Program Narrative

1. Statement of the Problem

The La Crosse County Human Services Department of La Crosse County, Wisconsin requests $280,000.00 pursuant to Category 2 (Enhancement) of the Adult Drug Court Discretionary Grant Program FY 2017 Competitive Grant Announcement in order to fund a 36-month enhancement project for the La Crosse County Drug Treatment Court (DTC). This project will include a comprehensive evaluation (including process, outcome and cost-benefit evaluations), support NDCI training for team members, and establish a Family Support Program for participants. This will be a collaborative effort between the La Crosse County DTC, the National Center for State Courts (NCSC), and a local research partner (to be determined).

According to a 2014 report published by the Wisconsin Department of Human Services (2016), La Crosse County had higher population-based rates of drug-related hospitalizations (particularly opioid-related hospitalizations) compared to Wisconsin as a whole in 2012-2014, and drug-law arrests in 2013-2014. The mission of the La Crosse County DTC is to reduce drug-related crimes, better utilize jail resources, increase public safety in their community, and improve the quality of life for their participants and community. The business-as-usual (BAU) alternative is incarceration, indicating that the La Crosse County DTC serves a very high-risk population. According to the Wisconsin Department of Corrections (DOC; Tatar & Jones, 2016), the recidivism rate within 3 years of release in 2014 was 31.3% statewide. Of the recidivists who were originally incarcerated on drug-related charges, 43.9% committed a new drug-related offense, and 16% committed a violent crime post-release. The La Crosse County DTC provides an alternative for high-risk substance abusers to the BAU track of a prison sentence. This
program offers intensive, individualized treatment for substance abuse and resources aimed at motivating participants to defer from further drug abuse and criminal activity.

An outcome evaluation and cost-benefit analysis was conducted in 2005 (Zollweg, 2005), finding that the La Crosse County DTC had better cost-benefit value compared with incarceration, lower recidivism rates than incarcerated counterparts, improved family relations, improved community welfare, reduced jail costs, and many other benefits. In 2012, a ten-year recidivism analysis was conducted (Zollweg & Brun, 2012), finding a 20% recidivism rate for graduates of the DTC, and a 28% recidivism rate for participants who were terminated from the program, since program inception in 2002. In 2014, the Wisconsin Director of State Courts Office conducted a process evaluation (Perlich & Cern, 2014), making several recommendations to improve procedures and participant outcomes. Of importance, the treatment court judge was recommended for removal due to poor fit. Since that evaluation, a new treatment court judge has assumed this role at the La Crosse County DTC and new evidence-based practices have been implemented in an effort to improve their court procedures and participant outcomes.

The proposed project seeks to update and significantly enhance the methodology employed in the previous evaluations in light of these major changes, in adherence to the time standards for independent evaluations of adult drug courts per Standard 11 of the Wisconsin Treatment Court Standards (WATCP, 2014), Standard X of the NADCP Adult Drug Court Best Practice Standards1, and in support of Key Component #8 of the Ten Key Components.2

More specifically, the proposed project aims to provide critical feedback on the current state of the court’s operations, participant outcomes, and cost-benefit information compared with

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1 Hereafter, numbered standards will refer to the NADCP Adult Drug Court Best Practice Standards (2013; 2015)
2 Hereafter, numbered Key Components will refer to Defining Drug Courts: The Key Components (BJA, 1997)
a matched BAU comparison group. Results of this project will provide the La Crosse County DTC judge and staff with essential information about their compliance with best practice standards, recommended improvements, data about their participants’ program success and outcomes, potential underlying sources for negative outcomes or program failures, cost-benefit information, and technical assistance to make positive adjustments to processes and procedures.

While there is funding to support the basic operations of the program, the DTC does not have the resources to fund an independent evaluation, fund travel and NDCI training expenses for three team members, or develop and implement a collaborative Family Support Program. Project funding is sought to support these enhancement goals.

The La Crosse County Drug Treatment Court became operational in January 2002, following staff training provided by the Drug Court Planning Grant in the previous year. At its inception, there was no federal or state funding and the participant capacity was only ten. The court received federal funding from BJA in 2003-2006 (grant number 2003-DC-BX-0010), to improve operations and enhance capacity. Current capacity is now at 40, while the court currently has 26 participants (65% capacity). It is expected that the evaluation will provide information to the court and stakeholders (e.g., prosecution, defense) that will enable it to increase the number of participants served closer to its capacity.

Participants are non-violent drug offenders convicted of a felony or enhanced misdemeanor involving the possession, use, or sale of a controlled substance or other crime motivated by substance use. Since its inception, 67 (35%) participants have graduated and 124 (65%) have been terminated from the program. The evaluation is expected to provide information to the court that will enable it to increase its rate of successful completion.
The La Crosse County DTC targets High Risk individuals whose behavioral needs can be treated safely within the community while at the same time addressing their criminogenic risks through intensive supervision. Of the current participants, most (95%) were assessed as high-risk using multiple risk assessment tools, including the COMPAS, UNCOPE, pre-trial services information, clinical assessments, and self-reported drug use and treatment histories. Eligible participants do not necessarily have to reside within La Crosse County to participate, but must be in close proximity, have transportation to the court, and be a legal resident of the United States. Candidates with out-of-state convictions or convictions for firearm-related offenses or homicide are not eligible. Clinical exclusion criteria include lack of a substance abuse disorder or one that is not severe enough for treatment, as the court prioritizes resources for individuals with high treatment needs [Standard I]. Legally prescribed and appropriately administered Medication-Assisted Treatments (MAT) do not render defendants ineligible for the program.

The minimum length of the program is 12 months, with an average stay of 24 months. There are three phases which include stepped-down supervision and hearing requirements at each phase: Phase I (minimum 90 days), Phase II (minimum 120 days), and Phase III (minimum 150 days). Participants are required to attend regular judicially-supervised status hearings during which the judge directly interacts with each participant (Key Component #7). In Phase I of the program, status hearings are required weekly. The court coordinator is responsible for case management and works together with the DOC, as the BAU track is incarceration and the majority of participants are admitted to the drug court program from incarceration, though this is not a requirement for participation. Community supervision is managed by the State Probation Department, part of the Wisconsin executive branch. The court’s recovery support program includes cognitive behavioral therapy (CBT), employment readiness program or other job-related...
training, assistance in locating or financing housing, transportation, mentoring or peer support, and a court-sponsored alumni program (Key Component #10). Treatment providers, including those with access to MAT, include:

- Coulee Council on Addictions, 921 West Ave. S., La Crosse, WI 54601
- Mayo Clinic Health System, 212 11th St. S., La Crosse, WI 54601
- Gundersen Lutheran Behavioral Health, 1910 South Ave., La Crosse, WI 54601
- Hiawatha Valley Mental Health, 319 Main St., La Crosse, WI 54601
- Driftless Recovery Services, 444 Main St., La Crosse, WI 54601
- Addiction Medical Solutions Inc., 9532 East 16 Frontage Road, Onalaska, WI 54650

Random drug tests are conducted by the La Crosse County Human Services lab. In order to randomize the days and times for drug testing, an online randomization site is used. The site assigns participants a color which indicates what times in the week or month they will be tested. Participants must call the lab daily to hear if their assigned color is testing that day. Drug tests are given between 7:15AM and 8:00PM, alcohol tests (PBT) must be given before 9:00AM, ETG testing for alcohol is randomly called twice per week. Participants are given less than a 24-hour notice for every test, including the weekends (Key Component #5). Drug tests are observed by a person of same sex, and participants are instructed to have their sleeves up, shirt up, pants to knees, and must turn around completely to scan for items that may be used to cheat the test. Results are obtained within 2-3 days, and confirmation tests are conducted by request through Medtox.

Incentives and sanctions are used in response to participant milestones, progress, and infractions (Key Component #6). There is currently no written schedule for which sanctions will accompany infractions, but there is always a sanction for a positive drug test. Sanctions do not increase in severity with repeated infractions. Example sanctions include a verbal reprimand from the judge, increased monitoring, increased drug testing, writing assignments, community services, CBT homework assignments and groups, electronic or GPS monitoring, incarceration,
and house arrest. Incentives include verbal praise from the judge, certificates, tokens and/or medallions, gift cards, fish bowl drawings, “get out of court” passes, and a Star Chart to track positive progress.

In order to graduate, participants must pay their court costs and restitution fees per a payment plan, obtain employment or enrollment in school, complete treatment requirements, complete a graduation application, complete an exit status interview, develop a relapse prevention plan, and maintain a period of continuous sobriety. The La Crosse County DTC policies and procedures manual is included in Appendix A.

2. Project Design and Implementation

Participants are admitted to the La Crosse County DTC post-plea, as a condition of their sentence, or post-sentence. Referrals for participation can come from a wide variety of sources: the defense attorney, prosecutor, judge, probation/parole officer, pre-trial staff, the defendant (self-referral), or their family members. It typically takes 60-90 days between acceptance and entry into the program. Participants are linked with treatment and resources as soon as available, upon acceptance. One goal of the DTC is to reduce time from arrest to program entry to 50 days (Key Component #3). It is expected that the evaluation will provide information to the court and stakeholders (e.g., prosecution, defense) that will enable it to identify potential sources of delay in this process.

In 2016, La Crosse County DTC, admitted 19 males and 9 females. The racial breakdown of these admissions included: 27 White participants and 1 American Indian or Alaska Native. In effort to increase awareness of any potential racial disparity in the selection of eligible applicants, data will be gathered on access to fairness based on applicant race, ethnicity,
and gender. Analyses will be conducted to compare rates of eligibility, acceptance, admission, and exit between racial, ethnic, and gender groups.

Participants pay fees for drug court participation and supervision, which can be reduced by completing community service. Final payment of fees and restitution are not required for graduation from the program, and payment plans are set up to aid participants in repayment during the program. The average total amount of fees is $750, reduced to $500 if 25 hours of community service are completed. None of the fees would in any way interfere with the participant’s ability to receive rehabilitative care.

The proposed project aligns well with the State Strategy of Substance Abuse Treatment, as the attached letter of support from the Director of Wisconsin’s Single State Agency for Substance Abuse outlines. The goals of the proposal are in alignment with the State Strategy of Substance Abuse Treatment to:

1. Stop the abuse of alcohol and other drugs and related criminal activity through evidence based practices and collaborative approaches.
2. Develop performance measurements to analyze data and performance objectives from a statewide perspective for use in planning, management and evaluation; including quality improvement.
3. Promote the use of process improvement to increase access and improve substance abuse and mental health treatment outcomes in the state.

Project Design and Implementation: The primary goal for the proposed project is to provide targeted recommendations for enhancements to the La Crosse County DTC based on evaluation results. This goal will be achieved by accomplishing three objectives: (1) to examine court processes and procedures to assess compliance with national and state standards for drug treatment courts, use of evidence-based practices, and use of performance management; (2) to examine outcomes of drug court participants in comparison to outcomes for a BAU comparison group; and (3) to compare the cost efficiency of drug court participation to BAU.
A second goal of the project is to implement enhancements that address known opportunities for improvement at the DTC. This includes support for family relationships of the DTC participants [Standard VI (H)] and professional training for some of the newer DTC team members [Standard VIII(F)]. This goal will be achieved by two objectives: (4) to develop and implement a Family Support Program for DTC participants; and (5) to send three DTC team members to NDCI training specific to their treatment court disciplines.

The goals and objectives of this project as described are clearly in support of the goals of the La Crosse DTC, listed on page 5 of the attached Policies and Procedures manual:

- Reduce participant involvement in criminal behavior;
- Reduce participant costs associated with criminal case processing and re-arrest;
- Introduce participant to an ongoing process of recovery designed to achieve abstinence from substance abuse;
- Promote participant self-sufficiency to encourage them to become productive and responsible members of the community.

Upon completion of this project, the La Crosse County DTC will receive: An assessment of their compliance with national and statewide standards for drug courts; technical assistance to improve their compliance with the standards; an assessment of their use of evidence-based practices with recommendations for further implementations; an assessment of their use of performance management; reports of their participants’ short-term and long-term outcomes compared to a BAU comparison group; and reports on the cost efficiency of their drug court compared to the cost of BAU. Additionally, a Family Support Program for DTC participants will be developed and contracted as part of this grant project. Finally, three new DTC team members will participate in the NDCI professional training. These objectives and their deliverables are described in more detail below as well as in the attached logic model.
Objective 1: Examine court processes and procedures to assess compliance with national and state standards for drug treatment courts, use of evidence-based practices, and use of performance management. To accomplish this objective, NCSC will assess the court’s compliance with the national drug court standards and the Wisconsin treatment court standards, their use of best practices not covered by those standards, and their use of the performance management system developed by NCSC and adopted by the Wisconsin Association of Treatment Court Professionals (WATCP). This objective includes the following tasks:

1. Site visit
2. Survey assessing compliance with standards and other evidence-based practices

A site visit will be conducted by project staff that will include observations of drug court hearings and staffing meetings, interviews with team members, and a focus group of current participants. A survey will be developed by NCSC to gather feedback from the court coordinator regarding the court’s use of evidence-based practices, compliance with drug court standards, and basic court operations. Interviews with staff and stakeholders are necessary to gain perspectives on the court’s performance, operations, and to identify issues related to these subjects from a variety of sources. Both the participant focus groups and the staff/stakeholder interviews have provided valuable recommendations in evaluations of other drug courts.

The standards to be assessed for compliance are (1) the NADCP Adult Drug Court Best Practice Standards (NADCP, 2013; 2015) and (2) the Wisconsin Treatment Court Standards (WATCP, 2014). Project team members will review the standards and their measurements. Data for each standard will be identified and collected in order to compare current practices with the standards’ goals. If there are standards that are unmet or partially unmet, technical assistance will be provided to develop a plan for improving compliance with that standard. In addition to compliance with the standards, compliance with the 10 Key Components (BJA, 1997) and other
evidence-based practices such as use of MRT and MAT will be assessed and recommendations for improved practices will be offered.

The performance management system adopted by WATCP includes performance measures developed for Wisconsin treatment courts by NCSC (Cheesman et al., 2016). The performance measures aid the court in assessing and monitoring their procedures and participant outcomes. The DTC will be assessed on its use of this system.

This objective includes the following deliverables:

1. An assessment of the court’s compliance with national and state standards for drug treatment courts;
2. Technical assistance by NCSC to improve their compliance with the standards;
3. An assessment of their use of evidence-based practices, and recommendations for further implementations; and
4. An assessment of their use of the performance management system.

Objective 2: Examine outcomes of drug court participants in comparison to outcomes for a business-as-usual (BAU) comparison group. This objective aims to compare short-term and long-term outcomes of DTC participants with a BAU comparison group. This objective includes the following tasks:

1. Select a BAU comparison group using propensity score matching or a similar statistics-based technique
2. Collect outcome data for both groups
3. Collect contextual data (e.g., demographics, offense history, assessment information) for both groups
4. Compare short term outcomes between groups
   a. Successful completion rate
   b. Employment status
   c. Education status
   d. Housing
   e. Re-offense during participation/incarceration
5. Compare long term outcomes between groups
   a. Recidivism: 3-year follow-up after exit from program/incarceration

Matching the comparison group will be accomplished by NCSC using propensity scores or similar techniques based on inferential statistical methods. Data sources will include the
court’s local database, the Wisconsin AOC, the Wisconsin State Police, and the Wisconsin DOC. To permit adequate time for a three-year follow-up after exit from the DTC, a sample of DTC participants and their BAU counterparts who have exited no later than December 31, 2014 will be selected [Standard X].

The project team will initiate the process of data collection by submitting a data request to the Wisconsin DOC for outcome and contextual data of inmates in the matched comparison group. This data request will be given approximately two or three months in advance in order to provide the DOC ample time to acquire and send the data package. Meanwhile, the La Crosse County DTC will collaborate with NCSC to acquire outcome and contextual data on their current and past participants. Outcomes include successful completion rate, employment status, education status, housing, re-offense during participation/incarceration, and 3-year recidivism. Contextual data includes age, gender, race/ethnicity, entry/exit dates, closing status, services received, drug testing information, prison days served for control group, and other relevant variables. Recidivism data will be obtained from the State police database (arrests) and the AOC (convictions). Once all the data is received, NCSC staff will combine the data sets and commence the analysis. The data will be analyzed using a multivariate logistic regression to examine whether the probability of recidivism differs between the two groups. Poisson regression will examine the number of recidivistic offenses.

This objective includes the following deliverable:

NCSC staff will complete an outcome/impact evaluation report. Key questions to be answered in the outcome/impact evaluation report include:

1. What were the significant characteristics of participants when they entered the La Crosse County DTC, including demographic information? What were the significant characteristics of the comparison group, including demographic information?
2. What is the successful completion rate of the La Crosse County DTC?
3. How do the recidivism rates of La Crosse County DTC participants compare to the comparison group?
4. How do the pre- and post-stabilization factors of the two samples compare, including housing, employment, and education?

The outcome evaluation report will also include La Crosse County DTC specific data including:

1. A description of the goals of the La Crosse County DTC
2. Descriptive information about the program (date court became operational, eligibility criteria, description of partner agencies and staffing levels, incentives for offenders to enter and complete, a description of the program’s phase system, treatment services, team meetings, team court sessions, drug testing procedures, ancillary services, sanctions and rewards)
3. Capacity and enrollment data
4. Demographic information related to participants (gender, ethnicity, age, educational level and marital status)
5. Risk data (prior record/criminal history, prior treatment attempts, drugs of choice, entry offense)
6. Referral data (% of referrals found appropriate for the court, % of appropriate referrals admitted, examined by demographic characteristics)
7. Measures of timeliness (days between arrest and admission, days between referral and eligibility assessment, days between eligibility assessment and admission, days between admission and treatment entry, time between precipitating event and sanction)
8. Measures of sobriety (number of drug tests administered, % positive drug tests)
9. Perceptions of procedural justice
10. Recidivism data (in-program recidivism, post-exit recidivism)
11. Accountability Measures (# of community service hours performed, amount of program fees or treatment fees collected, amount of restitution collected)
12. Service data (retention rate, graduation rate, reason for termination, number of judicial status hearings, number of incentives given, number of program violations, etc.)
13. Recommendations for improvements based upon the findings

Objective 3: Compare the cost efficiency of drug court participation to the matched comparison group. The final evaluation, the cost-benefit analysis, will compare the costs and benefits for La Crosse County DTC participants versus the matched comparison group. This objective includes the following tasks:

1. Collect cost-to-taxpayer data from La Crosse County DTC participation
2. Collect cost-to-taxpayer data from the matched comparison group from the local prison
The project team will complete a detailed analysis of the costs and benefits associated with the drug court participant group and the matched comparison group using the Transactional and Institutional Cost Analysis (TICA; Crumpton, Carey, & Finigan, 2004) approach to cost-benefit. The six steps involved in this approach include:

1. Documenting the drug court and non-drug court processes (how do defendants move through the system);
2. Identifying the transactions that occur with these processes (where do clients interact with the system);
3. Identifying the agencies involved in each transaction (e.g. court, treatment, probation, prosecutor’s office);
4. Determining the resources used during each transaction (e.g. judge’s time, attorney’s time, cost of drug screening supplies);
5. Isolating the cost of resources (e.g. cost of the treatment provider’s time per hour or per drug court session);
6. Calculating overall costs (e.g. cost per transaction, total cost of the program per participant)

A “cost-to-taxpayer” approach will be used: assessing the costs that directly impact county citizens either through tax-related expenditures or personal victimization costs/losses due to crimes committed by participants. Costs and benefits involving public funds will be used in the study while costs paid by the individual participating in the program will be omitted.

Therefore, any criminal justice related cost incurred by La Crosse County DTC participants or inmates of the matched comparison group that directly impacts a taxpayer/citizen (either through program expenditures or the results of being a victim of a crime) is included in the calculations.

Three costs will be calculated by the evaluation team:

1. Transaction costs entailed from the point of arrest to admission for La Crosse County DTC participants and from the point of arrest to incarceration for the matched comparison group from the state prison
2. Transaction costs resulting from participation in the La Crosse County DTC and from incarceration for the matched comparison group
3. Avoided costs resulting from differences in outcomes (recidivism in particular) between La Crosse County DTC participants and their matched counterparts from the local prison

This objective includes the following deliverable:
A cost-benefit analysis report will be drafted by NCSC staff, which summarizes the research design for the cost-benefit analysis and contrasts the costs and benefits of the La Crosse County DTC participants with the matched comparison group from the local prison.

Objective 4: Develop and implement a Family Support Program through partnership with a local service provider for the benefit of current and future DTC participants. The La Crosse County DTC plans to develop and implement a Family Support Program for participants and their families [Standard VI(H)]. This goal will be achieved through partnering with a local service provider to deliver services such as in-home counseling and family interaction programs. Participants in the DTC often find themselves involved in multiple county/local systems, such as Child Protective Services and/or Mental Health services due to their addictions. A strong natural support system which allows for those participating in the DTC to have ongoing success beyond graduation from the treatment court is essential. In an effort to enhance the support, strength, and knowledge for those providing this natural support, additional services are necessary locally to fill gaps.

In-home counseling seeks to provide counseling services to participants and their families by identifying factors within the individual, family system, or community setting that contribute to challenges faced by the participant. This may include diagnosis of mental, emotional, or behavioral disorders, conditions, or addictions, as well as environmental, psychosocial, or interpersonal factors that may influence the participant’s behaviors. Treatments will include CBT, Trauma Focused-CBT, Dialectical Behavioral Therapy, or other evidence based practices.

Family interaction programs seek to provide support to DTC participants and their children. Forms of support may include monitored family interactions, individualized parent education, life skills assistance and safety checks for children and families. Actual services
rendered will depend on the professional expertise of the local partner. Three specific programs of interest are the Child at Risk Monitor (CHARM), supervised visits between DTC participants and their children, and parent and life skills coaches. Each of these is focused on the well-being of the children and building a safe, responsible relationship between the child and parent (DTC participants). Currently, 77% of participants have minor children, with varying degrees of custody.

This objective involves the following task:

1. Development of a contract for service

   Partnerships with local service providers will be sought via a request for proposals (RFP) in order to recruit professional providers to deliver services, to maintain program sustainability following project completion, and to promote collaboration between the DTC and community partners (Key Component #10). Local service providers identified as potential partners include: Peace of Mind, Stein Counseling, and Parenting Place.

   This objective includes the following deliverables:

   At least 50% of DTC participants will be offered Family Support Program services. Of those offered services, 75% will participate in Family Support Program services.

   **Objective 5: Provide NDCI professional training to three DTC team members.** NDCI offers a four-day comprehensive training in Reno, Nevada to assist drug court team members of different disciplines in adjusting to the Drug Treatment Court model and adhering to the nine core competencies and Wisconsin Treatment Court Standards. Example training topics for the Judge, DOC, Prosecutors and Defense attorneys include: Incentives and Sanctions; Drug testing protocols; Intervention and enforcement strategies; Case management strategies; Role of
Community Supervision in Drug Treatment Court; Constitutional issues; Ethics and Federal 
confidentiality laws; Judicial styles; Leader and role of the Drug Treatment Court Judge.

As new members of La Crosse County DTC team have emerged, including the potential 
for a future transition in judicial leadership, a new prosecutor and new law enforcement 
representation, it is imperative that all team members receive the appropriate foundational 
training and information to be effective treatment court team members. Therefore the following 
tasks will be involved in this objective:

1. Judicial and prosecutorial participation in the March 12-15, 2018 NDCI training in 
   Reno, Nevada
2. Law enforcement participation in the September 17-20, 2018 NDCI training in Reno, 
   Nevada

   **Capabilities and Competencies**

La Crosse County Human Services (LCHS), the La Crosse County DTC, and NCSC are 
well positioned to accomplish the project objectives and deliverables. The La Crosse County 
DTC brings knowledge about their court’s history and practices, data collected over time on 
participant demographics and progress, local issues relevant to the court’s function and 
participation, and political and administrative realities. NCSC brings years of experience with 
assisting other adult drug courts in outcome, process, and cost-benefit evaluations using standard 
best practices (see e.g., Cheesman. Graves, Holt, Kunkel, Lee, and White, 2016).

LCHS is focused on continuing development and improvement of a foundation of 
services based on Evidence-Based Practice, Trauma Informed Care and Motivational 
Interviewing. This is exemplified through the numerous ongoing initiatives La Crosse County is 
involved in including: Wisconsin’s Evidence Based Decision Making initiatives sponsored by 
the National Institute of Corrections; Treatment Alternatives and Diversion (TAD) grant funding 
by the State of WI to fund pretrial and diversion services; ongoing implementation and training
on Cognitive Behavioral interventions and curriculum to include but not limited to SMART Recovery, Thinking for a Change, Moving On, Carey Guide, and Moral Reconciliation Therapy; Staff training in Trauma-Informed Care and Motivational Interviewing; and support and oversight provided by the local Criminal Justice Management Council and Health & Human Services board.

Electronic databases are maintained by LCHS (AVATAR) and the Wisconsin DOC (COMPAS) in order to more effectively track participant performance and outcomes, and in adherence to Standard X(F). Data from these electronic sources will be readily used for the evaluations described in this proposal.

NCSC has conducted evaluations of drug court programs in Colorado, New Jersey, Georgia, Hawaii, Kansas, Missouri, Utah, Virginia, Wisconsin, West Virginia, Wyoming, Puerto Rico, Nebraska, Indiana, and Maryland. The NCSC has worked extensively with all types of problem-solving courts, including mental health courts, community courts, veterans’ courts, and re-entry courts as well as adult, juvenile, and family drug courts.

NCSC was also involved in three notable nationwide efforts that demonstrate problem-solving court expertise. NCSC partnered with the BJA, the NIJ, and American University on a “Research to Practice” project (R2P), which was cited in the solicitation as a resource for best-practices. This project produced a series of webinars that translated what the research has demonstrated to be an effective practice into useful educational products for drug court practitioners. Nationally, NCSC also developed the PSC Toolkit which documents best practices for implementation of PSCs and can be found on NCSC’s webpage. NCSC is also partnered with the BJS and the National Drug Court Institute to conduct a problem-solving court census.
There is an established partnership between the Wisconsin justice system and NCSC, based on previous collaborations. NCSC partnered with Wisconsin in order to develop statewide performance measures for drug treatment courts, currently used in all Wisconsin drug treatment courts (Cheesman et al., 2016). The proposed project will rely on data collected for these standard performance measures, which were developed to align with the national and statewide drug court standards. NCSC also partnered with Wisconsin courts to aid in the implementation of evidence-based practices in their criminal courts statewide (Tallarico et al., 2011). Wisconsin recently implemented a statewide electronic reporting database for its court system, including La Crosse County [Standard X(F)]

The La Crosse Project Director will be Becky Spanjers MSW, APSW, Magna cum laude millennium graduate of UW-Milwaukee Helen Bader School of Social Welfare. She is published in the Journal of Illness Crisis and Loss, 1999, “Changing the Steps in the Circular Dance of Abuse.” She has experience in the areas of severe and persistent mental illness and substance abuse, crisis programming implementation and therapeutic intervention related to substance abuse and mental health challenges, criminal justice supervisor of alternatives to incarceration programs, i.e.: Pre-trial/Bond/Sentenced/Drug and OWI Treatment Courts, Facilitator Treatment Court Policy Teams. She is also a committee member of EBDM and Pre-trial initiatives to improve the criminal justice system in La Crosse, Wisconsin. Ms. Spanjers will work closely with the Drug Treatment Court Team, NCSC Research Project Director, Dr. Fred L. Cheesman II, and contracted community partner to coordinate all project work necessary for a successful evaluation.

The research director for the project will be Fred L. Cheesman II, Ph.D., a Principal Court Research Consultant with the NCSC with broad experience in program and policy
evaluation and performance management. This experience includes: (1) evaluation of risk assessment instrument for low-level offenders in Virginia; (2) development of performance measures for drug (juvenile and adult), DWI, Veterans, and Mental Health Courts; and (3) Drug Court evaluations in the 9th Circuit of Missouri, Hawaii, Virginia, and Wyoming. Dr. Cheesman prepared an introduction to program evaluation for drug court professionals that was committed to a widely-distributed DVD in 2010. He also served as the Director of the “Research2Practice” project and participated in the development of the NADCP Adult Drug Court Best Practice Standards. Dr. Cheesman will assist Ms. Spanjers with project management and coordinate with her on all project work. He will oversee all NCSC activities, and will provide expert knowledge about outcome evaluation and cost-benefit analysis.

Lydia Hamblin, Ph.D., is a Court Research Associate in the Research Division of the National Center for State Courts. Her NCSC project work has focused on judicial professional development, staffing of civil case management teams, performance measurement and evaluation of problem-solving courts, and statewide judicial workload assessments. She earned her Ph.D. in Industrial-Organizational Psychology with a minor in Statistics at Wayne State University in Detroit, Michigan.

Scott Graves, Ph.D., is Court Research Associate with the Research Division of the National Center for State Courts. Dr. Graves joined the NCSC in 2011. Before joining the Center, he worked as faculty in the political science department of Georgia State University, specializing in judicial politics and research methodology. He has conducted research on judicial selection and retention methods, economic and technology issues in courts, litigation and case processing, and judicial ethics and recusal. He is the author or co-author of articles on state criminal justice, election litigation, antitrust in the courts, and a book about judicial recess
appointments. Dr. Graves holds a Ph.D. and a Masters degree from Stony Brook University in New York.

**Kathryn J. Lewis, M.S.,** is a Court Research Analyst in the Research Division of the National Center for State Courts. She received her B.A. in psychology from the College of William and Mary and her M.S. in criminal justice from Virginia Commonwealth University. Since joining the National Center for State Courts in 2014, she has been involved in problem-solving court evaluations in nine states, including one statewide drug court evaluation, and the development of performance measures for two problem-solving courts. Ms. Lewis has extensive experience in assessing and improving courts’ data quality and computing the statistics included in final process and outcome evaluations. Her additional project work has included the Court Statistics Project, the Criminal Appeals Project, and the Census of Problem-Solving Courts.

Other NCSC staff includes Nikki Harris, who will provide administrative assistance to project staff.

3. **Plan for Collecting the Data Required for the Solicitation’s Performance Measures**

Data for the BJA Performance Measures will be collected from the electronic databases maintained by LCHS (AVATAR) and the Wisconsin DOC (COMPAS). The AVATAR database collects participant-level data on demographics, in-program performance, treatment and services, relevant outcomes, and case notes. The COMPAS database collects information on participants’ criminal charges and history of incarceration. LCHS is willing and able to provide aggregated participant-level performance and outcome data to BJA via the Performance Measurement Tool, as required by the solicitation.

The Time Task Plan (attached) reflects the DTC plans to reach maximum capacity within the three year grant cycle. The process evaluation will document the screening and referral
process being used by the DTC and examine program capacity as compared to actual capacity on a quarterly basis and the community reintegration or aftercare strategies being employed. The evaluation will ensure that the most appropriate offenders are referred to the DTC, that the programs are reaching maximum capacity, and that community reintegration needs are addressed. The referral process will be evaluated against the county’s substance abuse arrestee population. As a result of this process evaluation, the DTC will make adjustments to ensure that the program operates according to evidence-based practices.

Currently, aftercare plans are developed with the participants and based on their individual needs. Transitional and drug-free housing is recognized as a crucial part of the reintegration process. Some of the transitional housing programs include Attic Transitional Housing, Oxford House, and a limited number of apartments set aside for single participants with a clinical (mental health, substance abuse) need. Women are encouraged to participate in the group services offered at Ophelia’s House, a residence that many of the female DTC participants are transitioned to during participation. Non-resident female participants and graduates are encouraged to participate in groups to hone skills beneficial to community acclimation.

All are encouraged to follow through with relapse prevention groups through their insurance network, develop a relapse prevention plan, and identify support to tap into when recovery is challenged. Peer facilitation of SMART support group is encouraged for DTC graduates. Graduates are asked to participate in the court’s Ambassador Program and ALL RISE website postings.

The proposed project seeks to add the Family Support Program as another important component to supporting participant reintegration. Evaluation of needs, documentation of service provisions, construction and completion of a Request for Proposal (RFP) or contract
enhancement (if contracted services already exist) will occur early in the grant cycle. This will allow for programs and services to begin to be offered to DTC participants in years two and three of the grant cycle.

Additionally, NDCI training of new DTC team members will occur early in the grant cycle, to ensure those participants on the team are equipped with core knowledge of treatment court standards.

The La Crosse County DTC coordinates with local, state, and federal resources to support program sustainability and maintain best practices. Court staff attend the WATCP state conferences annually. Previous grants have provided Standards Training (WATCP/DOJ), guidance on evidence-based decision making (NICIC), and pre-trial standards (NICIC). The DTC effectively collaborates within the local community to provide sustainable resources to support the court’s goals and participant success.