TO: Qualified Treatment Providers

FROM: Fifth Judicial District Drug Court.

RE: Application for Preferred Provider Appointment (APPA)– Invitation to Submit Proposal to Provide Treatment for Fifth Judicial District Drug Courts.

DATE: March 15, 2004

General concept and background information

The Drug Court in the Fifth Judicial District is seeking the most qualified treatment provider(s) with experience in treating medium-to-high criminogenic risk, chemically dependant offenders who are participating in the Fifth District drug courts. The Fifth District is seeking treatment that blends substance abuse / dependence treatment content as a co-occurring disorder with criminality. We prefer these issues not be treated sequentially or separately, but rather in an integrated program approach. Additionally any experience your agency has with services addressing mental health issues should be described, as well.

Treatment providers responding to this invitation who are selected to provide treatment for the Fifth Judicial District Drug Court will sign a contract with BPA, beginning July 1, 2004 and continuing through June 30, 2005, with the potential for contracts in subsequent years, based on satisfactory performance. Each month of the contract, the treatment provider will provide a service log identifying clients served and the services provided to each client to the Fifth Judicial District Drug Court Coordinator.

Effective July 1, 2004 funding for the Fifth District Adult Drug Court is expected to be $219,300, to provide services from July 1, 2004 to June 31, 2005, although the Idaho Supreme Court has not yet made final allocation. Other possible grants may allow an increase in this level of funding. The Fifth Judicial District invites your agency to submit a proposal to provide substance abuse/chemical dependency/ criminality focused treatment in the Fifth Judicial District.

Treatment providers must submit proposals to the Trial Court Administrator's Office, Theron W. Ward Judicial Building, Twin Falls, Idaho. **Completed Application Forms and Worksheets must be received by 5:00PM April 30, 2004**. Applicants will be called for an interview by the Fifth Judicial District and there will also be an informational meeting on April 1 at 1:30 p. m. at the Twin Falls, Theron W. Ward Judicial Building.

If you have any questions regarding this proposal or completing the application form, you may call Linda Wright (736-4085).

In responding to the APPA, the treatment provider should consider first completing the attached WORKSHEET, and then the SERVICE PROVIDER APPLICATION FORM.

Cc: Norma Jaeger, Supreme Court Drug Court Coordinator
Corrie Keller, Supreme Court Fiscal Office
Pharis Stanger, Health and Welfare

Attachments:
Application Form
Special Conditions and Requirements for Drug Court Treatment Providers
Weekly Staffing Report
Drug Court Entrance Procedure.
Drug Court Example Core Competencies.
After Care Program
Providers comment sheet

Attachment 1

Preferred Provider Application Form
(Must Submit to Trial Court Administrator Office
By April 30, 2004 at 5:00 p.m.)

Fifth Judicial District_____ Drug Court Program
(County or Counties you propose to serve)

Instructions: Specify the counties in which you propose to provide services. This is not a bid process, but an APPLICATION FOR PREFERRED PROVIDER APPOINTMENT The successful applicant(s) will be placed on a preferred provider list for receiving District 5 drug court referrals. The Fifth Judicial District Drug Courts desire the most qualified, experienced treatment provider(s) who are willing to work in a highly team-oriented approach in which treatment and criminal justice sanctions and incentives are strongly coordinated. The Fifth Judicial District drug court teams prefer continuity with regard to the professional staff that provide treatment services. Please list the name of all individuals that will provide the following drug court services:

Process Groups: _____
(name)

_____
(name)

_____
(name)

Education Groups: _____
(name

_____
(name)

Assessments: _____
(name)

_____
(name)

Drug Court Staffing: _____
(must be primary counselors) (name)

_____
(name)

_____
(name)

Staff Qualifications: Provide a listing of the staff that will deliver direct services to the drug court participants and provide information detailing the professional qualifications of each of these staff members.

Staff Development plans: For treatment staff involved in treatment of drug court or other medium to high-risk offenders – describe your anticipated training plans.
Include your plans for training in: Orientation and continuing education for appropriately serving the medium to high risk offender population with substance use disorders

Treatment Planning for Integrated Substance Abuse / Dependency / Criminality treatment

Outpatient Treatment Program Detail

Describe on separate pages your outpatient services, including the structure and schedule as well as the treatment content you will provide that addresses the specific needs of medium – high risk criminal justice offenders (LSI composite score of 18 or above) in the following areas:

Assessment
Individual Counseling
Problem Solving / Process Groups
Cognitive Restructuring Groups
Education Groups
Relapse Prevention
Linkage to Support Groups
Family Engagement
Women's Issues
Other (Specify)

Provide an outline identifying your proposed treatment groups and giving a few sentences describing each group. (Examples: Women's Issues, Cognitive Restructuring, Family Engagement, Relapse Prevention)

Briefly describe how your treatment content is designed and delivered to ensure participants will progress toward and achieve phase-specific competencies.
Attachment 5 provides a list of suggested core competencies each drug court participant must achieve in each phase of the program. The Fifth District drug court team may define other competencies.

Provide a sample of a written assessment summary that you would provide for each participant referred by drug court, including ASAM and substance use assessment summary.

Identify any training your staff will require from drug court in order to meet drug court expectations in the following areas:
Drug Court Participants Intake/Approval Form
Drug Court Participant Approval Process
Use of Assessment Instruments
Criminogenic Risk Assessment- (LSI)
Collaborative Treatment Planning for Drug Court Participants

Attachment 2

(Submit with your application and proposal)

Special Conditions: (Check the following boxes to indicate that you agree to comply with these conditions – an unmarked box means you cannot or will choose not to comply).

- ☐ Possess and maintain State of Idaho treatment facility approval as determined by the Idaho Department of Health and Welfare.

- ☐ Maintain a treatment contract with Business Psychology Associates, Inc. A provider, not currently a member of the Business Psychology Associates, Inc (BPA) Treatment Network, will, if selected to be a preferred provider for drug court, enter into and maintain a contract with BPA and be reimbursed for treatment in accordance with requirements of the Idaho Department of Health and Welfare. Such a BPA Network provider will comply with all related BPA contract requirements, including timely response to any audit findings by BPA.

- ☐ Deliver a set of treatment services that are based on research-based principles of effectiveness for substance abusing and dependent offenders and that are agreed upon with the drug court team, consistent with statewide drug court guidelines.

- ☐ Organize treatment into the drug court treatment phases which are I Assessment and Engagement, II. Active Treatment, III. Transition and IV Maintenance.

- ☐ Develop a format of participant competencies to be used to determine participant readiness to move from one phase to the next.

- ☐ Provide an assessment summary for each drug court participant via FAX to the Drug Court Coordinator within one week of receiving the Request for Assessment.

- ☐ Attend the monthly 2- hour peer review / "Total Quality Management" session facilitated or organized by the Fifth Judicial District Drug Court Coordinator.

- ☐ Share all appropriate client progress and participation information in the drug court staffing with the Drug Court Team and actively participate in drug court treatment planning.

- ☐ Retain all drug court participants in treatment, unless termination is agreed upon by the drug court team. A provider alone cannot expel or deny treatment to a client. This must be a unanimous team decision. In unusual circumstances, the provider may temporarily suspend participation if continued participation poses a risk to other participants or staff.

- Attend the revised "Cognitive Self Change Phase I" training, and Department of Correction Phase II and Phase III CSC training (no registration or tuition costs) and integrate this CSC or another approved cognitive restructuring content into process groups and individual counseling.

- Bill drug court for the client co-pay for treatment or develop an agreed upon payment plan with the drug court team for any participant that is in drug court as a self-pay participant. The Fifth Judicial District allows the option of otherwise eligible drug court participants self-funding when state funding is not available.

- Work cooperatively with other providers if the District uses other service providers concurrently with the substance abuse / dependency treatment

- Provide treatment services to clients on Monday, Wednesday, and Friday in order to spread out treatment sessions during the first and second phases of the program.

- Coordinate with the drug court to obtain residential treatment for a drug court participant that is found to need residential treatment and assist the client in obtaining general state funding. Access to residential treatment will be based on availability of such state funded residential treatment, other available resources, or a client's willingness to self-fund.

- Send Group Attendance Sheets for drug court participants to the drug court coordinator's office each week to be included in staffing report.

- The provider will limit group enrollment to twelve participants in a process group and eighteen participants in an education group. (13 participants for a 2 to 3 week, transitional period may be allowed).

- If a group size is less than twelve, other medium to high criminogenic risk participants, who are not in drug court, can be added to a process group. Low criminogenic risk individuals will not be mixed with high criminogenic risk individuals in process groups provided to drug court participants.

- Assign the primary drug court treatment counselor(s) from your agency to attend drug court staff meetings. (No exceptions)

- Provide a detailed outline and narrative in a notebook or manual format describing the treatment content for drug court participants to the drug court team by October 30, 2004.

- Communicate via e-mail when possible.

- Assure that all individuals conducting drug court treatment and assessments attend Moral Reonation Therapy (MRT) training. This will be scheduled and provided at no registration or tuition cost to your agency. Moral Reonation Therapy is an approved cognitive restructuring program designed to be delivered to high criminogenic risk participants as part of the integration of substance use / dependence treatment and criminality intervention. Provide drug court with a copy of the individual treatment plan or any updated treatment plans for each drug court participant, using an approved format.

- Provide drug court with a copy of the individual treatment plan or any updated treatment plans for each drug court participant, using an approved format.
- Comply with all Federal and Health and Welfare requirements and electronic transmissions from the providers to the county and the Idaho Supreme Court that contains protected health information shall comply with the pertinent requirements of the Health Insurance Portability and Accountability Act (HIPAA). Appropriate consent to exchange information with criminal justice system personnel will be obtained by the Drug Court Coordinator to allow the necessary communication in compliance with 42 CFR, Part 2, Revised.
- Provide a written plan that demonstrates ability to cover last-minute emergencies such as possible cancellation of a process group because of staff illness, vacation, or attending training not required by drug court.
- Communicate the progress of each drug court participant to the Drug Court Coordinator for preparation of the overall participant progress report to be presented at drug court staffing. The Fifth Judicial District will provide the required format.
- Submit the monthly BPA billing, to the Drug Court Coordinator for the courts records. Include a summary of # of Assessments done, # of Class hours, # of individual interviews, and any other charges, to arrive at the total billed to BPA.
- Monitor and report on attendance at required 12-step meetings on the weekly client's progress report form.
- Assure that every drug court sanction has been approved by the drug court team as a group in staffing and imposed on the participant by the Judge, on the record.
- Bill BPA at 100% of the drug court reimbursement rate (BPA will pay 95%, and the Fifth Judicial District will pay the provider the remaining 5%. Provider will not bill any additional fees to drug court participants

Attachment 4
Additional Treatment Provisions

Additional Treatment Provisions
All drug court compliance UA testing will be performed by the UA provider chosen by the Fifth Judicial District. The results of all drug court UAs will be e-mailed to the treatment provider the following day. This will allow the treatment provider the information needed to address relapse issues in treatment. Treatment providers are encouraged to monitor abstinence through UAs and to address use of alcohol or other drugs while in treatment. The treatment provider may require additional UAs as part of the treatment process, but UA results obtained by the treatment provider, performed outside of the District 5 UA provider, will not be accepted to dispute the District's UA provider's testing results.

All drug court participants in phase I and II are expected to qualify for IOP services (9 hours a week). The provider will be required to provide 9 hours of outpatient treatment per week including Cognitive Self Change or Moral Recognition Therapy in Phase II. The drug court structure will provide an additional 3 to 4 hours of requirements (2 AA meetings per week and 1 Court Session).

An average of one individual counseling session per month for one hour should be conducted for every drug court participant. (In some cases, a participant may be seen 2 or 3 times a month, and other participants once every two months.)

Phase I of drug court treatment is generally a minimum of 12 weeks and can be extended based on the participant's progress in achieving the required competencies (see Attachment 5 for examples of core competencies).

If additional engagement work is needed additional treatment services can be added during phases II, III and IV. Examples include Anger Management, Women's Issues, Parenting classes or job skills. Drug Court will meet in Burley and Twin Falls weekly and service must be provided in both locations.

Phase III – Transition generally consists of one group a week for 2 hours in duration and Phase IV generally consists of one group a month. The length of each phase and the exact group time requirements will be determined by the drug court team in consultation with the treatment provider.

In Phase IV drug court clients will begin their transition to attend the agreed upon Aftercare program under direction of the court.

Phase V Aftercare services will consist of an ongoing alumni group that is provided under the supervision of the drug courts.

Using ASAM criteria, when a drug court participant is ready to step down, engagement in the group process should be reduced gradually. Appropriate time periods or length of engagement to address individual needs will be determined by the drug court team in consultation with the treatment provider.

Drug Court Treatment Phases will be organized as follows:

Phase I Orientation and Engagement

Establish abstinence, understand and accept that a substance use problem exists, demonstrate initial willingness to participate in treatment activities and comply with the conditions of drug court participation, establish an initial therapeutic relationship, and develop a plan for active treatment

Phase II Intensive Treatment

Demonstrate continued efforts at achieving abstinence, develop understanding of substance use and offender recovery tools, including relapse prevention, develop understanding and ability to employ the tools of recovery and cognitive restructuring of criminal /risk thinking, develop the use of a recovery support system, and assume or resume socially accepted life roles including education or work and responsible family relations

Phases I and II should not be completed in less than 90 days and should provide at least 100 hours of planned therapeutic activity.

Phase III Transition / Community Engagement

Demonstrate continued abstinence, demonstrate competence in use of recovery and cognitive restructuring skills in progressively more challenging situations, develop further cognitive skills such as anger management, negotiation, problem solving and decision making, financial and time management, connect with other community treatment or rehabilitative services matched to identified criminogenic needs, demonstrate continued use of a community recovery support system, and demonstrate continued effective performance of socially accepted life roles

Phases I, II, and, III should typically be completed in 12 months.

Phase IV. Maintenance Skills

Demonstrate internalized recovery skills with reduced program support, demonstrate ability to identify relapse issues and intervene, complete any amends necessitated from prior criminal and substance use behavior, and contribute to and support the development of others in earlier phases of the drug court treatment program.

Phase V. Aftercare

Starts during Phase IV and is a meeting that is run by the Court, lasting for 6 months after all drug court fees are paid. This meeting may take the place of one required 12-step meeting.

Contingent on continued funding for drug court treatment by Health and Welfare and the Idaho Legislature, this preferred provider selection may be renewed for up to three years without the issuance of another APPA. The Fifth Judicial District Drug Court retains the right to terminate preferred provider status of any treatment provider upon a 30 day written notice.

In order to ensure appropriate utilization of available drug court “treatment capacity ”, the Drug Court Coordinator will monitor the Districts drug court budget and be the gatekeeper for drug court treatment. The District has based its treatment projections on funding 62 adults in drug court.

ATTACHMENT 5

Drug Court Core Competencies
(On-Going Work in Progress)

PHASE I

Knowledge	Measurement
Complete and report on personal history of substance abuse and criminal behaviors.	Written history presented during individual session and processed with group
Learn physical, cognitive, emotional and social effects of substance abuse.	Identify at least 5 personal effects in each area, discuss with counselor and process with group
Demonstrate understanding that thinking drives behavior—certain thinking is problematic and causes negative actions and results.	Documented in thinking reports & journaling Verbalize concept CSC I pre/post test pass at 80%
Learn to recognize errors in thinking and cognitive distortions supportive of addictive and criminal behaviors.	Demonstrated in thinking reports & journaling Provide list of personalize thinking errors
Learn how to journal, identify patterns of thinking, and complete thinking reports.	Weekly observation of journal & thinking reports
Learn about Cognitive Behavioral Theory and explain it in a concise model.	Draw and explain model to group
Learn about the Motivational Enhancement model and demonstrate characteristics of at least the Contemplation Stage of change.	Verbalize understanding of concepts during individual session and process with group
Learn the AA/NA 12 Steps. Explain the meaning & purpose of a home group & sponsor.	Recite the 12 steps and their meaning

Skills	Measurement
Demonstrate consistent timeliness, attendance and participation for all treatment sessions, call-ins, drug tests, and other required activities.	Counseling attendance sheets Probation Call-in logs Pass/fail 100% compliance
Demonstrate use of a planner and ability to establish and meet daily, weekly and monthly goals.	Observe planner and monthly goals
Demonstrate completion of a working budget and ability to adhere to it.	Make payments in timely manner 100% Observation of current budget
Stabilize non-substance abusing/criminal problems: Obtain/maintain consistent employment, housing, medication management, etc.	Verify by collateral contact w/ landlord, employer, doctor, etc. # days employed & pay stubs, # days homeless & rent receipts, med management records, etc.
Establish a positive social support constellation, including weekly attendance of AA/NA with a home group and sponsor.	Observe AA/NA card for signatures Provide written list of who associates are Note who sponsor/home group is
Demonstrate ability to consistently abstain from relapse and recidivism	Drug tests to demonstrate abstinence No arrests or Probation Violations

PHASE II

Knowledge	Measurement
Identify five key personal thinking patterns connected with substance abuse and criminal behaviors.	Written list presented during individual session and processed with group Personalized patterns are reflected in journal
Identify specific interventions associated with these thinking patterns.	Written list presented during individual session and processed with group Include as part of Relapse Prevention Plan
Learn how to use appropriate external supports.	Observe AA/NA card for signatures Provide written list of who associates are Note who sponsor/home group is
Learn key components of a successful relapse prevention plan.	Complete draft of RPP & explain application

Skills	Measurement
Demonstrate consistent timeliness, attendance and participation for treatment sessions, call-ins, drug tests, and other required activities.	Counseling attendance sheets Probation Call-in logs Pass/fail 100% compliance
Demonstrate ongoing use of planner and budget.	Observe planner, goals, and budget Make payments in timely manner 100%
Maintain consistent employment, medication management, housing, etc.	Verify by collateral contact w/ landlord, employer, doctor, etc. # days employed & pay stubs, # days homeless & rent receipts, med mngt records, etc.
Implement and refine intervention strategies in response to risk factors.	Keep RPP updated with personal strategies
Demonstrate characteristics of the Action Stage of change.	Pass written test Demonstrate by behaviors & journal topics
Demonstrate ability to consistently abstain from relapse and recidivism.	Drug tests to demonstrate abstinence No arrests or Probation Violations
Maintain competency in Phase I knowledge and skills.	Review at staffing Accomplishing Phase goals/competencies Verbal/written quiz

PHASE III

Knowledge	Measurement
Complete a comprehensive relapse prevention plan.	Written & presented to group, approved by group facilitator
Learn how to modify and update plan as needed.	Address personalized issues/triggers and modify plan

Skills	Measurement
Establish an educational and/or career enhancement plan.	Document development of plan with goals & objectives Contained in relapse prevention plan
Demonstrate use of external support system.	Observe AA/NA card for signatures Provide written list of who associates are Note who sponsor/home group is

Maintain consistent employment, medication management, housing, etc.	Verify by collateral contact w/ landlord, employer, doctor, etc. # days employed & pay stubs, # days homeless & rent receipts, med mngt records, etc.
Demonstrate ability to consistently abstain from relapse and recidivism.	Drug tests to demonstrate abstinence No arrests or Probation Violations
Maintain competency in Phases I & II knowledge and skills.	Review at staffing Accomplishing Phase goals/competencies Verbal/written quiz

PHASE IV

Knowledge	**Measurement**
Complete Drug Court Exit Questionnaire.	Present to Drug Court staffing team and demonstrate all of the above competencies
Pass Drug Court Exit Interview.	

Skills	**Measurement**
Demonstrate ability to consistently abstain from relapse and recidivism.	Drug tests to demonstrate abstinence No arrests or Probation Violations Finalized Relapse Prevention Plan
Maintain competency in Phases I, II, & III knowledge and skills.	Review at staffing Accomplishing Phase goals/competencies Verbal/written quiz

Note: It will typically take a minimum of 12 weeks to complete Phases I, II, and III.
It will typically take 12 to 18 months to complete the entire program.

Attachment 6
Fifth Judicial Drug Court
Intake Checklist

Judge orders all potential defendants to meet with Drug Court Coordinator in his office within 48 hours of signing order in Court.

Coordinator's Office will:

1. Enter Data in Computer and Start Tracking all Potential Clients (ISTARS).

2. Do TCU on ALL POTENTIAL CLIENTS. (Form 1)

3. Request LSI from Probation and Parole. (Form 2)

4. Request Prosecutor's Recommendation for Drug Court, (Form 3)

5. Request NCIC Background Check. (Form 4)

6. Fill out Release of Information Form. (Form 5)

7. Fill out BPA application. (Form 6)

8. Explain Drug Court Information Sheet. (Form 7)

9. Digital Photo of all applicants. (Form 8)

10. Have Defendant start attending Drug Court every week in order to maintain communication and to train on Drug Court procedures.

11. If potential defendants do not meet the above criteria or funding is not available, the Drug Court Coordinator will send notification of ineligibility to the Original Court, Prosecutor, and Defendant's attorney. (Form 9) Defendant will be remanded to Original Court Judge.

When all information above is received and the defendant is eligible for Drug Court, providing funding is available, then proceed as follows:

12. Request a Mental Health Screening by Mental Health provider, if Team requests

13. Request a Treatment Provider Evaluation. (Form 10)

14. Drug Court Team then decides if the defendant is eligible or ineligible for Drug Court. (Form 11)

15. The Drug Court Coordinator will send notification to the Original Court, Prosecutor, and defendant's attorney that client has been denied or accepted into Drug Court. (Form 9)

Note: The Forms listed on this page will be available for review at the Informational meeting on April 1, 2004.

If Defendant is not accepted into Drug Court, then he/she is remanded back to Original Court Judge. If accepted into Drug Court, the defendant then enters a guilty plea with his/her Original Judge and appears at the next Drug Court session, which will also be the defendant's starting

Attachment 7

Provider Weekly Status Report

Client Name:_____

Report Covers from last report to: Monday – Friday_____ 2004.

Current Group:

_____Required_____ Attended_____

Comments:_____

_____Required_____ Attended_____

Current Group:

_____Required_____ Attended_____

Individual Session since last Report held
on:_____2004.

Reason:_____

Client Provided Proof of all required 12-Step Meetings Attendance: YES _____ NO_____

Phase Skill or Major Treatment Issue:

Measurement of above Skill:

Comments: this Week:

Changes to Treatment Plan to be discussed in staffing:

Recommend Move to next Phase :_____

Person Making Recommendation: _____

Person Reporting:_____

Attachment 8
Aftercare Program
Still under Construction (Not Final)

1. Clients will begin attending aftercare when moved to phase III and may be allowed to drop one 12 step meeting.

2. Clients must continue in this phase until 6 months after their Drug Court Bill is paid.

3. Clients are encouraged to continue even after they complete the 6 month rule.

4. There is no cost to this phase.

5. This phase will be under supervision of the court system.

6. Activities of this program will be organized by a Board of Drug Court Graduates appointed by the Drug Court Team with term limits.

7. Chairman of that Board reports to the Drug Court Coordinator.

7. Charges are not dismissed until complete completion of the 6 months.

8. Attendance of those still under the 6 month requirement will be reported to Drug Court Coordinator

9. One UA per Month is required for those under the 6 month requirement of phase V and for Board members

10. The Phase V group will serve as a resource group for drug education in the community.

11. Everyone in phase V in the 6 month aftercare, must be a mentor for new participants in Drug Court in Phases I, II, or III.

12. During Phase V participants meeting the 6 month requirement will be required to have a community service project they are doing. (Food drives, clean-up, senior meals etc.)

12. Program set up on rotating schedule basis (Example)
    - Week 1 Like AA Meeting???
    - Week 2 Activity Week
    - Week 3 Open
    - Week 4 Guest Speaker (Some Community Subject)
    - Week 5 If there is one Open

Attachment 9
Providers sheet for comments or explanations