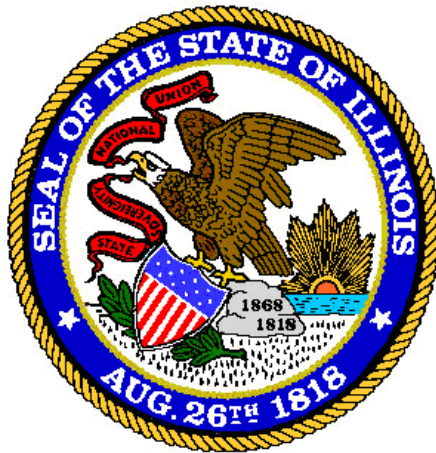


**Will County, Illinois  
12<sup>th</sup> Judicial Circuit Court**



**Will County Drug Court  
Policy & Procedure Manual**

Will County Drug Court Mission Statement:

The mission of the Will County Drug Court is to break the cycle of addiction, in order to promote public safety, reduce recidivism, and enhance the quality of life for the community and the individual.

## Table of Contents

<b>MISSION STATEMENT</b>	<b>Page 5</b>
<b>I. Will County Drug Court (WCDC)</b>	
<b>A. General</b>	<b>Page 5</b>
<b>B. Goals and Objectives</b>	<b>Page 5</b>
<b>C. Evidence Based Practices</b>	<b>Page 6</b>
<b>D. The 12th Judicial Circuit Court</b>	<b>Page 7</b>
<b>E. Will County</b>	<b>Page 8</b>
<b>F. WCDC Partners</b>	<b>Page 8</b>
<b>1. Will County Court Services Department</b>	<b>Page 8</b>
<b>2. Center for Correctional Concerns</b>	<b>Page 8</b>
<b>3. Woodridge Interventions</b>	<b>Page 8</b>
<b>4. Stepping Stones</b>	<b>Page 9</b>
<b>II. Eligibility Criteria, Exclusionary Criteria and Statement of Non-discrimination</b>	
<b>A. Eligibility Criteria</b>	<b>Page 9</b>
<b>B. Exclusionary Criteria</b>	<b>Page 9</b>
<b>C. Statement of Nondiscrimination</b>	<b>Page 9</b>
<b>III. Referral, Assessment and Enrollment</b>	
<b>A. Referral</b>	<b>Page 10</b>
<b>B. Assessment</b>	<b>Page 10</b>
<b>C. Enrollment</b>	<b>Page 11</b>
<b>IV. Participant Responsibilities and Handbook</b>	
<b>A. Participant Responsibilities</b>	<b>Page 11</b>
<b>B. Participant Handbook</b>	<b>Page 12</b>
<b>V. WCDC Process and Schedule</b>	
<b>A. WCDC Process</b>	<b>Page 12</b>
<b>B. WCDC Schedule</b>	<b>Page 12</b>

<b>VI. WCDC Team</b>	<b>Page 12</b>
<b>A. Judge</b>	<b>Page 12</b>
<b>B. Problem-solving Court Coordinator</b>	<b>Page 13</b>
<b>C. Prosecutor</b>	<b>Page 13</b>
<b>D. Defense Counsel</b>	<b>Page 14</b>
<b>E. Probation Officer</b>	<b>Page 14</b>
<b>F. Mental Health Professional</b>	<b>Page 15</b>
<b>G. Certified Addiction Counselor</b>	<b>Page 16</b>
<b>H. Case Manager</b>	<b>Page 16</b>
<b>I. Treatment Providers</b>	<b>Page 16</b>
<b>J. Data/Risk Assessment Specialist</b>	<b>Page 17</b>
<b>VII. WCDC Phases</b>	<b>Page 17</b>
<b>VIII. Incentives, Sanctions, and Therapeutic Adjustments</b>	<b>Page 21</b>
<b>IX. Drug and Alcohol Testing Protocol and Procedures</b>	<b>Page 22</b>
<b>X. Program Outcomes</b>	<b>Page 22</b>
<b>A. Successful discharge</b>	<b>Page 23</b>
<b>B. Neutral Discharge</b>	<b>Page 23</b>
<b>C. Unsuccessful Discharge</b>	<b>Page 23</b>
<b>D. Voluntary Withdrawal</b>	<b>Page 23</b>
<b>XI. Confidentiality</b>	<b>Page 24</b>
<b>XII. Post Program Aftercare</b>	<b>Page 24</b>
<b>Appendices</b>	
<b>Appendix A...Bond Modification</b>	
<b>Appendix B...Consent To Participate</b>	
<b>Appendix C...Referral Form</b>	
<b>Appendix D Consent For Disclosure</b>	

**Appendix E... WDCDC Handbook**

**Appendix F...Incentives, Sanctions and Therapeutic Adjustments**

**Appendix G Graduation Questionnaire**

**Appendix H...Request for Phase Movement**

**Appendix I Drug Court Contract**

**Appendix J Drug Court Self-Assessment Tool**

## **Mission Statement**

The mission of the Will County Drug Court is to break the cycle of addiction, in order to promote public safety, reduce recidivism, and enhance the quality of life for the community and the individual.

### **I. Will County Drug Court (WCDC)**

#### **A. General**

The Will County Drug Court (WCDC) was the first of four problem-solving courts established in Will County, Illinois. WCDC has been in operation since 1999 and currently has the capacity to serve 113 active participants. WCDC is a post-adjudicatory problem-solving court which targets defendants in felony court who have a substance dependence diagnosis and who are willing to voluntarily execute the Consent to Participate and WCDC contract (Appendix A) in the WCDC program and comply with the requirements of WCDC. To be eligible for WCDC, the individual must have a substance use dependence diagnosis; be determined to be moderate-high to high criminogenic risk to reoffend or violate the terms of supervision and have high behavioral health treatment needs using evidence-based screening and assessment tools. Post-adjudicatory means that the defendant has admitted guilt or has admitted the allegations contained in the Petition to Revoke and agrees to voluntarily enter into the WCDC program and comply with the WCDC program requirements.

WCDC is a voluntary program, but participation is subject to meeting the WCDC eligibility criteria and being staffed and approved for admission into the program by the WCDC team. No one has the legal right to participate in WCDC. WCDC has been built on an extensive history of collaboration among key stakeholders, including the 12th Judicial Circuit Court, Will County, the Will County State's Attorney, the Will County Public Defender, the Will County Sheriff, the Will County Court Services Department, Center for Correctional Concerns, treatment providers and the community.

#### **B. Goals and Objectives**

The goals and objectives of WCDC are to give participants the tools to overcome their addictions, so that they can prevent further criminal activity and go on to live a productive and drug free life. Through the treatment services provided to its participants, the WCDC enhances public safety in a fiscally responsible manner and improves the quality of life for the individual participants, their families and the community by reducing the likelihood that they will reoffend by comprehensively addressing their criminogenic risks and needs. This is accomplished by assisting them to successfully achieve and maintain recovery through the utilization of targeted WCDC resources and intensive monitoring by the WCDC Team. WCDC has incorporated the National Association of Drug Court Professionals (NADCP) "*Ten Key Components for Drug Court*" (*Ten Key Components*) into these policies and procedures and adheres to the NADCP "*Best Practices Standards for Drug Court Volumes I and II*" (*National Standards*) as well as the Supreme Court of Illinois

Administrative Office of the Illinois Courts (AOIC) "*Problem-Solving Courts Standards*" (*Illinois Standards*). Extensive research and the program outcomes for WCDC participants since its inception confirm that WCDC is an evidence-based intervention that has been and will be successful in significantly reducing the likelihood that a participant will reoffend as compared to a similarly situated offender who is not in Drug Court. The *Ten Key Components*, the *National Standards* and *Illinois Standards* that are incorporated into these Policies and Procedures for Drug Court create a comprehensive framework for implementing a multidisciplinary, collaborative, non-adversarial justice/treatment response to criminal behavior that includes the early identification and enrollment of eligible participants, intensive court supervision, a full continuum of treatment services and adjunct services that address the criminogenic risks and needs of the participant. Drug Court, in addition to being an evidence-based practice in and of itself, also utilizes evidence-based practices in its programming, including EBP screening and assessment of participants, trauma-informed treatment services, cognitive behavioral interventions, random and frequent toxicology testing, a specialized probation officer, case managers, employment skills, education referrals and supports and life skills services.

### **C. Evidence Based Practices**

In order to reach these goals and objectives, WCDC uses a variety of Evidence Based Practices (EBP) to support all services and programs. These include, Inpatient treatment, Intensive Outpatient, Outpatient and Extended Care Residential Services, Oxford Houses with Recovery Coaching, and sober living houses. (Standard 5 and 6)

WCDC also uses Moral Reconciliation Therapy, a program that seeks to rehabilitate the cognitive and behavioral processes of individuals with criminal behaviors. It seeks to lessen recidivism by giving participants a stronger sense of morality. It is a system set up to challenge the criminal thought processes and to get participants to see new ways of interacting with their environments.

Thinking for a Change curriculum is a program that seeks to reduce criminal thinking. The program focuses on cognitive restructuring, interpersonal skills and problem solving skills.

The LSI-R measures a participant's risk of recidivism, and uses offender attributes and behaviors to predict outcomes. It helps determine treatment and supervision needs. Factors measured include criminal history, education, employment, financial history, family history, and substance use. (Standard 1)

Texas Christian University (TCU) is a standardized screening tool used in adult criminal justice/ settings to facilitate clinical and diagnostic criteria for trauma related disorders as specified in the Diagnostic and Statistical Manual (DSM-5). This screening will assist with identification of trauma related issues and readiness for treatment.

The Trauma Screening Questionnaire (TSQ) is a 10 item symptom screen to be used with all types of traumatic stress. Post-Traumatic Stress Disorder (PTSD) must be addressed for mental health and substance abuse. Research has shown that when PTSD is not recognized and addressed relapse is inevitable.

Medication Assisted Treatment (MAT) refers to medication treatment for substance use disorders. This includes any pharmacologic intervention that includes treatment in conjunction with medication. Medications may include Vivitrol, Campral and Antabuse for alcohol addiction and Vivitrol, Suboxone or methadone for opioid addiction. (Standard 5 and 6)

Risk and Needs Triage (RANT and RANT-Plus) is a computer based client risk/needs assessment. The computer generates a report sorting individuals into one of four quadrants of risk/needs; high risk, high needs, low risk, low needs. The report will facilitates treatment for addiction, mental illness, chronic medical conditions, homelessness and chronic unemployment. (Standard 1)

Cognitive Behavior Therapy (CBT) is a time limited, problem solving oriented therapy. CBT is designed to teach specific skills to assist with distorted thinking and enable participants to alter or change beliefs that have created difficulties in life. CBT is effective for criminal thinking and addiction. CBT facilitates life changes that are positive and beneficial. (Standard 6)

SCRAM is based on scientifically-proven continuous transdermal alcohol monitoring technology, the result of more than 70 years of research and 22 peer-reviewed studies. Some of these studies include those conducted by the: Traffic Injury Research Foundation (TIRF), University of Colorado Health Science Center, and Michigan Department of Corrections. (Standard 7)

The National Drug Court Institute, Quality Improvement for Drug Courts Monograph Series 9; states that the above listed elements provide the greatest opportunity for quality and success in Drug Treatment Court. Additional research from an evaluation study of Drug Treatment Courts (*Belenko, 1998; 2001*) indicates that at least 75% of criminal court filings, including domestic and other civil court filings, are the product of substance abuse. This study indicates that from the earliest evaluations researchers have determined that drug courts provide "closer, more comprehensive supervision and much more frequent drug testing and monitoring during the program than other forms of community supervision. More importantly, drug use and criminal behavior are substantially reduced while offenders are participating in drug court". In addition to promoting community safety, Drug Courts are saving lives, restoring families and health, promoting employment and education.

#### **D. The 12th Judicial Circuit Court**

Thirty three judges serve in the 12<sup>th</sup> Judicial Circuit and administer the duties and responsibilities of the judicial branch of government. The Chief Judge is the administrative leader of the third branch of government and is primarily responsible for the oversight of WCDC. The Presiding Judge of the Problem-Solving Courts Division, who currently is the WCDC Judge, oversees the day-to-day operation of WCDC, the data collection, and reporting responsibilities, and grant administration duties. WCDC receives funding from Will County, and Adult Redeploy Illinois, and the Department of Justice, Bureau of Justice Assistance to meet its mission and serve Will County citizens.

## **E. Will County**

Will County, covering 850 square miles, is part of the Chicago-Joliet-Naperville, IL-IN-WI Metropolitan Statistical Area. Will County experienced a 36% population increase between 2000 and 2015, and now has a current population of 684,796. The U.S. Census Bureau lists Will County as one of the largest 100 counties by population in the nation. Between 2000 and 2014, Will County added over 59,590 single family dwelling units, and has evolved into being a county of both rural and urban communities.

## **F. WCDC Partners**

### **1. Will County Court Services Department**

The Will County Court Services Department is responsible for the community-based supervision of persons in the criminal justice systems who are on pre-trial conditions of bond or who have been sentenced to court supervision, conditional discharge or probation. Currently, one specially trained adult probation officer is assigned to the WCDC Team and supervises some WCDC participants to ensure their compliance with every aspect of their WCDC contract, including compliance with all treatment and supervision requirements. The WCDC Probation Officer works collaboratively with all team members, including the WCDC Judge, and they ensure that the entire WCDC Team is informed of a participant's progress or issues in a timely manner.

### **2. Center for Correctional Concerns**

The Center for Correctional Concerns is a non-profit organization established in 1980 that provides rehabilitation services for offenders in Will County. Jan Moore, a representative of the Center for Correctional Concerns and a licensed CADC, is a member of WCDC Team. Ms. Moore performs drug and alcohol evaluations, as well as risk assessments on all referrals to determine criminogenic and substance abuse treatment needs for potential WCDC participants.

### **3. Woodridge Interventions**

Woodridge Interventions is one of our primary treatment providers. WCDC has used the drug and alcohol rehabilitation services of Woodridge Interventions for over 12 years. When a representative is not able to attend staff meetings, a written report as to participants' progress is sent.

DASA licensed since 1999, Woodridge Interventions provides specialized inpatient substance abuse treatment services for males. Outpatient services are also available, including DUI services for both males and females. Highly structured programs include group and individual counseling that emphasize cognitive-behavioral techniques, life skills training and 12-step principles. The programs offer a safe environment in which clients learn and practice sober living skills while examining their issues and barriers that brought them to treatment. The program places an emphasis on developing an individualized aftercare plan that is focused on meeting each client's specific relapse prevention and continuing care needs. Frequent trips to visit clients by the coordinator and case managers help monitor the quality and effectiveness of service delivery.



#### **4. Stepping Stones**

Stepping Stones is one of our primary treatment providers. It provides a continuum of alcohol, drug and other related treatment and rehabilitation services. We have used their services for over twelve years. When a representative is not able to attend staff meetings, a written report as to participants' progress is sent.

In 2016 Stepping Stones' eligible programs received their ninth consecutive three-year accreditation – a remarkable 27-year record of providing quality service. CARF is the "Commission on Accreditation of Rehabilitation Facilities." This group is a nonprofit accreditor of health and human services; its goal is to ensure that persons served are at the center of the service delivery process. By achieving accreditation, they demonstrate that their organization is committed to reducing risk, addressing health and safety concerns, respecting cultural and individual preferences, and providing the best possible quality of care. Accreditation ensures they use evidenced based practices and monitor the quality and effectiveness of service delivery.

## **II. Eligibility Criteria, Exclusionary Criteria and Statement of Non-discrimination**

### **A. Eligibility Criteria**

The WCDC target population is adult men and women (18 and older) who are defendants charged with a probationable offense. To be eligible for WCDC, the individual must have a substance use dependence diagnosis; be determined to be moderate-high to high criminogenic risk to reoffend or violate the terms of supervision and have high behavioral health treatment needs using evidence-based screening and assessment tools; reside in Will County; be willing to voluntarily execute the Consent to Participate in the WCDC program; must agree to stop all drug and alcohol abuse; must admit guilt or be found guilty; and be willing to engage in and comply with the treatment and supervision requirements of WCDC. For individuals charged with Class 2 or greater drug-related offenses, the defendant may only be admitted into WCDC with the agreement of the prosecutor.

### **B. Exclusionary Criteria**

Individuals who have been convicted of the following crimes within the past 10 years are excluded from eligibility: first degree murder; second degree murder; predatory criminal sexual assault of a child; aggravated criminal sexual assault; criminal sexual assault; armed robbery; aggravated arson; arson; aggravated kidnapping; kidnapping; aggravated battery resulting in great bodily harm or permanent disability; stalking; aggravated stalking; and any offense involving the discharge of a firearm. Defendants currently charged with those offenses or any offense that is non-probationable where the prosecutor is unwilling to amend to a probationable offense are also excluded from eligibility.

### **C. Statement of Nondiscrimination**

It is the policy and practice of WCDC to conduct all aspects of the program without discrimination on the basis of gender, race, nationality, ethnicity, limited English

proficiency, disability, socio-economic status or sexual orientation. For individuals for whom English is not their primary language, Interpreters are available through the Will County 12th Judicial Circuit. Drug Court adheres to the 12<sup>th</sup> Judicial Circuit's Language Access policy. In accordance with applicable legal requirements, the treatment providers ensure that language services are readily available to assist in service delivery for those participants needing language services assistance. To aid individuals with low literacy levels all members of the WCDC team provide participants with oral instructions in addition to written materials at every stage of program development. It is the responsibility of the participant to inform the court of any disabilities that need accommodation.

Specific to this program, enhanced case management and treatment services have been designed to address the individual care needs of the participants. Program progress will be conveyed to the WCDC Team by the treatment providers in a timely manner to allow the WCDC Team to make modifications where necessary. All community-based providers collaborating on this project have demonstrated histories in cultural specific issues, and have familiarity with the needs of offender populations and gender-and age-relevant treatment and recovery supports.

### **III. Referral, Assessment and Enrollment**

#### **A. Referral**

Individuals may be informed of WCDC by any person, including judges, attorneys, family members, treatment professionals, law enforcement, or the individual's own request. The applicant must complete a Problem-Solving Courts Referral Form (Appendix C) and Consent For Disclosure (Appendix D). A referral form is submitted in open court.

Upon receipt of the completed Referral Form, the Will County State's Attorney's Office will pre-screen for eligibility of the individual by reviewing their criminal history and current charge(s). If it appears that the individual may be excluded, the referral is set for a pre-assessment staffing by the WCDC Team at the next team staffing to determine if the concern is an exclusionary criteria to participation. If the Judge, with input from the WCDC Team determines that the person is not eligible at a staffing, the referral is closed. If it is determined that the person may be eligible, the referral is then forwarded on to the WCDC certified addiction counselor to complete the assessment. The judge is responsible for rendering the final decision with team input.

#### **B. Assessment**

The certified addiction counselor will assess each potential participant to determine clinical eligibility. The certified addiction counselor schedules an appointment with the individual referred for evaluation.

The certified addiction counselor makes recommendations for the level of treatment care using the American Society of Addiction Medicine (ASAM) dimensions. The certified addiction counselor may also use the TCU Drug Screen V, The Simple

Screening Instrument for AOD Abuse, Adverse Childhood Experience (ACE) Questionnaire, The PTSD Checklist for DSM-5, University Rhode Island Change Assessment Scale (URICA), The Stages of Change Readiness and Treatment Eagerness Scale (SOCRATES), The Alcohol Use Disorders Identification Test (AUDIT), The Civilian Mississippi Scale, Alcohol Dependence Scale (ADS), Drug Abuse Screening Test DAST-10, The DRRI-2.

The WCDC team member also administers the Risk and Needs Triage (RANT) evidence-based screening tool to determine if the individual is moderate-high to high criminogenic risk of reoffending or violating the terms of supervision and has high behavioral health treatment needs. Other screens, including the LSI-R, may be utilized as recommended by research.

Upon completion of the assessments, the certified addiction counselor prepares and forwards a written summary of the findings of the assessment to the Problem-Solving Courts Coordinator who disseminates the written assessment, for staffing at the next team staffing. An individualized treatment plan is presented.

### **C. Enrollment**

The WCDC Team reviews and discusses the assessment and referral packet of each individual referred to WCDC utilizing the objective WCDC eligibility and exclusionary criteria at the next staffing after the assessment is completed. If found to be eligible, the individual is placed on the next WCDC call to execute the Consent to Participate (Appendix B) in open court before the WCDC Judge in order to be enrolled in WCDC. If an individual is found to be ineligible for WCDC or declines to execute the Consent to Participate, the referral is closed and the case is sent back to the original courtroom for further proceedings.

## **IV. Participant Responsibilities and Handbook**

### **A. Participant Responsibilities**

Each participant must conform to the requirements of the Consent to Participate, the WCDC Handbook, and the requirements set forth in his or her individualized treatment plan as outlined in their WCDC contract.

Those responsibilities include attending court regularly, meeting with probation or case manager as directed, complying with toxicology screening as directed, attending all screenings, assessments and treatment services as directed, participating appropriately in treatment groups, engaging in pro-social activities, including employment or education pursuits, following all directives of the court and remaining drug and alcohol free. In WCDC, one of the paramount requirements of each participant is to be honest with the WCDC Team about compliance with treatment and supervision and to work with the team to deal with the difficult issues that addiction presents so that appropriate treatment interventions and responses can be put in place and monitored.

## **B. Participant Handbook**

Each participant will receive his/her copy of the WCDC Handbook during court and sign a receipt acknowledging that he/she has received the WCDC Handbook and it has been explained to him/her. It is also required that Defense Counsel will have reviewed and explained the WCDC Handbook with a potential participant prior to enrolling him/her into WCDC so that the potential participant is fully informed about the structure and requirements of WCDC.

## **V. WCDC Process and Schedule**

### **A. WCDC Process**

WCDC utilizes weekly team staffings with all WCDC Team members present and participating and weekly court status hearings to monitor each participant's performance and progress in WCDC. Written reports are discussed with WCDC Team at staffing and the team also communicates in real time via secure e-mail to monitor and address emergent issues. Participants are addressed with the WCDC Team's response to the progress that they have made or issues that have arisen between court dates by the WCDC Judge and are given an opportunity to address the WCDC Team in open court. Optimally, the WCDC Judge will interact with the participant for a minimum of 3 minutes. When the status hearing is concluded, the participant is given his/her next court date. Additional information about WCDC processes are included in other sections of this WCDC Policies and Procedures Manual and the WCDC Handbook and are incorporated herein.

### **B. WCDC Schedule**

Currently, WCDC Team staffings are held once weekly on Thursdays at 1pm and court sessions are scheduled to follow on Thursday afternoons at 2pm. All WCDC Team members are required to attend all team staffings and court sessions.

## **VI. WCDC Team**

The WCDC Team consists of a dedicated judge, the problem-solving court coordinator, a dedicated prosecutor, a dedicated public defender, dedicated probation officer, a mental health professional, treatment providers, case managers and a data collection/risk assessment specialist. Law enforcement is invited to attend. Team member descriptions and responsibilities are set forth as follows:

### **A. Judge**

The WCDC Judge serves as the leader of the WCDC Team and presides at all Drug Court Team staffings and sessions. The WCDC Judge is responsible for setting the tone and environment for WCDC, and must provide leadership, authority, and management skills to enable WCDC to operate effectively. It is the WCDC Judge's responsibility to ensure that the participant understands the requirements of WCDC, including those set forth in the Consent to Participate prior to executing the Consent to Participate and that the participant is competent and entering the program voluntarily. To carry out his/her duties, the WCDC Judge must participate in all team staffings and

shall consider input from the other team members in evaluating a response to a participant's compliance or non-compliance with supervision and treatment requirements. This participation is permissible pursuant to Supreme Court Rule 63. While the WCDC Judge must consider the input from all of the members of the team, it is his/her final responsibility to determine what response is appropriate for an individual participant. In court, it is the WCDC Judge who presents the participant with the team's staffing decisions and allows the participant to address the response with the court. Examples of the responses a participant may receive in court are an incentive given because of progress the participant has made, a sanction imposed because of non-compliance with treatment, and/or supervision requirements or a treatment plan adjustment as recommended by the treatment provider. These responses are designed to encourage or reinforce the participants' progress or to discourage and deter participants' non-compliance. The WCDC Judge shall ensure that WCDC responses to a participant's behavior are predictable, fair, consistent and unbiased and that the participant is treated with respect and is given an opportunity to be heard. The PSC judge, before being assigned to preside in such a court, should have experience and/or training in a broad range of topics including, but not limited to: (1) criminal law; (2) behavioral health; (3) confidentiality; (4) ethics; (5) evidence-based practices; (6) substance use and abuse; (7) mental illness and (8) co-occurring disorders. The judge must be assigned to preside over the PSC for a minimum of two years;

## **B. Problem-Solving Courts Coordinator**

The problem-solving courts coordinator is responsible for overseeing the WCDC Program. The problem-solving courts coordinator oversees the day-to-day operations of WCDC and problem-solving courts. Administration responsibilities for WCDC and problem solving courts include monitoring the referral and intake processes to ensure the early identification and enrollment of WCDC candidates, supervision of the collection and reporting of WCDC data, community education and public relations, coordinating continuing education opportunities for the WCDC team, and grants administration. He/she shall regularly participate in trainings, webinars, events, and other educational opportunities on topics that are essential to the effective planning, implementation and operation of the PSC and to ensuring that the PSC maintains fidelity to the PSC model. Topics include, but are not limited to, evidence-based screening, assessment and treatment practices, target population, substance use disorder, mental illness, disability, co-occurring disorders, trauma, confidentiality, criminogenic risks and needs, incentives and sanctions, court processes, limited English proficiency and team dynamics. He/she shall stay abreast of current law and research on best practices and participate in ongoing interdisciplinary education and training. He/she shall commit to serving on the team a minimum of one year.

## **C. Prosecutor**

The role of the prosecutor in WCDC is non-adversarial and collaborative by design, which is different from the traditional adversarial model in criminal court. The prosecutor represents the interests of the People of the State of Illinois and ensures that public

safety interests and concerns are provided in team staffing discussions. The prosecutor also participates in the collaborative WCDC process in evaluating each participant's engagement in and compliance with WCDC in team staffings and at court sessions. As part of the collaborative team, the prosecutor monitors participant progress and makes recommendations regarding appropriate interventions to impact a participant's behavior and compliance with WCDC requirements. Information the prosecutor receives through the WCDC Program shall only be used for WCDC purposes and shall not be redisclosed. The prosecutor retains the responsibility to assure a participant's compliance with WCDC requirements and may initiate adverse proceedings if a participant is not adhering to the terms of his/her WCDC probation and Consent to Participate. He/she shall regularly participate in trainings, webinars, events, and other educational opportunities on topics that are essential to the effective planning, implementation and operation of the PSC and to ensuring that the PSC maintains fidelity to the PSC model. Topics include, but are not limited to, evidence-based screening, assessment and treatment practices, target population, substance use disorder, mental illness, disability, co-occurring disorders, trauma, confidentiality, criminogenic risks and needs, incentives and sanctions, court processes, limited English proficiency and team dynamics. He/she shall stay abreast of current law and research on best practices and participate in ongoing interdisciplinary education and training. He/she shall commit to serving on the team a minimum of one year.

#### **D. Defense Counsel**

The role of defense counsel in WCDC is also very different from the traditional adversarial model in criminal court. In WCDC, the Public Defender represents all WCDC clients unless a participant has private counsel. Before entry into WCDC, it is defense counsel's responsibility to meet with each potential participant to explain WCDC's rules and expectations, the potential participant's legal rights and how those rights are affected by participation in WCDC. Defense counsel must also explain the provisions of the WCDC Consent to Participate and the WCDC Handbook to the participant, and assist in the participant's execution of all court related documents and ensure that the participant understands all of the provisions of such documents. Upon signing of Consent to Participate and Drug Court Contract in WCDC, private counsel must elect whether to continue as counsel for the participant. If not, the WCDC Judge appoints the public defender to represent the participant in WCDC. Whether a participant is represented by private counsel or the public defender, the responsibilities of the participant's attorney is to represent the participant at team staffings, attend WCDC staffings and court status hearings, provide input and recommendations to the WCDC Team, ensure that the participant's due process rights are protected, and represent the participant in any adverse proceedings. He/she shall regularly participate in trainings, webinars, events, and other educational opportunities on topics that are essential to the effective planning, implementation and operation of the PSC and to ensuring that the PSC maintains fidelity to the PSC model. Topics include, but are not limited to, evidence-based screening, assessment and treatment practices, target population, substance use disorder, mental illness, disability, co-occurring disorders, trauma, confidentiality, criminogenic risks and needs, incentives and sanctions, court processes, limited English proficiency and team dynamics. He/she shall stay abreast of

current law and research on best practices and participate in ongoing interdisciplinary education and training. He/she shall commit to serving on the team a minimum of one year.

### **E. Probation Officer**

The probation officer is responsible for meeting with participants on a regular basis to determine participant's progress in the program, as well as provide referrals for substance use treatment, employment, education, transportation, mental health services, and entitlements. They will ensure that participants understand the requirements of WCDC and supervise their compliance with all WCDC treatment and probation supervision requirements. They will perform home visits and risk assessments as necessary. He/she shall regularly participate in trainings, webinars, events, and other educational opportunities on topics that are essential to the effective planning, implementation and operation of the PSC and to ensuring that the PSC maintains fidelity to the PSC model. Topics include, but are not limited to, evidence-based screening, assessment and treatment practices, target population, substance use disorder, mental illness, disability, co-occurring disorders, trauma, confidentiality, criminogenic risks and needs, incentives and sanctions, court processes, limited English proficiency and team dynamics. He/she shall stay abreast of current law and research on best practices and participate in ongoing interdisciplinary education and training. He/she shall commit to serving on the team a minimum of one year. They update treatment plans regularly

### **F. Mental Health Professional**

The WCDC Mental Health Professionals (MHP's) are responsible for conducting mental health assessments on an as needed basis for the drug court population. The Mental Health Professional prepares a written summary of the findings from the assessment and forwards the written report to the Drug Court Team for staffing discussions.

The mental health professional uses the following assessment tools: mental health assessment, Cognitive Capacity Screening, RANT, TCU, LSI-R with all clients. And the Becks Depression Index (BDI), Becks Anxiety Index(BAI), Primary Care Posttraumatic Stress Disorder (PC-PTSD), Generalized Anxiety Disorder (GAD-7), Suicide Risk Assessment-Revised (SBQ-R) with client's.

He/she shall regularly participate in trainings, webinars, events, and other educational opportunities on topics that are essential to the effective planning, implementation and operation of the PSC and to ensuring that the PSC maintains fidelity to the PSC model. Topics include, but are not limited to, evidence-based screening, assessment and treatment practices, target population, substance use disorder, mental illness, disability, co-occurring disorders, trauma, confidentiality, criminogenic risks and needs, incentives and sanctions, court processes, limited English proficiency and team dynamics. He/she shall stay abreast of current law and research on best practices and participate in ongoing interdisciplinary education and training. He/she shall commit to serving on the

team a minimum of one year. They complete the initial treatment plan and update regularly

### **G. Certified Addiction Counselor**

The WCDC Certified Addiction Counselor is responsible for the initial assessment of persons referred to WCDC to ensure that he/she has a substance dependence diagnosis. The Certified Addiction Counselor prepares a written summary of the findings from the assessment and forwards the written report to the WCDC team for staffing discussions. He/she shall regularly participate in trainings, webinars, events, and other educational opportunities on topics that are essential to the effective planning, implementation and operation of the PSC and to ensuring that the PSC maintains fidelity to the PSC model. Topics include, but are not limited to, evidence-based screening, assessment and treatment practices, target population, substance use disorder, mental illness, disability, co-occurring disorders, trauma, confidentiality, criminogenic risks and needs, incentives and sanctions, court processes, limited English proficiency and team dynamics. He/she shall stay abreast of current law and research on best practices and participate in ongoing interdisciplinary education and training. He/she shall commit to serving on the team a minimum of one year.

### **H. Case Manager**

The WCDC case managers meet with participants on a regular basis to determine participant's progress in the program, as well as provide referrals for substance use treatment, employment, education, transportation, mental health services, and entitlements. Their case manager will ensure that participants understand the requirements of WCDC and supervise their compliance with all WCDC treatment requirements. He/she shall regularly participate in trainings, webinars, events, and other educational opportunities on topics that are essential to the effective planning, implementation and operation of the PSC and to ensuring that the PSC maintains fidelity to the PSC model. Topics include, but are not limited to, evidence-based screening, assessment and treatment practices, target population, substance use disorder, mental illness, disability, co-occurring disorders, trauma, confidentiality, criminogenic risks and needs, incentives and sanctions, court processes, limited English proficiency and team dynamics. He/she shall stay abreast of current law and research on best practices and participate in ongoing interdisciplinary education and training. He/she shall commit to serving on the team a minimum of one year. They update treatment plans regularly

### **I. Treatment Providers**

WCDC utilizes a full continuum of treatment services, including outpatient, intensive outpatient, inpatient, long-term inpatient substance abuse and co-occurring treatment, and recovery housing from numerous treatment providers. WCDC's most prevailing treatment providers are Stepping Stones and Woodridge Interventions. All treatment



services are trauma- informed and culturally sensitive. WCDC also supports the utilization of medication- assisted treatment (MAT) for participants with opioid or other substance dependence disorder diagnoses. MAT is a medical protocol that is entirely voluntary on the part of the participant and is a decision entered into between a participant and his/her medical provider. A participant's mental health needs and medical issues are also monitored by WCDC and referrals may be made by the WCDC team for these services. He/she shall regularly participate in trainings, webinars, events, and other educational opportunities on topics that are essential to the effective planning, implementation and operation of the PSC and to ensuring that the PSC maintains fidelity to the PSC model. Topics include, but are not limited to, evidence-based screening, assessment and treatment practices, target population, substance use disorder, mental illness, disability, co-occurring disorders, trauma, confidentiality, criminogenic risks and needs, incentives and sanctions, court processes, limited English proficiency and team dynamics. He/she shall stay abreast of current law and research on best practices and participate in ongoing interdisciplinary education and training. He/she shall commit to serving on the team a minimum of one year.

## **J. Data/Risk Assessment Specialist**

The data/risk assessment specialist works with the mental health professionals, case managers, and probation officers to administer the necessary risk assessment tools, such as LSI-R and RANT, in order to determine the risks and needs of potential participants. The data/risk assessment specialist acts as a liaison with treatment providers and case managers to coordinate data collection and entry. Works with the Court Coordinator to ensure timely reporting of required data. He/she shall regularly participate in trainings, webinars, events, and other educational opportunities on topics that are essential to the effective planning, implementation and operation of the PSC and to ensuring that the PSC maintains fidelity to the PSC model. Topics include, but are not limited to, evidence-based screening, assessment and treatment practices, target population, substance use disorder, mental illness, disability, co-occurring disorders, trauma, confidentiality, criminogenic risks and needs, incentives and sanctions, court processes, limited English proficiency and team dynamics. He/she shall stay abreast of current law and research on best practices and participate in ongoing interdisciplinary education and training. He/she shall commit to serving on the team a minimum of one year.

## **VII. WCDC Phases**

### **PHASES OF TREATMENT**

The WCDC incorporates five program phases followed by graduation. The phases are designed to monitor the participant's compliance with all WCDC requirements and to objectively measure a participant's progress in treatment. These phases are structured to maximize the likelihood that the participant can successfully achieve and maintain recovery through meaningful participation in his/her treatment plan requirements while

under the intensive supervision by the court to discourage the participant from engaging in further criminal activity.

Treatment plan requirements include all recommended and/or prescribed treatment services, including substance abuse treatment, primary medical treatment, and mental health treatment services and each participant's compliance with treatment plan requirements will be monitored by the WCDC Team through all WCDC phases. To date, WCDC has assisted hundreds of participants to successfully complete the program and become contributing, productive members of our community. The participant requirements for each program phase are as follows:

### **PHASE I**

This phase includes acute stabilization, orientation and assessment. An individualized treatment plan was developed and reviewed with participant prior to contract. Phase I will focus on educational learning resources and maintaining a sober/drug free lifestyle.

Phase I Requirements:

- Engage in 1<sup>st</sup> phase of treatment (Inpatient, IOP, OP)
- Comply with all treatment plan requirements
- Attend court weekly
- Urine and drug/alcohol screens are negative
- Medical/Medication issues addressed
- Follow Dr.'s recommendations for medication
- Start Changing people, places and things
- See case manager/probation officer weekly
- Attend 3 self-help meetings weekly
- Sign releases of information to collateral contacts upon request
- Minimum time in Phase I is 60 days

A participant can advance to Phase II if substantially compliant with all Phase I requirements for a sustained period of time, has been clean and sober for at least 30 days and the Judge, with input from the Drug Court Team approves moving to Phase II.

### **PHASE II**

During this phase, participants will focus on clinical stabilization, identifying community resources, more intensive therapy, and concentrating on recovery education.

Phase II Requirements:

- Complete all required treatment
- Explore employment or educational options
- Maintain housing

- Obtain a sponsor/mentor
- Letter from sponsor/mentor detailing program work
- Explanation of what step participant is working on
- Attend 3 self-help meetings weekly
- Urine and alcohol screens are negative
- Demonstrate changing people, places and things
- Make substantial effort to pay \$360 of WCDC fee
- Attend court weekly
- See case manager weekly
- Sign releases of information to collateral contacts upon request
- Minimum time in Phase II is 90 days

A participant can advance to Phase III if substantially compliant with all Phase II requirements for a sustained period of time, has been clean and sober for at least 60 days and the Judge, with input from the WCDC team approves moving to Phase III.

### **PHASE III**

This is a phase of pro-social habilitation, less structured treatment and more responsibility upon the WCDC participant. During this phase, a continuing care program will be implemented and tailored to the specific needs of the participant.

Phase III Requirements:

- Continue engagement with treatment
- Attend court bi-weekly
- Meet with case manager bi-weekly
- Attempt to obtain employment or full time educational status
- Letter from sponsor/mentor detailing program work
- Explanation of what step participants are working on
- Attend 3 self-help meetings weekly
- Address life skills
- Establish recovery network
- Establish prosocial activities
- Demonstrate changing people, places and things
- Urine and drug/alcohol screens negative
- Complete five (5) hours of community service
- Address financial issues
- Make substantial effort to pay \$400.00 (cumulative \$760) of drug court fee
- Make substantial effort to pay restitution
- Sign release of information to collateral contacts upon request
- Minimum time in Phase III is 90 days

A participant can advance to Phase IV if substantially compliant with all Phase III requirements for a sustained period of time, has been clean and sober for at least 90 days and the Judge, with input from the WCDC team approves moving to Phase IV.

## **Phase IV**

This is a phase of adaptive habilitation, less structured treatment and more responsibility upon the WCDC participant. During this phase, a continuing care program will be continued, tailored to the specific needs of the participant.

- Continue engagement with treatment
- Continue to meet all Phase III requirements
- Attend court every three weeks
- Meet with case manager/ probation officer as directed
- Employment or full time educational status
- Letter from sponsor/mentor detailing program work
- Explanation of what step participants are working on
- Attend 3 self-help meetings weekly
- Address life skills
- Maintain recovery network
- Maintain prosocial activities
- Maintain housing
- Demonstrate changing people, places and things
- Address ancillary services (i.e. parenting, family support)
- Urine and drug/alcohol screens negative
- Complete additional ten (10) hours of community service
- Lead 1 o'clock meeting with specific topic
- Complete either T4C or MRT (if applicable)
- Explanation of insights and skills acquired through T4C or MRT and how to apply skills to everyday life
- Address financial issues
- Make substantial effort to pay \$400.00 (cumulative \$1160) of WCDC fee
- Make substantial effort to pay restitution
- Sign release of information to collateral contacts upon request
- Minimum time in Phase IV is 90 days

Participants can only advance to Phase V if substantially compliant with Phase IV requirements for a sustained period of time, have no drug tests which violate the alcohol and drug testing protocol and procedures for 120 days, and the Judge with input from the team WCDC team approves their written application explaining why he or she would like to move to Phase V.

## **Phase V**

This is a phase of continuing care, maintaining recovery network and more responsibility upon the WCDC participant. During this phase, a discharge plan will be developed, tailored to the specific needs of the participant.

- Continue engagement with treatment
- Continue to meet all Phase IV requirements
- Attend court monthly
- Meet with case manager/ probation officer as directed

- Maintain employment or full time educational status
- Letter from sponsor/mentor detailing program work
- Explanation of what step participants are working on
- Attend 3 self-help meetings weekly
- Maintain recovery network
- Maintain prosocial activities
- Maintain housing
- Demonstrate changing people, places and things
- Urine and drug/alcohol screens negative
- Complete additional ten (10) hours of community service
- Lead 1 o'clock meeting with specific topic
- Complete either T4C or MRT (if applicable)
- Explanation of insights and skills acquired through T4C or MRT and how to apply skills to everyday life
- Address financial issues
- Make substantial effort to pay \$400.00 (cumulative \$1560) of drug court fee
- Pay full restitution
- Attend one alumni group
- Develop and be able to articulate discharge plan
- Sign release of information to collateral contacts upon request
- Minimum time in Phase V is 90 days

Participants can only advance to Graduation if substantially compliant with Phase V requirements for a sustained period of time, have no drug tests which violate the alcohol and drug testing protocol and procedures for 180 days, and the Judge with input from the team WCDC team approves their written application explaining why he or she would like to Graduate.

### **Graduation**

To be eligible for graduation, participants must continue to meet all of the requirements for moving from phase IV to phase V, must be compliant with phase V requirements, have paid the WCDC fee of \$1560 over the course of their time in the five phases, have negative urine screens for six months, and have completed the Graduation questionnaire (Appendix G). The WCDC team will staff a participant to determine if he/she has met the requirements to advance from phase V to graduation. It is at this point that any legal agreements that have been previously made pending completion shall be reviewed and acted upon accordingly. A Discharge Plan is developed and presented at staffing by probation or case manager The WCDC holds approximately two graduation ceremonies a year.

### **VIII. Incentives, Sanctions, and Therapeutic Adjustments**

Responses to a WCDC participant's behavior shall be in accordance with Section 8 of the *Illinois Standards* and shall be predictable, fair, consistent and without regard to a person's gender, race, nationality, ethnicity, limited English proficiency, disability, socio-economic status or sexual orientation. In WCDC, incentives, sanctions and therapeutic adjustments shall be administered to motivate a person to comply with

WCDC requirements and to effectuate the changes in thinking and behavior of a participant that are necessary to assist him/her to successfully achieve recovery and to comply with and successfully complete the program. The participant shall be advised by the WCDC Judge at the time of execution of the Consent to Participate that the program incorporates incentives, sanctions and therapeutic adjustments in response to a participant's progress or non-compliance with WCDC goals and requirements. Whether to administer an incentive or sanction is discussed and determined at team staffing and the participant is advised by the WCDC Judge of the decision in open court. If it is determined at staffing that there should be a sanction, the participant must be given an opportunity to address the court before the sanction is imposed. The WCDC Judge must consider this input and decide whether to impose the sanction. The final decision as to whether to impose a sanction and what sanction is appropriate rests within the sole discretion of the WCDC Judge and may only be imposed in accordance with the procedural fairness principles of fairness and neutrality after the participant is given an opportunity to be heard. Examples of incentives, sanctions and therapeutic adjustments that may be imposed in WCDC are set forth in Appendix F.

## **IX. Drug and Alcohol Testing Protocol and Procedures**

Will County Drug Court maintains a random, color call-in system for WCDC participant alcohol and drug testing. Participants are assigned to a color and are required to call in each day to check the color code. If their color is called, they are required to provide a sample pursuant to the recorded directions. In addition, participants must drug test before every time they are required to appear before the WCDC judge. Participants may also be tested when reporting for a probation office visit or a meeting with their case manager.

In accordance with best practices but subject to the availability of funds, WCDC phase I clients are tested at least twice a week, and as participants progress through the program, they appear less often in court, and are therefore, tested less frequently. However, every participant is still held accountable to the color call-in system and random drug testing administered by case managers and probation officers.

Positive drug/alcohol screen results, failing to provide a random drug/alcohol screen as directed, or diluting, altering or attempting to adulterate urine specimens, or any type of tampering (e.g. bringing in someone else's urine) are violations of the WCDC program and can result in the imposition of a WCDC sanction.

## **X. Program Outcomes**

In accordance with Section 9 of the *Illinois Standards*, a participant may be discharged from WCDC in one of four ways: successful discharge; neutral discharge; unsuccessful discharge and voluntary withdrawal.

## **A. Successful Discharge**

Participant is eligible for successful discharge from the WCDC Program when he/she completes all of the program requirements. If completion of the program occurs, the participant will be able to attend a drug court graduation ceremony. In most cases, the State will agree to drop the participant's charges or declare their time spent in WCDC as time served.

## **B. Neutral Discharge**

A participant may encounter difficulties after entering the program that makes it difficult or impossible for him/her to comply with the requirements of WCDC. Upon collaboration from the WCDC Team the WCDC Judge can enter an order permitting a neutral discharge from the WCDC Program.

## **C. Unsuccessful Discharge**

A participant who is in violation of WCDC Program requirements may be unsuccessfully discharged from the WCDC Program. The WCDC Team is committed to offering the full continuum of treatment services to all WCDC participants with the goal of helping them achieve and maintain recovery, but on occasion a participant is not able to do so. There are also instances where WCDC participants may re-offend or commit other serious violations of WCDC Program requirements, and the WCDC Team may consider unsuccessfully discharging the participant from the program.

Prior to unsuccessful discharge from WCDC, a participant shall be served with a petition to terminate the participant from WCDC. The petition shall set forth the alleged violations of WCDC Program and/or probation requirements and the relief sought. The WCDC Judge must ensure that all participants who become subject to proceedings that could result in unsuccessful discharge from WCDC are advised of and accorded the rights set forth in Supreme Court Rule 402A. Those rights include being advised of the specific allegations in the petition, the right to a hearing with defense counsel present and the right to appointed counsel, the right to confront and cross-examine the adverse witnesses, the right to present witnesses and evidence on his/her behalf, the right to require the State to prove a violation by a preponderance of the evidence and the right to be advised of the sentencing range. Once a petition is filed, in order for the WCDC Judge to continue to participate in team staffings, the participant must first be given Supreme Court Rule 402(d), (e), and (f) admonitions and after being admonished, affirmatively consent to the WCDC Judge being included in team staffing discussions. Unsuccessful discharge can occur as part of a plea agreement or as a sentencing outcome after hearing on the petition. In most cases, this results in a participant being sentenced to the Illinois Department of Corrections.

## **D. Voluntary Withdrawal**

A participant shall have the right to withdraw from WCDC since it is a voluntary program, but withdrawal may be subject to consequences. If a participant requests to withdraw, the WCDC Judge shall ensure that the participant has the right to consult with defense counsel, and that the withdrawal is made voluntarily and knowingly in

open court. The WCDC Judge shall ensure that the participant is admonished as to the consequences, actual or potential, which may result from the withdrawal. The consequences that could be imposed must be consistent with the participant's status and terms of probation, are to be discussed by the WCDC Team at a staffing on the issue of voluntary withdrawal, determined by the WCDC Judge who thereafter explains the consequences to the participant in open court prior to the WCDC Judge allowing the participant to withdraw.

## **XI. Confidentiality**

Information regarding a participant's health and treatment status is highly confidential as set forth in Section 7.4 of the *Illinois Standards* and this confidential is protected by federal and state laws and regulations. The WCDC team and treatment providers strictly observe the requirements of all applicable laws and regulations. To protect confidentiality, WCDC utilizes the Assessment Release to facilitate the assessment and discussion of an individual's eligibility to participate. The Consent to Participate that the participant signs acknowledges the possible dissemination of protected information through his/her participation in WCDC, and requires that the participant execute any release of information forms that are needed by probation, treatment providers and collateral sources in order to facilitate the sharing of confidential information about the participant in a lawful manner. All communication among the WCDC Team about a participant is required to be done in a manner to keep the individual's identity confidential. From time to time, collateral sources of information may volunteer information to the WCDC team about a participant, but a properly executed release of information from the participant to a collateral source is always obtained prior to WCDC contacting or sharing any information with a collateral source. Information obtained by the WCDC Team pursuant to a release or consent shall not be disclosed outside of WCDC. Information obtained is for WCDC purposes only.

## **XII. Post-Program Aftercare**

Each participant who is exiting the WCDC program shall be assessed for all post-program treatment or services needs and will discuss their discharge plan with their case manager or probation officer prior to exiting WCDC. This is to ensure that every participant is linked to needed services as indicated by the assessment, so that they can continue to have support as they continue to manage their addictions and live drug free lives.

WCDC understands that challenges to sobriety remain long after graduation. As a result alumni groups offer social gatherings and allow for case managers to maintain on-going relationships with participants after graduation.