**[](http://www.isc.idaho.gov/solve-court/peer_review)**

**7. Suggested Recommendations for Completing Peer Review Summary Report:**

Sample language is provided in the right column for each of the Standards that are included on the Peer Review Checklist, to assist you in completing the Peer Review Summary Report. These recommendations are for practices for which you checked “no.” Please choose any relevant text and feel free to leave out or adapt any language that is not appropriate for this site. You may cut and paste the relevant language from this table into the list of recommendations on the summary report form. Items in **bold** are high priority for inclusion in the written summary.

| **Practices Based on Idaho Guidelines and Standards** | **Suggested recommendation language if Standard is marked “no” on checklist** |
| --- | --- |
| [1.3] Target population/Eligibility criteria written and include:   * Intention of program to serve moderate-high to high risk and high need offenders * Priority given to offenders at imminent risk of incarceration * Consideration given to offenders failing to comply with probation at substantial risk of revocation | Develop a written document that describes the program’s target population and eligibility criteria.  Make sure to include the following points [delete any that are already included]:   * Intention of program to serve moderate-high to high risk and high need offenders (LSI-R composite scores between 18-40) * Priority given to offenders at imminent risk of incarceration * Consideration given to offenders failing to comply with probation at substantial risk of revocation |
| [1.7] Fees are required | Consider adding program fees as a requirement of participation. |
| [1.7] Drug court adjusts fees based on ability of participant to pay | Have a discussion as a team about how to ensure that fees do not create a barrier to graduation, such as adjusting fees based on a participant’s ability to pay. |
| [1.7] Program establishes a clear payment plan with offenders AND keeps them current on their fee payments throughout their participation | Choose relevant text:   * Establish a clear payment plan with participants. * Establish a process for following up with participants and establishing a system for them to make payments regularly toward their fees. |
| [1.8] Participant pays for treatment, but on a sliding fee scale | Establish a sliding fee scale for participants in paying for treatment.Set up an expectation that drug court participants are responsible for payment of the cost of treatment, based on the established Department of Health and Welfare sliding fee scale, which recognizes all court related fees, fines, and other payments as deductions from income. Participants eligible for payment for treatment under the Medicaid program should be billed for through Medicaid with no co-payment required. |
| [1.10] Participants with mental illness accepted/retained in drug court | Allow offenders with mental health issues to be considered for drug court participation, unless they are served in a different problem-solving court. The structure, consistency, and intensity of drug courts tend to work well with this population. Programs that exclude offenders with serious mental health issues from drug court end up with greater costs in the long run. |
| [2.1] Participants identified through a structured screening process | Establish a structured screening process for identifying prospective eligible participants. |
| **[2.2] Candidates undergo a substance abuse assessment (GAIN-SS, Q, or I)** | Utilize a validated substance abuse assessment with all program participants. Screening procedures shall include, at a minimum the Global Appraisal of Individual Needs- Short Screener (GAIN-SS),GAIN-Quick (GAIN-Q) or the full GAIN-Initial (GAIN-I) |
| **[2.3] Candidates undergo a criminogenic risk assessment (LSI-R)** | Utilize the Level of Services Inventory – Revised (LSI-R), at a minimum, with all participants to assess criminogenic risk factors, prior to acceptance into drug court. |
| [2.5] Treatment plan based on clinical assessment (GAIN-I) performed by qualified professional | Utilize the GAIN-I to develop the participant’s treatment plan.  Ensure the GAIN-I is conducted by a trained assessor. |
| [2.6] Individuals assessed by both court and treatment, and matched to appropriate treatment/interventions to address needs | Develop a process of collaborative assessment between court and treatment.  Ensure assessment results are utilized to match participants to appropriate treatment/interventions. |
| [3.1] Treatment provided by state-approved treatment programs | Utilize only providers on the state approved list, or work with current providers to get them approved by the state. |
| [3.2] Program has procedures to assure treatment services are delivered within available treatment funding | Establish procedures to effectively work with providers and other members of the drug court team to assure that treatment services are delivered within available financial resources. |
| **[3.4] Drug Court treatment intended for chemically addicted/dependent and moderate to high criminogenic risk** | Discuss as a team the intention of Idaho adult drug courts to serve chemically addicted/dependent offenders who are moderate to high risk to re-offend. |
| **[3.4] Drug court does not allow low-risk offenders (LSI < 18)** (are low-risk offenders screened out?) | Make sure that participants provided treatment through the drug court are assessed as being of moderate to high criminogenic risk(recommended range of LSI-R composite scores between 18-40). |
| **[3.5] Treatment is intended to address criminogenic needs and is evidence-based** | Make sure that the treatment provided through the drug court is addressing identified, individualized criminogenic needs and that a majority of the treatment interventions are evidence-based practices, delivered with fidelity. |
| **[3.6] Treatment group size is regularly no more than 12 (brief exceptions allowed)** | Work with providers to ensure that treatment groups are not larger than 12 clients, unless the evidence base for a particular intervention indicates a different number. |
| **[3.7] Treatment services offered include: A cognitive, behavioral model and addresses criminal thinking** | Ensure that treatment providers are using cognitive-behavioral models, including interventions designed to address criminal thinking patterns. |
| [3.7B] Treatment services offered include: Family education/treatment | Ensure that family education/treatment services are offered through the program. |
| [3.7D] Treatment services offered include: Incorporation of parenting, child support, and custody issues | Ensure that parenting, child support, and custody issues are incorporated in the services offered through the program. |
| [3.7F] Treatment services offered include: Prompt, systematic reporting to team of participant behavior, compliance, progress, achievements | Ensure that there is prompt, systematic reporting from treatment to the rest of the drug court team of participant behavior, compliance, progress, and achievements. |
| [3.7G] Treatment services offered include: 4 phases (orientation, treatment, transition, maintenance) | Ensure that treatment is incorporating 4 phases (1-orientation, stabilization, and initial engagement; 2-treatment; 3-transition to community engagement; and 4-maintenance). Additional details are provides in the state guidelines if needed. |
| **[3.8] Minimum length of program is 12 months (Phases 1-3 = 9 months, phase 4 = 3 months)** | Ensure that the program lasts a minimum of 12 months, with a minimum of 9 months spent in the first three phases and a minimum of 3 months spent in the fourth phase. |
| **[3.14] Two or fewer treatment providers are used** | Work on moving to a model where the drug court utilizes at most two core treatment providers, or establish a communication system that designates a single entity (one of the providers or a different organization as appropriate) to oversee and coordinate treatment services as well as communication with the rest of the team. Referrals to ancillary services as needed are still appropriate on an individual basis. |
| **[3.15] Treatment representative always/almost always attends staffing and drug court sessions** | Ensure that a treatment representative attends all drug court staffing and drug court sessions. |
| [4.1] Judge is volunteer and lasts a minimum of 3 years | Ensure that judicial assignment is based on interest in the problem-solving court model.  Ensure that judges are assigned, or volunteer, to serve the drug court for at least 3 years. |
| **[4.2] In phase 1, participants regularly appear before the judge at least twice per month** | Ensure that participants in phase 1 appear before the judge in court at least twice per month, and more frequently if the participant is extremely high-risk or as needed to encourage compliance with program expectations. |
| **[4.2] In phase 2, participants regularly appear before the judge at least twice per month** | Ensure that participants in phase 2 appear before the judge in court at least twice per month, and more frequently if the participant is extremely high-risk or as needed to encourage compliance with program expectations. |
| **[4.4] Drug court team includes (at minimum) judge, prosecutor, defense counsel, probation/ community supervision, treatment provider, law enforcement representative, coordinator** | Ensure that the team includes [include any missing team members, delete the others] a judge, coordinator, prosecutor, defense counsel, probation officer, treatment provider, and law enforcement representative. |
| **[4.5] Staffings occur and involve judge, coordinator, prosecutor, defense counsel, probation officer, treatment provider, law enforcement representative** | Ensure that [include any missing team members, delete the others] the judge, coordinator, prosecutor, defense counsel, probation officer, treatment provider, and law enforcement representative attends all staffings. |
| [4.6] Staffings occur at least 2 times per month | Hold drug court staffing meetings at least twice per month. These meetings should include discussion of prospective participants, compliance and progress of current participants, sanctions/rewards, phase movement, and graduation. |
| [4.7] All drug court team members are identified on the release form | Add [include missing team members] to the program release form. |
| [4.8] Judge serves as leader of drug court team, maintains active role | Choose relevant text:   * Obtain training for the judge about her/his role as leader of the team. * The judge is encouraged to take on a more active role in drug court processes. * Ensure that the judge attends staffing, conducts regular status hearings, imposes behavioral rewards and sanctions, and works with the team to develop consensus-based problem-solving and planning. * Obtain training for [include relevant team member(s)] to ensure they are clear about the roles of all team members. |
| **[4.11] Random, observed UA/testing, occurs a minimum of 2 times per week or 10 times per month** | Increase drug testing to a minimum of at least twice weekly or 10 times per month throughout drug court participation. Random testing procedures are encouraged. If random testing is not feasible, more frequent testing is recommended up to three times per week. |
| **[4.12] Drug test results are routinely available within 48 hours** | Establish protocols to obtain drug testing results as soon as possible, and within 48 hours at the longest. |
| [4.13] Drug testing available on weekends and holidays | Implement procedures to conduct drug testing on weekends and holidays. |
| [4.14] Participants are provided handbook with expectations and requirements | Develop, and provide to all participants, a participant handbook that sets forth the expectations and requirements of the program, and which includes the following information:   * Clear written guidelines identifying possible sanctions and incentives and how those sanctions and incentives will be utilized. * Court contact information with frequency, times, and court locations * Drug testing procedures, locations, times and sanctions * Treatment contact information, location(s) and expectations * Probation contact information * Coordinator contact information * Fees and costs of participation * Graduation criteria |
| [4.14] Participant handbook specifies graduation criteria | Add a section to the participant handbook that specifies the program’s graduation criteria. |
| [4.16] Program emphasizes positive responses (4:1 minimum ratio of positive to negative; use observation of court hearing and interviews with team to assess) | Increase the use of positive responses to participant behavior, including intangible rewards such as applause, praise, and other recognition of progress.  Ensure that positive responses outnumber negative responses by a ratio of about 4 to 1. |
| **[4.17] Graduation criteria include: Successful completion of substance abuse treatment** | Add “successful completion of substance abuse treatment” as a graduation criterion for new participants. |
| **[4.17] Graduation criteria include: Successful completion of cognitive restructuring program** | Add “successful completion of chosen cognitive restructuring program (e.g., MRT, CSC)” as a graduation criterion for new participants. |
| **[4.17] Graduation criteria include: 6 months continued abstinence from alcohol/other drugs** | Add “6 months substantially continuous abstinence from alcohol or other drugs” as a graduation criterion for new participants. |
| **[4.17] Graduation criteria include: Maintenance of responsible vocational/ educational status** | Add “maintenance of responsible vocational or educational status for a reasonable period of time” as a graduation criterion for new participants. |
| **[4.17] Graduation criteria include: Demonstrated effective use of community-based recovery support** | Add “demonstrated effective use of a community-based recovery support system” as a graduation criterion for new participants. |
| **[4.17] Graduation criteria include: Payment of fees or agreed upon payment plan** | Add “payment of fees or a civil judgment filed for any outstanding balance” as a graduation criterion for new participants. |
| **[4.17] Graduation criteria include: Acceptable written relapse prevention plan** | Add “acceptable written relapse prevention / sobriety plan” as a graduation criterion for new participants. |
| **[4.18] All members of team maintain frequent, ongoing communication about participants to ensure certain, swift, coordinated responses** | Increase frequency of communication between team members regarding participant behavior, achievements, and compliance/noncompliance.  Establish communication systems to ensure that team responses to participant behavior are certain, swift, and coordinated. |
| [4.19] Program has written policies and procedures, and staff orientation, regarding confidentiality | Establish written policies and procedures for adhering to appropriate and legal confidentiality requirements.  Ensure all team members are provided with an orientation regarding confidentiality requirements of 42 USC 290dd-2, 42 CFR Part 2. |
| [4.20] Participants sign statewide uniform release form upon program entry (ask coordinator) | Ensure that all participants sign the statewide uniform consent for disclosure of confidential information upon application for entry into drug court. [attach form as an appendix to this report if program is not using it] |
| [4.21] Program protects against unauthorized sharing of sensitive participant information | Choose relevant text:  Keep progress reports, drug testing results, and other information regarding individual participants in a location that is **not** part of the public court file/record.  Keep participant information only in that person’s individual file – do not file information about one participant in another participant’s file (such as duplicate group progress notes).  Implement procedures to increase the protection of information regarding participants, to prevent the unauthorized disclosure of information. |
| **[5.10] Client feedback obtained twice per year using statewide format; data used by team to consider changes in court operations** | Establish times and procedures to gather participant feedback, at least twice per year.  Utilize the statewide format for gathering participant feedback.  Set time aside in team meetings to discuss participant feedback and consider changes in court operations based on the feedback received. |
| **[5.12] Program evaluation results/ recommendations reviewed and implemented, used to make program modifications** | Establish a regular interval for reviewing program data and any assessment or evaluation feedback.  Review the results of all evaluations and associated recommendations as a team. Discuss how to make related program modifications.  Use feedback about the program to analyze operations, modify program procedures, gauge effectiveness, change therapeutic interventions, measure and refine program goals, and make decisions about continuing or expanding the program. |
| [6.2] Formal written agreements (e.g., MOU’s) exist between local partner agencies | Establish formal written agreements between the key agencies responsible for the operation of the drug court. The agreement provides the foundation for collaboration, working relationships, and operating policies and procedures. Ensure that the agreement is signed by the executive authority for each key agency, including at a minimum, the judicial district, the prosecutor, public defender, probation agency, treatment provider and County Commission, updated as needed. |
| [6.4] Trial Court Administrator in each District convenes an annual meeting to discuss district-wide issues affecting program operations and outcomes | Trial Court Administrator: Convene a meeting on an annual basis engaging the executive authority of each stakeholder agency or organization to identify and address district-wide issues affecting the operations and outcomes of the district’s problem-solving courts. |
| **[6.5] Coordinator convenes team meeting at least 2 times per year for addressing program issues (policy, quality assurance, communication, problem-solving)** | Coordinator: Convene a team meeting for addressing program issues such as policy changes, program development, quality assurance, communication, and problem-solving at least twice per year. |
| [6.6] Judge convenes meeting at least 2 times per year for training for entire team (Coordinator assesses training needs and arranges training) | Judge: Convene meetings at least twice per year to provide for cross-disciplinary and team development training for all members. The Judge, as team leader, is responsible for assuring participation.  Coordinator: Assess training needs and arrange training. |

Sample language is provided in the right column for each of the practices that have been identified in new research findings to contribute to either reduced recidivism or cost savings for drug court programs. For any of these practices that were marked “no” on the Peer Review Checklist, please cut and paste the recommendation language from this table to the New Research Findings section of the Summary Report template. Please choose any relevant text and feel free to leave out or adapt any language that is not appropriate for this site.

| **Practices Based on NPC Research Findings** | **Suggested recommendation language if practice is marked “no” on checklist** |
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| Treatment communicates with program via e-mail | Establish protocols for treatment providers to share information with the team through e-mail. Good communication is very important for any successful team effort and this is particularly true of drug court. For a drug court to provide immediate sanctions and rewards, it must operate with quick and accurate communication about client activities. Using e-mail as a primary communication method allows swift communication simultaneously with all team members. Drug courts where treatment communications with the court/team via e-mail have significantly less recidivism than programs that do not use this method of communication. |
| Estimated time between arrest and referral is 50 days or less | The program may want to conduct an in-depth review to determine if there are places where time could be saved between arrest and identification for drug court. An analysis of case flow to identify bottlenecks or structural barriers, and points in the process where potential adjustments to procedures could facilitate quicker placement into drug court would be helpful. In addition, a more systematic identification and referral process may be able to shorten the time between arrest and drug court entry.  The team could review the systems of programs that have shorter lapses between arrest and drug court entry, to gain ideas. The program should set a goal for how many days it should take to get participants into the program, and work toward achieving that goal, keeping in mind that the sooner individuals needing treatment are connected with resources, the better their outcomes are likely to be. |
| Program offers mental health treatment | Add mental health treatment services to your program. Programs that offer mental health treatment have significantly lower recidivism than programs that do not have this service. |
| Program offers gender-specific services | Idaho Adult Drug Court Standards & Guidelines suggest that treatment services be responsive to gender, among other characteristics. Programs that offer gender-specific services have significantly lower recidivism than programs that do not provide these services. |
| Program offers residential treatment | Consider offering access to residential treatment as part of your program. Residential treatment availability is a promising practice that has been demonstrated to reduce recidivism. |
| Program offers anger management classes | Consider offering anger management classes as part of your program. Programs that offer anger management class have significantly higher cost savings than programs that do not provide these services. |
| Program offers health care | Consider offering access to health care as part of your program. Health care availability is a promising practice that has been demonstrated to reduce recidivism. |
| Program offers dental care | Consider offering access to dental care as part of your program. Dental care availability is a promising practice that has been demonstrated to reduce recidivism. |
| Program caseload (individuals served at one time) is less than 125 | Reduce the number of participants in the program to a maximum of 125 at any one time. Drug courts with fewer than 125 participants on their caseload (active) have much greater reductions in recidivism than larger programs. Due to the importance of intensive supervision and the individual knowledge and recognition of each participant in a successful drug court, it is likely that this result is due to smaller programs having greater personal connection with each participant. |
| Drug court has guidelines on the frequency of individual treatment sessions that a participant must receive | Specify at least the minimum amount of individual treatment that each participant will receive. Though treatment services are ideally matched to each participant’s needs, programs that established guidelines about the frequency of individual treatment sessions the participants should receive had significantly lower recidivism than programs that did not have these guidelines. |
| Participants spend a minimum of 3 minutes with the judge per court appearance on average | Increase the amount of time that the judge spends with participants during court hearings. One of the crucial aspects of the drug court model is the influence of the judge, which requires significant and meaningful interaction with the client. Moving from under 3 minutes to just over 3 minutes effectively doubles the reduction in recidivism, while spending 7 minutes or more effectively triples the positive outcome. |
| Team members are given a copy of the guidelines for sanctions | Make sure that all team members have a copy of the program’s guidelines for the types of sanctions used, in response to which non-compliant behaviors, and procedures for how they are decided and imposed. If your program does not have written sanction guidelines, samples can be found at <http://www.ndcrc.org/>. |
| In order to graduate, participants must have a sober housing environment | Add “sober housing environment” to your program’s graduation criteria for new participants. Having a drug-free place to live helps participants maintain their healthy lifestyle and stability after the end of the program. |
| New possession arrest does not automatically lead to termination | It is beneficial for program participants to have new possession arrests addressed as part of drug court. Consider using other sanction options if a participant has a new arrest for possession, rather than terminating the person’s participation. Programs that retained individuals who had a new possession arrest had reduced recidivism and increased cost savings. |
| New hires to the drug court complete formal training/orientation | Ensure that all new staff who joins the drug court program receives a formal orientation and/or training. Programs that train new staff in the drug court model and in the person’s role on the team have greater reductions in recidivism. |
| **Practice Based on Canon 3B(7) of the Idaho Code of Judicial Conduct** | |
| Program has developed a clear policy for compliance with ex parte communications | Each program needs to have a policy and practices in place for handling ex parte communications. The State office can help provide example language if needed. |