPSC has overseen the creation of PSCs in 23 of the 24 jurisdictions in Maryland and works with public and private stakeholders to develop and establish best practices in PSCs.

OPSC oversees the financial support for Maryland's PSCs, enforces programmatic guidelines, maintains a statewide management information system, and identifies new and expanding populations for PSCs. Working with justice partners, OPSC continues to serve as the courts' liaison to sustain and advance PSCs in Maryland.

### *Direct Assistance*

OPSC provides direct assistance, expertise, and guidance to PSCs, helping them to improve operations, services, and communications. PSC teams may address protocol development, ancillary services, treatment service/types, funding opportunities, court proceedings, and role clarification through this assistance. Teams also discuss and devise plans to institute new research and evidence-based practices into their current operations.

Direct assistance to Maryland's PSCs includes guidance to improve drug testing policies,

enhance sanction and incentive responses, rework and expand program entrance criteria, develop therapeutic responses to relapse, and understand the roles and responsibilities of each team member. The teams also review staffing processes and court proceedings to help their programs operate more efficiently, effectively, and consistently.

In FY 2022, OPSC staff had **757** face-to-face or virtual contacts with programs in the field ranging from attending events such as graduations, completing programmatic site visits, attending program staffing and court hearings, and completing financial (grant) visits.

### *Monitoring and Evaluation*

The Statewide Maryland Automated Record Tracking (SMART) system is a web-based data management system that allows the collection and standardization of data related to PSC

Maryland's problem-solving court judges met with participants **22,672** times in court hearings during FY 2022.

outcomes. SMART provides PSC team members with direct access to information needed for making informed decisions about participants and the court. SMART is a multi-purpose tool used for identifying and prioritizing participant needs, developing knowledge about services available across agencies, and obtaining immediate access to information about participant status. In addition, individual PSCs use SMART data to generate presentations for local community

and oversight boards, report mandated data to state or federal stakeholders, provide outcome information and continuous quality improvement activities to accrediting bodies, and to evaluate program and service effectiveness.

Through an agreement with the University of Maryland's Institute for Governmental Services and Research (IGSR), PSCs across Maryland are supported in maintaining their

data. In addition to responding to thousands of technical assistance and training questions, IGSR’s project team developed a SMART Case Management training curriculum for all PSC case managers. IGSR also modified several components of SMART to better capture data relating to the adult drug court performance measures as well as participant employment and education.

**Research in Action**

In FY 2022, the OPSC and the AOC’s Research and Analysis (R&A) department continued its effective collaboration to establish and build out a shared vision for a comprehensive monitoring and evaluation infrastructure. Treatment court research establishes that regular monitoring of adherence to

**Your Court’s Best Practice Needs**  
 Hover over a Best Practice statement for information about why a best practice is important. Click on a Best Practice statement to request technical assistance from your program manager.

The time between arrest and program entry is 50 days or less	Law enforcement attends pre-court team meetings (staffings)	The treatment court has an advisory committee that includes community members	Law enforcement attends court sessions (status review hearings)	All new hires to the treatment court complete a formal training or orientation	Program has a Memorandum of Understanding (MOU) in place between the treatment court team members (and/or the associated agencies)		
The treatment court provides childcare while participants are in treatment or in court (or participating in other treatment court requirements)	MOU specifies team member roles	The treatment court has a steering committee or policy group that meets regularly to review policies and procedures	In order to graduate participants must pay all court-ordered fines and fees (e.g., fines, restitution)	Participants are required to pay court fees	Sanctions are imposed immediately after		
Treatment court staff members receive ongoing cultural competency training	The treatment court reports that the typical length of jail sanctions is 6 days or less	All key team members attend pre-court team meetings	In order to graduate	Program uses validated,	The treatment court requires	In order to	
Drug testing occurs on weekends/holidays							Drug testing is random/unpredictable
Law enforcement (e.g., police, sheriff) is a member of the treatment court team	Review of program data and/or regular reporting of program	Program has a written policy and procedure manual	The treatment court offers or		Staff	The	The
	The results of program evaluations have led to modifications in	All key team members attend court	The treatment court offers or	The			
MOU specifies what information will be shared	The treatment court uses no more than two treatment agencies to	All members of the treatment court team are	The treatment court offers or				

program-specific best practices and performance benchmarks is directly linked to increased positive long-term outcomes for individuals and families served by PSCs. In recognition of this, the Judiciary established a senior researcher position dedicated exclusively to PSCs. The PSC senior researcher is overseen by the R&A director with guidance provided by the OPSC director.

**Interactive Dashboards**

One component of an effective monitoring and evaluation infrastructure is to provide PSC teams practical, accessible systems and tools that allow for the regular operational integration of performance measurement and best practices monitoring. In FY 2022, this included the development of interactive program-specific best practice and performance measure data visualizations and

Figure 1: Interactive Best Practice Tree Map

dashboards accessible from any mobile or desktop web browser (Figure 1). The dashboards are updated regularly to reflect current best practice adherence and provide interactive mechanisms for teams to request technical assistance and identify best practices that are most linked to important outcomes, such as a reduction in post-program recidivism.

**Regular Review and Engagement with PSC Teams**

Part of any comprehensive monitoring and evaluation infrastructure is regular collaboration and engagement with PSC teams to establish trust and understand the individual needs of programs in relation to their ability to adhere to best practices and meet performance benchmarks. In FY 2022,

building on initial assessments completed in FY 2021, OPSC program managers completed two best practice reassessments with their adult drug courts teams. The reassessment process has been beneficial in establishing a protocol for the regular review of best practices and in providing a space for teams to proactively address operational deficits and share effective adherence strategies. This regular engagement also has helped to reinforce use of new tools (interactive dashboards) and normalize the incorporation of best practice standards during staffings and status hearings.

In addition to continued engagement with teams on best practices, the OPSC-R&A research team facilitated and participated in [adult drug court performance measure](#) implementation technical assistance sessions, provided to all adult drug courts in FY 2022. The technical assistance sessions were facilitated in partnership with the National Center for State Courts (NCSC) and included a review of each program's performance measures and corresponding benchmarks and provided suggested strategies for addressing those that did not fall within the recommended parameters. These sessions were followed-up with brief check-ins to assess progress and respond to additional technical assistance needs. PSC teams continue to implement review of performance measure benchmarks assisted by Maryland-specific instructional videos, interactive performance measure dashboards, and through regular engagement with their program managers.

### ***Full Implementation of Adult Drug Court Performance Measure 6***

Thanks in part to the technical assistance discussed above, in FY 2022 Maryland adult drug courts fully implemented [Adult Drug Court Performance Measure 6, Procedural Justice](#). Procedural justice is measured by administering a survey designed to assess participants' perceptions of fairness based on their interactions with critical members of the drug court team with whom the participant has substantial ongoing interaction such as the judge, coordinator, treatment provider, supervising officer, case manager, and general court staff. Procedural justice has been broadly linked with legal compliance, willingness to accept decisions (favorable or not), and legitimacy as a result of accepting the process as fair. Procedural justice is a concept that refers to participant perceptions of interactions and decision-making during their time in the program. The surveys utilize a Likert scale<sup>1</sup> with participant responses of "strongly agree" signifying the most positive perceptions of procedural justice, and participant responses of "strongly disagree" signifying the most negative perceptions of procedural justice. To facilitate the survey administration and collection of participant survey data, OPSC program managers deployed three survey-ready smart tablets to each adult drug court and provided one-on-one technical assistance for administering the survey. Following the voluntary completion of the survey by all active participants, the OPSC-R&A research team conducted an analysis of survey results that utilized graphs and tables to highlight areas in which perceptions of justice were strong and where improvement should be contemplated (Figure 2). Following the distribution of each program's survey results, PSC teams participated in a post-survey debrief to review and discuss the results with the R&A research team and OPSC program managers. Administration of procedural fairness surveys is ongoing and will occur every six months.

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A Likert scale is a type of psychometric response scale in which responders specify their level of agreement to a statement typically in five points: (1) Strongly disagree; (2) Disagree; (3) Neither agree nor disagree; (4) Agree; (5) Strongly agree.

[https://link.springer.com/referenceworkentry/10.1007%2F978-0-387-78665-0\\_6363](https://link.springer.com/referenceworkentry/10.1007%2F978-0-387-78665-0_6363)

Figure 2: Procedural Justice Survey Team Results

Team Results - Overall Perception of Procedural Justice and Fairness					
	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
Judge	75.4%	22.5%	2.1%		
Case Manager	70.4%	23.5%	5.4%	0.7%	
Treatment	74.0%	21.5%	3.3%	1.2%	
Supervising Officer	67.1%	20.0%	11.8%	1.2%	
Drug Court Personnel	70.3%	26.1%	3.3%	0.4%	
Court Staff General	72.8%	22.8%	3.3%		1.1%
Grand Total	72.1%	23.2%	4.1%	0.6%	0.1%

**Monitoring Emerging Research Opportunities**

The OPSC-R&A research team also monitors and reviews emerging research in the field for practical application in Maryland’s PSC programs. This year, the OPSC-R&A research team continued to work towards the incorporation of evidence-based data tools used to measure race and gender equity and inclusion in treatment courts.

In the year ahead, the PSC senior researcher will continue to spend time in the field with program managers and their teams to identify technical assistance needs improve data collection, best practice adherence, and performance measure monitoring.



**New PSCs in FY 2022**

[Maryland Rule 16-207](#) provides a formal process for PSCs to become operational and be recognized as such by the Chief Judge of the Court of Appeals of Maryland. Applicants are expected to prepare a completed application and any supporting materials to provide the most accurate detail of the proposed PSC.

The prospective PSC leadership confers with OPSC and each state, local, or federal agency or official whose participation in the program will be required under the plan. Examples of officials to be consulted, depending on the nature of the proposed program, include, but are not

limited to the Office of the State's Attorney, Office of the Public Defender, Department of Juvenile Services, behavioral health, substance use, and education agencies, the Department of Parole and Probation, and the Department of Human Services.

The Judicial Council’s Specialty Courts and Dockets Committee reviews the application to:

- determine whether the program is comprehensible;
- identify potential program weaknesses or areas of concern; and
- determine whether the application has adequate facilities, staff, and management capacity.

The committee may request clarification and offer recommendations or corrections as necessary.

In FY 2022, the Chief Judge Matthew J. Fader, Court of Appeals of Maryland, under Maryland Rule 16-207, and with the recommendation from the Judicial Council’s Specialty Courts and Dockets Committee, approved new adult drug courts in the Circuit Courts for Charles and Queen Anne’s Counties. Both the Charles and Queen Anne’s County new adult drug courts will offer defendants with substance use disorders an opportunity to obtain an array of services, from evaluations to a judicially supervised treatment plan. Participants obtain a positive criminal disposition and aftercare/support plan upon successful program completion.

Figure 3: FY 2022 Operational Problem-Solving Courts in Maryland

MARYLAND PROBLEM SOLVING COURTS	County	Adult District Drug Court	Adult Circuit Drug Court	Juvenile Drug Court	Family/Dependency Drug Court	DUI/Drug Court	Circuit Court Mental Health	District Court Mental Health Cou..	Truancy Reduction Court	Re-entry Court	Veterans Court	Back on Track
		Allegany		●								
Anne Arundel			●			●					●	
Baltimore City	●	●			●		●	●			●	
Baltimore Co.	●	●			●							
Calvert			●									
Caroline			●									
Carroll			●									
Cecil			●									
Charles			●		●							
Dorchester	●								●		●	
Frederick			●					●				
Garrett												
Harford	●	●			●			●	●			
Howard	●					●						
Kent									●			
Montgomery			●				●	●				
Prince George's	●	●	●					●	●	●	●	●
Queen Anne's			●									
Somerset			●						●		●	
St. Mary's			●		●	●					●	
Talbot			●							●		
Washington			●							●		
Wicomico			●						●		●	
Worcester	●	●							●		●	



## Funding

### \$1.7 Million Federal Bureau of Justice Assistance Award

In December of 2021, the Maryland Judiciary was awarded a four-year \$1.7 million grant through the Adult Drug and Veterans Court Discretionary Grant Program, a competitive grant program within the Federal Bureau of Justice Assistance (BJA). The grant provides the Judiciary funding for the implementation of a statewide risk and need assessment tool in all adult drug and veterans treatment courts and for a new statewide management information system (MIS) that will enable PSCs to improve program monitoring and evaluation including tracking performance measures, and best practice adherence. In late FY 2022, the Judiciary, through a competitive procurement process, entered into a contract with Public Health Management Corporation (PHMC) to implement the Risk and Needs Triage (RANT) assessment tool in all adult drug and veterans treatment courts.

In addition to the statewide implementation of a risk and need assessment tool, the grant also provides funding for six pilot treatment courts to institute special implementation of the assessment tool by offering pre-adjudication risk and need assessments to all non-violent criminal offenders. This special implementation will allow pilot locations the opportunity to provide all non-violent criminal offenders an objective, non-discriminatory tool to help inform risk, treatment needs and decisions concerning sentencing, diversion, pretrial detention, and release. In FY 2022, the Judiciary laid the groundwork for the selection of the six pilot locations through the formation of the PSC Risk/Need Pilot Program Work Group (the Work Group). The Work Group will identify and recommend selection criteria for courts seeking to participate in the risk and need pilot program and provide guidance and recommendations pertaining to pre-adjudication risk and need assessment administration implementation and logistics.

The objectives funded under the BJA grant support adherence to following Maryland-specific and National Association of Drug Court Professionals (NADCP) evidence-based practices and performance measures:

- **Facilitates implementation of Maryland Adult Drug Court Performance Measure 1, Target Population and NADCP Best Practice for target population:** The defined objective of the Maryland ADC target population performance measure is to target high-risk, high-need populations, with a benchmark of achieving 100% target population admissions. NADCP Adult Drug Court Best Practices Volume I recommends adult drug courts use a validated risk-need assessment tool in order to target high-risk/high-need offenders for admission who are “addicted to illicit drugs or alcohol and are at a substantial risk for reoffending or failing to complete a less intensive disposition, such as standard probation or pretrial supervision.” Implementation of an assessment tool enables drug court teams to identify and target this population for potential admission to drug court.
- **Facilitates implementation of Maryland Adult Drug Court Performance Measures 3 and 4, “Processing Time” and NADCP Key Component #3 “eligible participants are identified early and promptly placed in the drug court program”:** Research indicates that effectiveness of treatment and long-term adjustment are linked to swift entry into treatment, with shorter processing times related to greater reductions in recidivism. Maryland Adult Drug Court performance benchmark for measures three and four is defined as less than 50 days from referral to first treatment episode. Administration of an assessment tool early in the process increases the efficiency of referral and admission to drug court.
- **Facilitates implementation of Maryland Adult Drug Court Performance Measure 18, “Access and Fairness” and NADCP best practice for equity and inclusion:** NADCP Adult Drug Court Best Practices Volume I recommends addressing equity and inclusion for individuals who have historically experienced sustained discrimination or reduced social opportunities because of their race, ethnicity, sexual orientation, gender identity, physical or mental health, religion, or socioeconomic status receive the same opportunities as other individuals to participate and succeed in the drug court. Implementation of an assessment tool for all criminal defendants enables courts to offer unbiased access to diversion programs.
- **Facilitates improved implementation of NADCP best practice for monitoring and evaluation:** NADCP Adult Drug Court Best Practice Standards Volume 2 recommends several best practices for meeting monitoring and evaluation standards, including regularly monitoring: adherence to best standards, in-program outcomes, criminal recidivism, and racial and gender disparities among participants. Best practice monitoring of these measures depends on timely and reliable program entry,

and performance data in concert with a MIS that provides for the ability to access and analyze this data regularly so that program improvements can be swiftly identified and implemented. The acquisition and implementation of a new MIS facilitates greater adherence to this standard.

### ***PSC Grants and Budget Requests***

In FY 2022, the Judiciary solicited grant applications from circuit courts and budget requests from District Court programs to support and maintain the capacity of existing and planned PSCs across Maryland. The PSC Discretionary Grant and PSC Budget Request processes address staffing needs within the Judiciary and collaborating agencies, provide support for needed ancillary services, cover critically needed drug and alcohol testing costs, support trainings, and fund services that are deemed non-reimbursable by managed care. See [Table 1](#) for a list of problem-solving court grant and budget requests funded by the Maryland Judiciary.

***Table 1: PSC Grant/Budget Request Awards FY 2022***

<b>PSC Jurisdiction</b>	<b>OPSC Grant/Budget Request Awards</b>	<b>Total By County</b>
Allegany Circuit Court	\$200,000.00	\$200,000.00
Anne Arundel Circuit Court	\$385,656.09	\$809,208.09
Anne Arundel District Court	\$423,552.00	
Baltimore City Circuit Court	\$550,516.00	\$767,977.00
Baltimore City District Court	\$217,461.00	
Baltimore Co. Circuit Court	\$230,000.00	\$285,000.00
Baltimore Co. District Court	\$55,000.00	
Calvert Circuit Court	\$271,800.00	\$271,800.00
Caroline Circuit Court	\$78,000.00	\$78,000.00
Carroll Circuit Court	\$332,000.00	\$332,000.00
Cecil Circuit Court	\$381,665.38	\$381,665.38
Charles Circuit Court	\$225,000.00	\$225,000.00
Dorchester District Court	\$24,200.00	\$384,200.00
Dorchester Circuit Court	\$360,000.00	
Frederick Circuit Court	\$340,000.00	\$361,600.00
Frederick District Court	\$21,600.00	
Harford Circuit Court	\$222,578.06	\$333,728.06
Harford District Court	\$111,150.00	
Howard District Court	\$177,600.00	\$177,600.00
Kent Circuit Court	\$80,000.00	\$80,000.00
Montgomery Circuit Court	\$358,279.00	\$452,579.00
Montgomery District Court	\$94,300.00	

PSC Jurisdiction	OPSC Grant/Budget Request Awards	Total By County
Prince George's Circuit Court	\$542,687.30	\$607,165.30
Prince George's District Court	\$64,478.00	
Somerset Circuit Court	\$223,000.00	\$223,000.00
St. Mary's Circuit Court	\$269,000.00	\$269,000.00
Talbot Circuit Court	\$153,000.00	\$153,000.00
Washington Circuit Court	\$195,000.00	\$195,000.00
Wicomico Circuit Court	\$322,000.00	\$322,000.00
Worcester Circuit Court	\$216,000.00	\$227,560.00
Worcester District Court	\$11,560.00	
<b>Total</b>	<b>\$7,137,082.83</b>	<b>\$7,137,082.83</b>

**Behavioral Health Administration (BHA) Grant for Non-Reimbursable Services**

In FY2022, BHA provided \$1 million, and the Judiciary provided \$800,000 for a total of \$1.8 million in combined resources to provide drug court grant awards allowing local drug court treatment providers to purchase non-reimbursable services delivered in ambulatory treatment settings. Jurisdictions used these funds for service providers’ time spent in court on behalf of the client such as at status hearings, pre-court meetings, and case consultation meetings with drug court personnel; non-reimbursable clinical case management associated with substance use disorder treatment services; correspondence with court officials on behalf of participants; and transportation as needed for substance use disorder treatment.

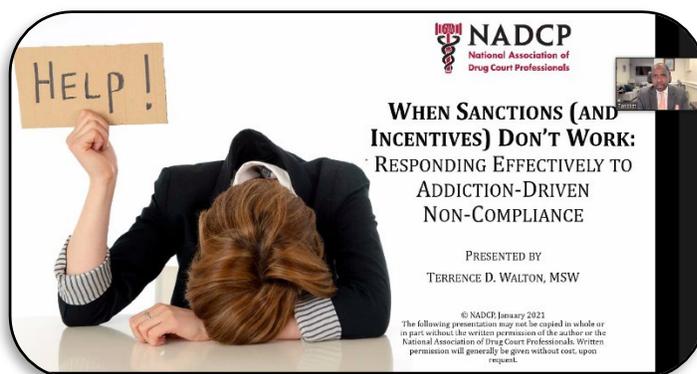


Figure 4: NADCP's Terrance D. Walton presents a webinar to PSC teams in January of 2021.

**Training and Education**

Professional development among problem-solving courts remains a priority for the Judiciary. Every year, Judiciary staff and the Judicial Council’s Specialty Courts and Dockets Committee plan and fulfill pre-implementation trainings, continuing education workshops, and tutorials for new staff to stayup on best practices in problem-solving courts. Having a well-trained team means learning new skills that can improve

outcomes, reduce mistakes, build confidence, and create a better working environment.

**Training and Education Highlight - Annual Problem-Solving Court Symposium**

In FY 2022, OPSC was proud to once again host its Annual Problem-Solving Court Symposium, held virtually on Tuesday, December 14, 2021. The one-day training event marked the 17<sup>th</sup> symposium hosted by OPSC and was free and open to all PSC team members and partners. The

symposium enjoyed participation from more than 500 attendees across the state, including justice and program partners serving on local teams and offered a variety of webinars, including the latest trends and best practices for adult drug courts, DUI courts, family recovery courts, juvenile drug courts, mental health courts, re-entry courts, truancy courts, and veteran treatment courts.

### ***Training and Education Highlight - National Association of Adult Drug Courts (NADCP) Train the Trainer Infrastructure Program***

In FY 2022, OPSC applied for and was accepted into NADCP’s train-the-trainer infrastructure program. The program’s objective is to give states the tools and expertise to train and provide technical assistance to treatment court programs based on the 10 Key Components and the Adult Drug Court Best Practice Standards. The program provides assistance in utilizing proven technical assistance and training tools, creating an application process to select faculty, conducting a train-the-trainer program. In June of 2022, the OPSC-R&A research team participated in a day-long train-the-trainer session led by NADCP. The training session covered modules related to working in teams including “Establishing Program and Team Goals/Objectives,” “Group Facilitation”, and “The Life Cycle of Treatment Court Teams.” A similar two-day training session to include additional modules and all PSC coordinators is scheduled for early FY 2023.

## **Drug Courts**

Drug courts constitute a Judiciary-led, coordinated system that demands accountability of staff and court participants and provides immediate, intensive, and comprehensive drug treatment, supervision, and support services using a variety of incentives and sanctions to encourage



*Figure 5: Judge O'Hara presides over a Baltimore City District Adult Drug Court graduation ceremony.*

participant compliance. Drug courts represent the coordinated efforts of criminal justice, behavioral health, and social service agencies, along with treatment communities that actively intervene in, and break the cycle of substance abuse, addiction, and crime. As an alternative to less effective interventions, such as incarceration or general probation, drug courts quickly identify substance-abusing offenders and place them under strict court monitoring and community supervision coupled with effective, individually assessed treatment, and ancillary services. [Table 2](#) provides a comprehensive list and key statistics of all Maryland adult, family, and juvenile drug courts, and DUI courts.

Table 2: Drug Court Statistical Summary – July 1, 2021-June 30, 2022

County	Location	Program Type	Year Est.	Entered Program	Successful Completion	Administrative Closure	Unsuccessful Completion	Total Active Clients
Allegany	Circuit	Adult	Jun-18	20	2	0	5	58
Anne Arundel	Circuit	Adult	Dec-05	36	13	2	14	104
	District	Adult DUI	Feb-97 Jan-05	35	51	10	11	165
Baltimore City	Circuit	Adult	Oct-94	19	14	7	4	127
		Family	Aug-05	48	20	6	20	93
	District	Adult	Mar-94	7	5	1	14	44
Baltimore Co.	Circuit	Family	Aug-10	3	3	2	2	16
		Adult	Sep-20	11	0	0	0	11
	District	Adult	Jun-21	1	0	0	0	1
Calvert	Circuit	Adult	Feb-15	22	19	2	1	84
Caroline	Circuit	Adult	Nov-11	6	5	0	5	17
Carroll	Circuit	Adult	Apr-07	19	11	4	5	56
Cecil	Circuit	Adult	Jun-06	55	16	34	10	150
Charles	Circuit	Family	Jan-11	14	0	3	8	27
		Adult	Jun-22	0	0	0	0	0
Dorchester	District	Adult	Jul-04	16	4	3	2	36
Frederick	Circuit	Adult	May-05	12	15	2	5	46
Harford	Circuit	Adult	Dec-18	11	7	0	3	31
		Family	May-04	7	3	4	4	20
	District	Adult	Nov-97	14	6	0	0	21
Howard	District	DUI	Jul-04	17	14	0	1	46
		Adult	Jul-04	4	3	1	1	22
Montgomery	Circuit	Adult	Nov-05	22	14	3	11	99
Prince George's	Circuit	Adult	Aug-02	11	2	8	4	61
		Re-Entry	Oct-13	9	0	0	0	15
		Juvenile	Aug-02	1	0	0	1	4
	District	Adult	Apr-06	18	12	0	2	43
Queen Anne's	Circuit	Adult	Jun-22	0	0	0	0	0
Somerset	Circuit	Adult	Aug-18	13	4	2	3	28
St. Mary's	Circuit	Adult DUI	Jul-09	2	4	0	2	23
		Family	Aug-16	10	0	3	1	15
Talbot	Circuit	Adult	Aug-07	10	1	3	5	23
Washington	Circuit	Adult	May-19	13	6	0	3	43
Wicomico	Circuit	Adult	Sep-05	12	6	1	1	32
Worcester	Circuit/District	Adult	Dec-05	17	12	1	5	39
<b>Grand Total</b>				<b>515</b>	<b>272</b>	<b>102</b>	<b>153</b>	<b>1,600</b>

Note: Administrative Closure is defined as administratively discharged during the reporting period (e.g., death, probation expired, moved jurisdictions).

### Adult Drug Court Performance Measures

The Maryland Adult Drug Court Performance Measures report, completed by NCSC in September 2017, documents the performance measures selected for Maryland adult drug courts. The Ten Key Components of Drug Courts (NADCP, 1997) and the Adult Drug Court Best Practice Standards (NADCP, 2013; 2015) provide the basis for the NCSC model. Based on these NADCP Best Practices and the overall goal of reducing recidivism, NCSC recommended 10 supporting objectives for Maryland's adult drug courts (see [Appendix C](#)). These objectives guided NCSC's development of the adult drug court performance measures. Each recommended performance measure includes a benchmark that sets a quantitative goal to inform courts about their current performance, and over time can be used to measure their progress (see [Appendix D](#) for a full list of all 24 performance measures.)

Full implementation of Maryland's performance management system is occurring on a rolling basis in three tiers and as relationships and data collection systems are established: (1) benchmarks implemented for measures and data collection already in place; (2) benchmarks implemented for measures following the data collection of new court data; and (3) benchmarks implemented for measures following the establishment of data collection and sharing by external entities.

### ***Implementation Status by Tier***

In FY 2022, the Judiciary implemented review of Tier 1 and Tier 2 performance measures and benchmarks, outlined below:

#### ***Tier 1- Implementation of measures with data collection already in place (fully implemented)***

- Processing Time Measures and Benchmarks: Time from Arrest to First Treatment Episode (measure 3) and Time from Referral to First Treatment Episode (measure 4)
- Social Functioning Measures and Benchmarks: Quality of Residency Status (measure 15) and Employment and Education Status (measure 17)
- Sanction and Incentives Measures and Benchmarks: Sanctions (measure 8) Incentives (measure 9); Ratios of Incentives to Sanctions (measure 10)
- Response Time to Negative Behavior (measure 11)



*Figure 6: Friends and families of Washington County Circuit Adult Drug Court graduates gather for an outdoor ceremony in May of 2022.*

#### ***Tier 2- Implementation of measures following collection of new court data (fully implemented)***

- Procedural Justice (measure 6): As mentioned in detail on page [four](#) of this report, in FY 2022, Maryland adult drug courts fully implemented [Adult Drug Court Performance Measure 6, Procedural Justice](#).
- Target Population (measure 1): The objective of this measure is to target high risk, high need populations, with a benchmark of achieving 100% target population admissions. To enable drug courts to meet this benchmark, NCSC recommended the application of a

validated risk-need assessment tool for use in identifying this population. In connection with Judiciary's work under the BJA grant described on page [six](#) of this report, in late FY 2022, the Judiciary, through a competitive procurement process, entered into a contract with PHMC to implement the RANT assessment tool in all adult drug and veterans treatment courts.

#### ***Tier 3- Implementation of measures following the establishment of data collection and sharing by entities outside of the court system (in process)***

The implementation of Tier 3 performance measures necessitates the collection of new data held by entities outside of the court system. The Judiciary continues to work to establish external data sharing agreements and data collection methodologies necessary for the implementation of these measures.

### **Performance Measure Implementation Technical Assistance**

As discussed on page [four](#) of this report, in FY 2022, technical assistance was provided to all adult drug courts to assist in the implementation of the performance measure standards. The technical assistance sessions included a review of each program's performance measures and corresponding benchmarks

and provided suggested strategies for addressing those that did not fall within the recommended parameters. These sessions were followed up with a round of brief check-ins to assess progress and respond to additional technical assistance needs. Teams will continue to implement review of performance measure benchmarks and will be assisted by Maryland-specific instructional videos and through regular engagement with their program managers.

## Mental Health Courts

In Maryland, as in other states, those with mental health are increasingly becoming involved in the criminal justice system. Mental health courts were established in response to the increased numbers of individuals with mental health disorders found caught in the revolving door of the criminal justice system. See [Table 3](#) for a comprehensive list and basic information of all mental health courts.

A mental health court is a specialized court docket established for defendants with a primary mental health diagnosis. A problem-solving approach substitutes for the traditional adversarial criminal court process. Participants are identified through mental health screenings and assessments, and they voluntarily participate in a judicially-supervised treatment plan developed jointly by a team of court staff and mental health professionals. The overarching goal of the mental health court is to decrease the frequency of participants' contact with the criminal justice system by providing judicial oversight to improve their social functioning with respect to employment, housing, treatment, and support services in the community.

Mental health courts rely on individualized treatment plans and ongoing judicial monitoring to address mental health needs and public safety concerns. These courts also seek to address the underlying problems that contribute to criminal behavior and the overall recidivism rate of this population.

**Table 3: Mental Health Court Statistical Summary**

County	Location	Year Est.	Entered Program	Successful Completion	Administrative Closure	Unsuccessful Completion	Total Active Clients
Baltimore City	Circuit	May-17	75	0	0	0	364
	District	Oct-02	126	12	108	5	391
Frederick	District	Jul-20	8	2	0	0	15
Harford	District	Jan-03	6	4	0	0	10
Montgomery	Circuit	Jan-17	6	4	1	2	18
	District	Jan-17	26	27	10	4	76
Prince George's	District	Jul-07	59	32	16	14	184
<b>Grand Total</b>			<b>306</b>	<b>81</b>	<b>135</b>	<b>25</b>	<b>1,058</b>

Note: Administrative closure is defined as administratively discharged during the reporting period (e.g., death, probation expired, moved jurisdiction).



## Veterans Courts

Veterans courts provide services to those who served in the military and suffer from conditions such as post-traumatic stress disorder, traumatic brain injuries, other mental health issues, and/or substance use disorders. Veterans can resolve outstanding criminal offenses, obtain the treatment and services they need, and stabilize their lives. A veterans court connects eligible participants to U.S. Department of Veterans Affairs (VA) benefits, long-term supportive housing, and other benefits for participants whose service-related disabilities prevent their return to the workforce. The veterans court can also access local resources where the veteran does not qualify for VA benefits. See [Table 4](#) for a comprehensive list and basic characteristics of all veterans courts.

*Table 4: Veterans Court Statistical Summary*

County	Location	Year Est.	Entered Program	Successful Completion	Administrative Closure	Unsuccessful Completion	Total Active Clients
Anne Arundel	District	Nov-18	13	10	2	4	36
Baltimore City	District	Oct-15	10	10	0	1	31
Dorchester*	District	Jun-18	8	6	1	1	23
Prince George's	Circuit	Apr-15	5	2	1	0	13
<b>Grand Total</b>			<b>36</b>	<b>28</b>	<b>4</b>	<b>6</b>	<b>103</b>

\* Dorchester Regional Veterans Treatment Court consists of Dorchester, Somerset, Wicomico, and Worcester Counties.

Note: Administrative Closure is defined as administratively discharged during the reporting period (e.g., death, probation expired, moved jurisdiction).

## Truancy Reduction Courts

Truancy Reduction Courts improve school attendance and positively affect the youth's attitude about education through a nurturing approach that ultimately will build a relationship between the family, the school, and the court. The court program is an alternative to punitive measures such as having parents prosecuted in criminal court or stigmatizing the child and further souring their outlook on education and the criminal justice system. A social worker, counselor, or case manager works with families to determine reasons for poor attendance and makes referrals to community-based services when appropriate. Maryland's truancy reduction courts welcomed 196 new students and their families into their programs and continued to make contact with current participants; providing needed resources and motivation to continue with their lessons (Table 5).



*Surrounded by members of the First Judicial Circuit Truancy Reduction Court Program, Magistrate Connie G. Marvel, and her support services workers from the community, this FCTRP graduate knows attendance matters.*

**Table 5: Truancy Reduction Pilot Program Statistical Summary**

County	Location	Year Est.	Entered Program	Successful Completion	Administrative Closure	Unsuccessful Completion	Total Active Clients
First Circuit Truancy Reduction Program: Dorchester, Somerset, Wicomico, Worcester	Circuit	Mar-07	139	65	47	37	259
Harford	Circuit	Jan-08	8	1	3	2	16
Kent	Circuit	Sep-14	39	25	4	5	65
Prince George's	Circuit	May-09	10	12	7	9	47
<b>Grand Total</b>			<b>196</b>	<b>103</b>	<b>61</b>	<b>53</b>	<b>387</b>

Note: Administrative Closure is defined as administratively discharged during the reporting period (e.g., moved jurisdiction).

## Conclusion

FY 2022 returned PSC teams to regular in-person engagement with their participants for the first time since the beginning of the pandemic. This positive development restored several critical tools to PSC teams as they continued to respond to persistent pandemic-related substance use increases and associated complications such as heightened suicide risk, and negative mental and physical health effects. This year also marked the second year of the OPSC-R&A “Research in Action” agenda and commitment to the development of a comprehensive monitoring and evaluation infrastructure. In FY 2022, PSC teams increased engagement with their program managers and invested time in best practice reassessments, performance measure implementation, and in the administration of procedural justice surveys.

FY 2022 also brought new funding for large scale projects. In December of 2021, the Maryland Judiciary was awarded a four year, \$1.7 million grant through the Adult Drug and Veterans Court Discretionary Grant Program, a competitive grant program within BJA. The grant provides the Judiciary funding for the implementation of a statewide risk and need assessment tool in all adult drug and veterans treatment courts and for a new statewide MIS that will enable PSCs to improve program monitoring and evaluation including tracking performance measures, and best practice adherence. So far, the grant has enabled the Judiciary to implement a statewide risk and need assessment tool in all adult and veterans treatment courts.

In the year ahead, Maryland’s PSCs will continue look for ways to improve and do more for their participants, no matter the challenge. Through access to new tools and increased engagement with their program managers, teams will fine tune their best practices and put in the extra time to hold themselves accountable through performance measurement. Most importantly, in the coming year, Maryland’s PSCs will continue celebrate and support the individuals they serve; grateful as always for the opportunity to witness new beginnings and second chances.

For more information, please contact Gray Barton, OPSC director at 410-260-3617 or [richard.barton@mdcourts.gov](mailto:richard.barton@mdcourts.gov).

## Appendix A: PSCs in Maryland: History and Governance

In 1994, one of the first drug courts in the country was initiated in Baltimore City to address substance use issues for those involved in the criminal justice system. In 2002, the Maryland Judiciary established the Drug Treatment Court Commission, which led the Judiciary's effort to implement and maintain drug court programs statewide. Commission members included circuit and District Court judges, legislators, and representatives from all appropriate executive branch agencies.

In December 2006, then-Chief Judge Robert M. Bell issued an administrative order establishing a Judicial Conference Committee on PSCs to institutionalize the work of the Commission and to expand its scope to include all PSCs.

In 2015, then Chief Judge Mary Ellen Barbera revamped the Judiciary's committee structure by appointing a new Judicial Council and a new set of Judicial Council committees including a Committee on Specialty Courts and Dockets. This new structure has continued under the guidance of current Chief Judge Fader, preceded by Judge Getty, who served as chief judge from September 11, 2021, through April of 2022. The Judicial Council continues to serve as the principal policy advisory body to the Chief Judge of the Court of Appeals. The Specialty Courts and Dockets Committee continues to promote and oversee the development, implementation, and evaluation of specialty courts and dockets statewide. The committee advances best practices in areas such as substance use disorder, mental health, and alcoholism. The committee monitors and directs the evaluation of the delivery of evidence-based training, direct assistance, research, funding, and support for specialty courts and dockets. See [Appendix B](#) for more information on the Judicial Council, this committee, and its membership.

The Specialty Courts and Dockets Committee is comprised of two subcommittees: the Problem-Solving Courts Subcommittee and the Behavioral Health Subcommittee. The PSC Subcommittee assists courts and provides a comprehensive and collaborative approach to assist each program in employing best practices, including providing performance measurement, evidence-based training, direct assistance, research, and funding.

The Behavioral Health Subcommittee explores trial court sentencing alternatives for the treatment and rehabilitation of individuals with mental health needs and those with substance use disorder not enrolled in specialty courts. This subcommittee works closely with the Maryland Department of Health (MDH) and other governmental agencies to monitor and provide information regarding community and residential-based treatment.

## Appendix B: Maryland Judicial Council - An Overview

The Judicial Council serves as the principal policy advisory body to the Chief Judge of the Court of Appeals. In 2013, Chief Judge Mary Ellen Barbera, then the administrative head of the Maryland Judiciary, commissioned a comprehensive review of the governance and operational structure of the Maryland Judiciary, which led to the reconstitution of the Judicial Council, as well as the restructuring of the Judiciary's myriad committees, subcommittees, and workgroups. The reconstituted Judicial Council and the new committee structure became effective January 1, 2015, and continues under the guidance of current Chief Judge Fader, preceded by Judge Getty, who served from September 2021 through April 2022. Under the new structure, the Council and its committees have worked to advance the Judiciary's mission to provide fair, efficient, and effective justice for all, with the strategic plan and eight key goals as their guide.

The Judicial Council consists of 22 members, including the Chief Judge of the Court of Appeals, the Chief Judge of the Court of Special Appeals, the Chair and Vice Chair of the Conference of Circuit Judges, the Chief Judge of the District Court, the State Court Administrator, the Chair and Vice Chair of the Conference of Circuit Court Clerks, the Chair and Vice Chair of the Conference of Circuit Court Administrators, the Chair of the Court of Appeals Standing Committee on Rules of Practice and Procedure, the Chief Clerk of the District Court, the Chair of the Retired and Recalled Judges Committee, three Circuit Court judges, four District Court judges, and two District Administrative Clerks. The Deputy State Court Administrator serves as Secretary to the Judicial Council. The Judicial Council's Executive Committee, which meets at the request and direction of the Chief Judge of the Court of Appeals to provide input to the Chief Judge on matters that arise between sessions of the Judicial Council, consists of the Chief Judge of the Court of Appeals, the Chief Judge of the Court of Special Appeals, the Chair of the Conference of Circuit Court Judges, the Chief Judge of the District Court, and the State Court Administrator.

As indicated above, several of the members serve by virtue of their position, while the remaining members are appointed by the chief judge of the Court of Appeals. Each appointed member of the Judicial Council is appointed to a two-year term but can be reappointed to one additional consecutive two-year term as the Chief Judge deems necessary and appropriate. Unless otherwise directed by the Chief Judge, the Judicial Council meets bi-monthly.

As the highest governance body, the Judicial Council is the central hub for all Judiciary-wide policy changes, judicial reforms, legislative issues, and other internal and external developments that impact the administration of justice. To that end, the committees develop recommendations for the Judicial Council's consideration and the Chief Judge's approval that address policies, programs, and initiatives that help to ensure the effective and efficient administration of justice in Maryland. In addition, the Judicial Council takes up external matters that impact the Maryland Judiciary.

The diverse and focused members of the Judicial Council and its committees, including judges, magistrates, trial court clerks and administrators, and commissioners, represent all areas of the state. It is through their collective work that the Maryland Judiciary is fulfilling its mission and achieving its goals, all for the betterment of those who enter the courts and utilize the services the Judiciary offers.

## 2022 Judicial Council

### \*Honorable Matthew J. Fader

Chief Judge, Court of Appeals

#### Honorable Keith A. Baynes

Chair, Conference of Circuit  
Judges  
Circuit Court for Cecil County

#### Honorable Pamila J. Brown

District Court in Howard County  
Term: January 1, 2021 – December 31, 2022

#### Honorable Audrey J. S. Carrion

Vice-Chair, Conference of Circuit Judges

#### Honorable Karen Christy Holt Chesser

District Court in St. Mary's County  
Term: January 1, 2021 – December 31, 2022

#### Honorable Kathleen Duvall

Vice-Chair; Conference of Circuit Court Clerks

#### Honorable Jeffery S. Getty

Circuit Court for Allegany County  
Term: January 1, 2021 – December 31, 2022

#### Markisha Gross

Administrative Clerk  
District Court in Montgomery County  
Term: January 1, 2021 – December 31, 2022

#### Kristin Grossnickle

Vice-Chair  
Conference of Circuit Court Administrators

#### \*Pamela Harris

State Court Administrator  
Administrative Office of the Courts

#### Honorable Fred S. Heckler

Circuit Court for Carroll County  
Term: April 1, 2022-December 31, 2023

#### Honorable James A. Kenney III

Chair, Senior Judges Committee

#### \*Honorable John P. Morrissey

Chief Judge, District Court of Maryland

#### Honorable John P. McKenna

District Court for Anne Arundel County  
Term: January 1, 2022 – December 31,  
2023

#### Honorable Bonnie G. Schneider

District Court in Cecil County  
Term: January 1, 2022 – December 31, 2023

#### Honorable Kathy Smith

Vice-Chair, Conference of Circuit Court Clerks

#### Lara Stone

Administrative Clerk  
District Court in Harford County  
Term: January 1, 2022 – December 31, 2023

#### Roberta Warnken

Chief Clerk, District Court of Maryland

#### Honorable Greg E. Wells\*

Chief Judge, Court of Special Appeals

#### Honorable Alan M. Wilner

Chair, Standing Committee on Rules of Practice  
and Procedure

#### Burgess Wood

Vice-Chair, Conference of Circuit Court  
Administrators

#### Nancy Faulkner

Deputy State Court Administrator  
Administrative Office of the Courts

#### \*Executive Committee Memb

## *The Judicial Council's Specialty Courts and Dockets Committee*

### *Purpose*

The Specialty Courts and Dockets will promote and oversee the development, implementation and evaluation of specialty courts and dockets in the courts.

### *Scope of Activity*

The committee will ensure the utilization of best practices by specialty courts and special dockets, in areas such as substance abuse, mental health and alcoholism. It will monitor and direct the evaluation of the delivery of evidence-based training, technical assistance, research, funding and support for specialty courts and special dockets. The Committee will report on its initiatives and other activities, at least annually, to the Judicial Council.

### **Committee Membership**

*Hon. Kimberly M. Davis, Chair*

<b>Committee Member</b>	<b>Term Expires</b>
Hon. Kimberly M. Davis, Chair	December 2023
Hon. Keith A. Baynes	December 2023
Hon. Louis A. Becker	December 2023
Hon. Katherine Hager	December 2023
Hon. Andrea M. Leahy	December 2022
Hon. Holly D. Reed III	December 2022
Hon. Joan E. Ryon	December 2023
Hon. Jennifer B. Schiffer	December 2022
Hon. Ronald Silkworth	December 2022
Hon. Cathleen M. Vitale	December 2022
Hon. Ann Wagner-Stewart	December 2023
Hon. Halee F. Weinstein	December 2023
Gray Barton, <i>Staff</i>	

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## **Appendix C: NCSC Maryland Adult Drug Court Performance Measures: Objectives**

1. To target defendants for admission who are addicted to illicit drugs or alcohol and are at substantial risk for reoffending or failing to complete a less intensive disposition, such as standard probation or pretrial supervision.
2. To identify eligible participants early and place them promptly in drug court.
3. To provide ongoing judicial interaction with each drug court participant.
4. To conduct all drug court team interactions with participants in a manner that is consistent with procedural justice.
5. To provide community supervision to hold participants accountable and protect public safety.
6. To employ graduated sanctions and rewards to hold participants accountable, promote recovery and protect public safety.
7. To provide appropriate evidence-based alcohol, drug, and other related treatment and rehabilitation services to drug court participants in sufficient dosages as to reasonably expect impacts on participant behavior.
8. To monitor abstinence by frequent alcohol and drug testing.
9. To improve the ability of participants to function effectively in society.
10. To provide all defendants the same opportunities to participate and succeed in the drug court regardless of race, ethnicity, gender, and age.

## Appendix D: NCSC Maryland Adult Drug Courts Performance Measures and Benchmarks

### *Target Population Measures*

1. *Admissions Classified as High Risk/High Needs (Measure 1)*: The percent of participants who fall into the high-risk/high-needs category as determined by a validated risk-needs tool. (Benchmark = 100%)
2. *Admissions Classified as Low Risk (Measure 2)*: The percent of participants who fall into the low-risk categories as determined by a validated risk-needs tool. (Benchmark = 0%)

### *Processing Time Measures*

3. *Time From Arrest to First Treatment Episode (Measure 3)*: The average processing time (i.e., number of days) between the date of arrest leading to first treatment episode.
4. *Time From Referral to First Treatment Episode (Measure 4)*: The average number of days between the date of referral in drug court until the participant is engaged in treatment. (Benchmark = Less Than 50 Days)

### *Status Hearing Measures*

5. *Drug Court Status Hearings Attended (Measure 5)*: The average number of status hearings attended by participants per month during each phase of program participation, by type of discharge. (Benchmark = More Than Twice Per Month During Phase One)

### *Procedural Justice Measures*

6. *Procedural Fairness (Measure 6)*: Procedural justice is measured by administering a procedural fairness survey designed to assess participants' perceptions of fairness of their interactions with critical members of the drug court team with whom the participant has substantial ongoing interaction (including the judge and treatment providers, possibly probation and the coordinator, where appropriate). Another set of survey questions measure similar attributes for the court. (Benchmark = Score Greater Than 4)

### *Supervision Measures*

7. *Accountability Contacts (Measure 7)*: Average number of monthly accountability contacts conducted with participants face-to-face while in phase 1. (Benchmark = Greater Than 4 Times Per Month During Phase 1)

### *Sanctions and Incentive Measures*

8. *Sanctions (Measure 8)*: The average number of sanctions administered across participants. These include increases in requirements, jail or detention, reprimands, additional meetings with supervision agents, community service, writing assignments, or additional restrictions (e.g., home electronic monitoring, curfew imposed).
9. *Incentives (Measure 9)*: The average number of incentives administered to participants. Incentives include praise or acknowledgement, rewards, reduced requirements, phase promotions, and other recognition (e.g., offender of the month award).
10. *Ratio of Incentives to Sanctions (Measure 10)*: Measure 10 combines Measures 8 Sanctions and 9 Incentives. For each participant, compute a ratio of incentives to sanctions and then calculate the average across participants.

11. *Response Time to Negative Behavior (Measure 11)*: Measure 11 is the average response time (in days) between the date of the precipitating negative behavior (i.e. violation of the program rules) and the date of the response. (Benchmark = Less Than or Equal To 7 Days)

### ***Dosage Measures***

12. *Units of Treatment (Measure 12)*: The average number of units of service attended by participants, reported by treatment type, and by type of discharge (Successful Completion, Unsuccessful, and Neutral). (Benchmark = More Than or Equal To 200 Hours)
13. *Length of Time in Program (Measure 13)*: The average length of time (days) participating in drug court, measured from admission to discharge, and reported by type of discharge. (Benchmark = 15-21 Months)

### ***Drug Testing Measures***

14. *Drug/Alcohol Testing (Measure 14)*: The average number of drug and alcohol tests administered is measured per week. This measure will be reported by type of test (drug or alcohol test) and by phase in the program. Tests are counted by specimen rather than by the number of substances tested. (Benchmark = Greater Than or Equal To 2 Times Per Week)

### ***Social Functioning Measures***

15. *Quality of Residency Status (Measure 15)*: Programs will assess the quality of housing status by calculating the percentage of participants with an improved quality in residency status between time of admission and time of discharge. (Benchmark = Greater Than 75%)
16. *Residential Stability (Measure 16)*: Improvement in residential stability compares the number of residency changes in the year prior to discharge as compared to the year prior to admission. Stability is defined as less than two residential changes in a one-year time frame. (Benchmark = Greater Than 60%)
17. *Employment/Education Status (Measure 17)*: Rate of enrollment in educational and employment status and identifies improvements between admission and discharge. (Benchmark = Greater Than 60%)

### ***Access and Fairness Measures***

18. *Access and Fairness (Measure 18)*: At each of three processing points, the percentage of each demographic group of the referral cohort are examined to identify changes in its composition, as members drop out and/or change status from previous processing steps. (Benchmark = Less Than or Equal To 5% For Race, Ethnicity, And Gender; Less Than 10% For Age)

### ***Improve Retention in Program Measures***

19. *Successful Completion (Measure 19)*: The percentage of participants in the admissions cohort who have successfully completed the program. (Benchmark = Greater Than 60%)

***Sobriety Measures***

20. *Positive Discrete Drug and Alcohol Tests (Measure 20)*: Average percentage of total scheduled drug and alcohol tests that return positive for an illegal or banned substance (e.g., alcohol, prescription drugs used for non-medical purposes or without a valid prescription, etc.) or have results that the program considers positive (e.g. admissions of use, late or missed test, diluted test, or tampered sample). (Benchmark = Less Than Or Equal To 10%)
21. *Positive Continuous Monitoring Tests (Measure 21)*: Average percentage of days for which a participant had a positive result on continuous monitoring drug or alcohol tests of total days monitored. Positive results include indication of use, admissions of use, and tampering with the monitoring device. (Benchmark = Less Than or Equal To 10%)
22. *Time From Last Positive Drug Test to Program Discharge (Measure 22)*: Average number of days between the last positive drug test and discharge by type of discharge. (Benchmark = Greater Than 90 Days)

***Reducing In-Program Reoffending Measures***

23. *In-Program Reoffending (Measure 23)*: The percentage of participants who have a case filed for a new jail-eligible offense with an offense date occurring between admissions and discharge. (Benchmark = Less Than or Equal To 20%)

***Reducing Post-Program Recidivism Measures***

24. *Post-Program Reoffending (Measure 24)*: The percentage of participants who were convicted of at least one jail-eligible offense within three years from time of discharge from drug court, reported by type of discharge. Post-program recidivism for drug court participants is defined as any new arrest that results in a conviction for a jail-eligible offense following discharge from the program. (Benchmark = Less Than or Equal To 20% Within 1 Year; Less Than or Equal To 30% Within 3 Years)