

COLORADO PROBLEM-SOLVING COURT STANDARDS

MARCH 2019

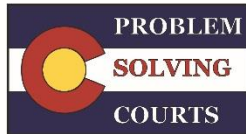


TABLE OF CONTENTS

INTRODUCTION	2
STANDARD I: Colorado veterans treatment courts shall be comprised of a multidisciplinary group of professionals who shall be responsible for the day-to-day operations of the veterans treatment court and shall work collaboratively to integrate substance use and mental health treatment services with justice system case processing	3
STANDARD II: Using a non-adversarial approach, prosecution and defense counsel promote public safety while protecting participants’ due process rights.	4
STANDARD III: Eligible participants are identified early and promptly placed into the veterans treatment court program.	5
STANDARD IV: Veterans treatment courts provide access to a continuum of evidence-based substance use disorder and other trauma informed treatment and services for veterans.	7
STANDARD V: Abstinence and appropriate use of medications are monitored by random and frequent drug and alcohol testing.	10
STANDARD VI: A coordinated strategy governs veterans treatment court responses to participants’ compliance.	12
STANDARD VII: Ongoing judicial interaction between participants and a dedicated veterans treatment court judicial officer are essential	15
STANDARD VIII: The veterans treatment court routinely monitors its adherence to best practice standards and employs scientifically valid and reliable procedures to evaluate its effectiveness.	16
STANDARD IX: Continuing interdisciplinary education for the entire team promotes effective VTC planning, implementation and operations	17
STANDARD X: Forging partnerships among veterans treatment court, public agencies, and community-based organizations generates local support and enhances veterans treatment court program effectiveness	18
STANDARD XI: The Colorado veterans treatment court mentor programs provide overall support, advocacy, and mentorship for military veterans involved in the criminal justice system to increase their chances of successful rehabilitation and community reintegration by pairing trained mentors with participants to help with their transition out of the criminal justice system.	19
<i>Appendix A: Historically Disadvantaged Groups</i>	20
<i>Appendix B: Recommended Training and Education Guidelines for Colorado Veterans Treatment Courts</i>	21

INTRODUCTION TO THE VETERANS COURT STANDARDS

ABOUT THE COLORADO PROBLEM-SOLVING COURT STANDARDS MANUAL FOR VETERANS TREATMENT COURTS

FP = Minimum “Fundamental Practices” are expected standards for problem-solving court (PSC) programs based upon the COLORADO PROBLEM-SOLVING COURTS BEST PRACTICES MANUAL adopted by the Problem-Solving Court Advisory Committee and Volumes 1 and 2 of the NATIONAL ASSOCIATION OF DRUG COURT PROFESSIONALS BEST PRACTICE STANDARDS.

BPS = “Best Practice Standards” are to be encouraged for use in all problem-solving court programs, based upon the COLORADO PROBLEM-SOLVING COURTS BEST PRACTICES MANUAL adopted by the Problem-Solving Court Advisory Committee and Volumes 1 and 2 of the NATIONAL ASSOCIATION OF DRUG COURT PROFESSIONALS BEST PRACTICE STANDARDS.

The distinction between “Fundamental Practices” minimum standards and encouraged best practice standards is based upon a collaborative process in consultation with the Center for Court Innovation, NPC Research, the Technical Assistance and Program Support (TAPS) Sub-Committee of the Colorado Problem-Solving Court Advisory Committee, and input from Colorado Problem-Solving Court professionals.

For all components, allowances are made for local circumstances beyond the immediate control of the Problem-Solving Court Team. Recognition is given to the fact that many programs, especially in rural areas of the state, lack the resources and service providers that are needed for full compliance with practice standards. Many of those programs have found solutions to those challenges and operate effective programs. Teams should strive to resolve the local issues in an effective manner.

THE COLORADO TEN KEY COMPONENTS are based on the TEN KEY COMPONENTS adopted by the NATIONAL ASSOCIATION OF DRUG COURT PROFESSIONALS (NADCP). The Key Component numbers in the “Colorado Standards” follow the sequence used by the NADCP with a notation identifying the corresponding Key number used in the COLORADO 10 KEY COMPONENTS. Although Colorado has adopted language that differs from the NADCP in Key Components 5, 6 and 7; the intent and subject matter remains identical for all practical purposes.

STANDARD I: *Colorado veterans treatment courts shall be comprised of a multidisciplinary group of professionals who shall be responsible for the day-to-day operations of the veterans treatment court and shall work collaboratively to integrate substance use and mental health treatment services with justice system case processing.*

- 1.1** The veterans treatment court shall include the following roles/agencies: judicial officer, prosecution and defense counsel, coordinator, probation/case manager, treatment provider, Veterans Justice Outreach (VJO) representative, peer mentor coordinator/peer mentor, and law enforcement.^{1 2} **FP**
- 1.1.1** These parties shall consistently attend and participate at scheduled pre-court staffing meetings.³ **FP**
- 1.1.2** These parties shall consistently attend and participate in court proceedings.⁴ **FP**
- 1.2** The veterans treatment court team shall collaboratively review and agree upon all aspects of veterans treatment court operations. The team shall create a policies and procedures manual and should review it yearly for content updates. **FP**
- 1.3** The veterans treatment court team shall develop a written agreement (i.e. a Memorandum of Understanding) between all participating agencies. This agreement shall include roles and responsibilities of all participating agencies consistent with these standards. **FP**
- 1.4** The Department of Veterans Affairs is included as a primary treatment provider and is represented on the team by a Veterans Affairs representative. **FP**
- 1.4.1** Alternative treatment providers can be a part of the court team for participants not inclined to utilize their Veterans Affairs Healthcare or who are ineligible for Veterans Affairs Healthcare. Providers should be certified to offer veteran-specific care.⁵ **FP**
- 1.5** The veterans treatment court shall utilize informed consent forms for all program participants to ensure they are aware of what information is being shared, and to allow service providers to exchange information.⁶ **FP**
- 1.6** Treatment providers shall communicate electronically with the veterans treatment court team between court sessions to report on participant progress and/or concerns in treatment, with confidentiality protocols in place to prevent disclosure or re-disclosure of confidential information.⁷ **BPS**

¹ Colorado Problem-Solving Courts Best Practices Manual (Problem-Solving Court Advisory Committee, 2014)

² 10 Key Components (NADCP, 1997)

³ Colorado Statewide Process Assessment and Outcome Evaluation (NPC Research, 2012)

⁴ Colorado Statewide Process Assessment and Outcome Evaluation (NPC Research, 2012)

⁵ Veteran-specific care includes evidence-based PTSD therapy, knowledge of military sexual trauma, and other care relevant to veteran culture and experiences.

⁶ CFR 42 – Part 2 Patient Record Confidentiality: <https://www.ecfr.gov/cgi-bin/text-idx?c=ecfr&sid=b7e8d29be4a2b815c404988e29c06a3e&rgn=div5&view=text&node=42:1.0.1.1.2&idno=42>

⁷ Colorado Statewide Process Assessment and Outcome Evaluation (NPC Research, 2012)

STANDARD II: *Using a non-adversarial approach, prosecution and defense counsel promote public safety while protecting participants' due process rights.*

- 2.1** Prosecution and defense counsel shall both be members of the veterans treatment court team and shall participate in the design, implementation, and enforcement of the program's screening, eligibility, and case-processing policies and procedures.^{8 9} **FP**
- 2.2** The prosecutor and defense counsel shall work to create an environment of stability, cooperation, and collaboration in pursuit of the program's goals. The prosecutor and defense counsel shall pursue justice and protect public safety as well as preserve the constitutional rights of veteran treatment court participant.¹⁰ **FP**
- 2.3** The prosecutor and defense counsel shall consistently attend staffings and court sessions.¹¹ **FP**
- 2.4** The prosecutor shall: review cases and determine whether a defendant is legally eligible for the veterans treatment court program; file all required legal documents; agree that a positive drug test or open court admission of drug use will not result in the filing of additional drug charges based on that admission; and work collaboratively with the team to decide on team response to participant behavior including the use of incentives, sanctions, therapeutic adjustments, and whether termination from the program is warranted.¹² **FP**
- 2.5** The defense counsel shall: review the arrest warrant, affidavits, charging document, all program documents, and other relevant information; advise the defendant as to the nature and purpose of the veterans treatment court program, the rules governing participation, the merits of the program, the consequences of failing to abide by the program rules, and how participation or non-participation will affect his/her interests. **FP**
- 2.5.1** Provide a list of and explain all of the rights that the defendant will temporarily or permanently relinquish¹³ and advise the veterans on alternative options. **FP**
- 2.5.2** Explain that the prosecution has agreed that admission to drug use in open court will not lead to additional charges and therefore encourage truthfulness with the judge and treatment staff and inform the veteran that they will be expected to take an active role in court sessions, including speaking directly to the judge as opposed to doing so through an attorney. **FP**
- 2.5.3** Work collaboratively with the team to decide on team response to participant behavior including incentives, sanctions and when or whether termination from the program is

⁸ Colorado Problem-Solving Courts Best Practices Manual (Problem-Solving Court Advisory Committee, 2014)

⁹ 10 Key Components (NADCP, 1997)

¹⁰ Colorado Problem-Solving Courts Best Practices Manual (Problem-Solving Court Advisory Committee, 2014)

¹¹ Colorado Statewide Process Assessment and Outcome Evaluation (NPC Research, 2012)

¹² Colorado Problem-Solving Courts Best Practices Manual (Problem-Solving Court Advisory Committee, 2014)

¹³ Each right that will be temporarily or permanently relinquished as a condition of participation in drug court shall be distinguished and explained separately to ensure the defendant fully understands what they are waiving.

warranted (some of these duties may be performed by alternate defense counsel roles in a post-plea sentence modification, termination from the program and probation revocation). **FP**

STANDARD III: *Eligible participants are identified early and promptly placed into the veterans treatment court program.*

3.1 Participant eligibility requirements/criteria (verified through objective legal and clinical screening conducted by appropriately trained and qualified staff) shall be developed and agreed upon by all members of the veterans treatment court team and included as part of the veterans treatment court policies and procedures.¹⁴ **FP**

3.1.1 Both prosecution and defense counsel shall perform their tasks as part of the eligibility determination process as swiftly as possible, including working with stakeholders in the legal system to shorten the time to entry into the veterans treatment court.¹⁵ **FP**

3.2 Time from arrest (or initiating event) to program entry is 50 days or less.¹⁶ **BPS**

3.3 All participants shall receive a Participant Handbook including information regarding program expectations, requirements and behaviors that will result in sanctions and incentives upon accepting the terms of participation and entering the program.¹⁷ **FP**

3.4 The veterans treatment court targets veterans for admission who have a substance use disorder and/or mental health disorder and are at substantial risk for reoffending or failing to complete a less intensive disposition, commonly referred to as high-risk and high-need veterans.^{18 19} **FP**

3.4.1 If a veterans treatment court is unable to target only high-risk and high-need veterans, the program develops alternative tracks with services that are modified to meet the risk and need levels of its participants. If a veterans treatment court develops alternative tracks, it will endeavor to not mix participants with different risk or need levels in the same counseling groups, residential treatment milieu, or housing unit.^{20 21} **FP**

¹⁴ Colorado Problem-Solving Courts Best Practices Manual (Problem-Solving Court Advisory Committee, 2014); Colorado Statewide Process Assessment and Outcome Evaluation (NPC Research, 2012)

¹⁵ Colorado Statewide Process Assessment and Outcome Evaluation (NPC Research, 2012)

¹⁶ Colorado Statewide Process Assessment and Outcome Evaluation (NPC Research, 2012)

¹⁷ Colorado Problem-Solving Courts Best Practices Manual (Problem-Solving Court Advisory Committee, 2014); Colorado Statewide Process Assessment and Outcome Evaluation (NPC Research, 2012)

¹⁸ Colorado Problem-Solving Courts Best Practices Manual (Problem-Solving Court Advisory Committee, 2014); Colorado Statewide Process Assessment and Outcome Evaluation (NPC Research, 2012)

¹⁹ Adult Drug Court Best Practice Standards, Volume I (NADCP, 2013)

²⁰ Colorado Problem-Solving Courts Best Practices Manual (Problem-Solving Court Advisory Committee, 2014); Colorado Statewide Process Assessment and Outcome Evaluation (NPC Research, 2012)

²¹ Alternative Tracks in Adult Drug Courts: Matching Your Program to the Needs of Your Clients. Available at <http://www.ndci.org/sites/default/files/nadcp/AlternativeTracksInAdultDrugCourts.pdf>

- 3.5** Eligibility and exclusion criteria are defined objectively, specified in writing, and communicated to potential referral sources including judges, law enforcement, defense attorneys, prosecutors, treatment professionals, and community supervision officers.^{22 23} The veterans treatment court team shall not apply subjective criteria or personal impressions of defendants to determine participants' suitability for the program.^{24 25} **FP**
- 3.6** Veteran treatment courts shall use validated risk and need assessments that are appropriate for the population served to assess the risk of the potential veterans treatment court candidate administered by appropriately trained and qualified professional staff (e.g. LSI-R, LS-CMI, PSC, CJRA, etc.). Services for participants shall be appropriate for their assessed risk and needs.^{26 27} **FP**
- 3.7** Current or prior offenses may disqualify candidates from participation in the veterans treatment court if empirical evidence demonstrates veterans with such records cannot be managed safely or effectively in a veterans treatment court. Barring legal prohibitions, veterans charged with drug distribution, DUI, domestic violence or those with violence histories are not excluded automatically from participation in a veterans treatment court.^{28 29 30 31} **FP**
- 3.8** If adequate treatment is available, candidates are not disqualified from participation in the Veterans Treatment Court because of co-occurring mental health or medical conditions or because they have been legally prescribed psychotropic or addiction medication.³² **FP**

²² Bhati, A.S., Roman, J.K., & Chalfin, A. (2008). *To Treat or Not to Treat: Evidence on the Prospects of Expanding Treatment to Drug-Involved Offenders*. Washington, DC: Urban Institute.

²³ Sevigny, E. L., Pollack, H. A., & Reuter, P. (2013). *Can Drug Courts Help to Reduce Prison and Jail Populations?* *Annals of the American Academy of Political & Social Science*, 647, 190-212.

²⁴ Colorado Problem-Solving Courts Best Practices Manual (Problem-Solving Court Advisory Committee, 2014); Colorado Statewide Process Assessment and Outcome Evaluation (NPC Research, 2012)

²⁵ Adult Drug Court Best Practice Standards, Volume I (NADCP, 2013)

²⁶ Colorado Problem-Solving Courts Best Practices Manual (Problem-Solving Court Advisory Committee, 2014); Colorado Statewide Process Assessment and Outcome Evaluation (NPC Research, 2012)

²⁷ Adult Drug Court Best Practice Standards, Volume I (NADCP, 2013)

²⁸ Carey, S.M., Finigan, M.W., & Pukstas, K. (2008) *Exploring the Key Components of Drug Court: A Comparative Study of 18 Adult Drug Courts on Practices, Outcomes, and Costs*. Portland, OR: NPC Research.

²⁹ Carey, S.M., Mackin, J.R., & Finigan, M.W. (2012) *What Works? The 10 Key Components of Drug Court: Research-Based Best Practices*. *Drug Court Review*, 8(1), 6-42/

³⁰ Colorado Statewide Process Assessment and Outcome Evaluation (NPC Research, 2012)

³¹ Adult Drug Court Best Practice Standards, Volume I (NADCP, 2013)

³² Colorado Statewide Process Assessment and Outcome Evaluation (NPC Research, 2012)

STANDARD IV: *Veterans treatment courts provide access to a continuum of evidence-based substance use disorder and other trauma informed treatment and services for veterans.*

4.1 The veterans court team shall ensure case management services are provided. **FP**

4.1.1 Ancillary services should be made available to meet the needs of participants. The services may include but are not limited to:

- a. Employment counseling and assistance
- b. Educational component
- c. Medical and dental care
- d. Transportation
- e. Housing
- f. Mentoring and alumni groups
- g. Traumatic Brain Injury (TBI) treatment
- h. Post-Traumatic Stress Disorder treatment
- i. Military Sexual Trauma treatment

BPS

4.2 The veterans treatment court shall provide a continuum of services.³³ A continuum of care consists of many elements that are not available to every program. These services may include but are not limited to:

REQUIRED (FP)	BEST PRACTICE (BPS)	
Intensive Outpatient	Detox Treatment	Anger Management
Group Counseling	Residential Treatment	Health Screening
Individual Counseling	Sober Living Facilities	Trauma-Informed Care
Drug Testing	Family Counseling	Parenting Classes
Co-Occurring Assessment (and counseling if appropriate)	Gender-Specific Counseling	In-Custody Treatment
Veteran-Specific Treatment through the Department of Veterans Affairs	Domestic Violence Counseling	

4.3 Treatment and case management plans shall be individualized for each participant based on the results of the initial and reassessments. Participants should be reassessed at a frequency determined by the program and treatment plans may be modified or adjusted based on results.³⁴ **FP**

³³ Adult Drug Court Best Practice Standards, Volume 1 (NADCP, 2013)

³⁴ Colorado Statewide Process Assessment and Outcome Evaluation (NPC Research, 2012)

- 4.3.1** Treatment shall not be based on program phase structure. Treatment shall be individually tailored to the participants needs based on the assessment of needs. **FP**
- 4.4** Participants are not to be incarcerated to achieve clinical or social services objectives such as obtaining access to detoxification services or sober living quarters.³⁵ **FP**
- 4.5** Participants receive a sufficient dosage and duration of substance use treatment to achieve long term sobriety. **FP**
- 4.5.1** Counseling shall be six to ten hours per week at the beginning of program for high-risk and need participants.³⁶ **FP**
- 4.5.2** Treatment shall be 200 hours **or** more over nine to twelve months for high-risk and need participants.³⁷ **FP**
- 4.6** The veterans treatment court incorporates treatment programs that are constructed with a variety of validated approaches and that are individualized based on identified clinical needs. **FP**
- 4.6.1** Individual sessions shall be a part of treatment requirements.³⁸ **FP**
- 4.6.2** Individual sessions shall be reduced only based on progress and stability. **BPS**
- 4.6.3** Group interventions shall be a part of treatment requirements when found to be appropriate for the participant. **FP**
- 4.6.4** Gender shall be considered in treatment planning. **FP**
- 4.6.5** Trauma history shall be considered in treatment planning.³⁹ **FP**
- 4.6.6** Co-occurring issues shall be considered in treatment planning. **FP**
- 4.6.7** The size of treatment groups shall not exceed twelve participants.⁴⁰ **FP**
- 4.6.8** Treatment groups shall be conducted by at least two licensed clinician facilitators.⁴¹ **BPS**

³⁵ Adult Drug Court Best Practices Standards, Volume 1 (NADCP, 2013)

³⁶ Adult Drug Court Best Practices Standards, Volume 1 (NADCP, 2013)

³⁷ Adult Drug Court Best Practices Standards, Volume 1 (NADCP, 2013)

³⁸ Adult Drug Court Best Practices Standards, Volume 1 (NADCP, 2013)

³⁹ Adult Drug Court Best Practices Standards, Volume 1 (NADCP, 2013)

⁴⁰ Adult Drug Court Best Practices Standards, Volume 1 (NADCP, 2013)

⁴¹ Adult Drug Court Best Practices Standards, Volume 1 (NADCP, 2013)

- 4.7** Appropriately trained and qualified treatment providers administer evidence-based behavioral or cognitive behavioral treatments⁴² that are documented in manuals and have been demonstrated to improve outcomes for addicted persons involved in the criminal justice system.⁴³ (For an extensive listing of evidence-based treatments, visit the NREPP website.⁴⁴) **FP**
- 4.7.1** Treatment services in the veterans treatment court may include motivational enhancement therapies, cognitive behavioral interventions, evidence-based pharmacological treatments, and relapse prevention training.⁴⁵ **FP**
- 4.8** Participants are prescribed psychotropic or addiction medications based on medical necessity as determined by a qualified treating medical professional.⁴⁶ **FP**
- 4.9** Treatment providers are licensed or certified to deliver substance abuse treatment, have substantial experience working with criminal justice populations, and are supervised regularly to ensure continuous fidelity to evidence-based practices.⁴⁷ **FP**
- 4.9.1** Participants receive education on evidence based Post-Traumatic Stress Disorder (PTSD) care as well as a stress tolerance education but are not forced to do PTSD therapy until and unless they feel ready to confront the trauma safely. **BPS**
- 4.9.2** Providers are trained in and have experience working with military veterans. **FP**
- 4.10** Veterans are encouraged to regularly attend self-help or peer support groups in addition to professional counseling. **BPS**
- 4.11** Veterans will complete a relapse prevention and continuing care plan prior to graduation. **FP**
- 4.11.1.1** Aftercare and relapse prevention plans are required for program completion. **FP**
- 4.11.1.2** Peer support groups continue after graduation for a minimum of 90 days. **BPS**
- 4.11.1.3** Ensure sustainable treatment options and/or sober support after graduation are available. **FP**
- 4.11.1.4** Pro-social activities are established for participants. **BPS**
- 4.11.1.5** The team maintains follow-up contact with participants after graduation. **BPS**

⁴² Adult Drug Court Best Practices Standards, Volume 1 (NADCP, 2013)

⁴³ Adult Drug Court Best Practice Standards, Volume 1 (NADCP, 2013)

⁴⁴ <https://www.samhsa.gov/nrepp>

⁴⁵ Adult Drug Court Best Practice Standards, Volume 1 (NADCP, 2013)

⁴⁶ Adult Drug Court Best Practice Standards, Volume 1 (NADCP, 2013)

⁴⁷ Adult Drug Court Best Practice Standards, Volume 1 (NADCP, 2013)

4.12 Veterans treatment courts shall require a minimum of 12 months of participation to complete all program phases which may include aftercare. Overall length of supervision and dosage of treatment for participants shall be based on the individual’s risk and needs as determined from valid standardized assessments.⁴⁸ **FP**

4.13 The context and nature of a participants’ addiction shall be considered in any termination decisions. Participants shall not be terminated (discharged or excluded) from treatment or the program based solely on relapses until all available treatment options are exhausted, provided the participant is otherwise compliant with the program.⁴⁹ **FP**

STANDARD V: *Abstinence and appropriate use of medications are monitored by random and frequent drug and alcohol testing.*

5.1 Veterans treatment courts shall implement a standardized system in which participants will participate in drug and alcohol testing.⁵⁰ **FP**

5.1.1 Testing shall be administered randomly. **FP**

5.1.2 Testing frequency should be no less than twice per week. **FP**

5.1.3 Testing shall be available seven days a week. **FP**

5.1.4 As treatment dosage and supervision are reduced, drug testing should be maintained until the participant has shown significant progress in meeting target behaviors. **FP**

5.2 All veterans treatment courts shall utilize urinalysis as the primary method of drug testing; a variety of alternative methods may be used to supplement urinalysis, including breath, hair, and saliva testing, as well as patch and electronic monitoring.⁵¹ **FP**

5.3 All drug testing shall be directly observed by an authorized official. **FP**

5.4 Results of drug testing should be provided to the team within 48 hours. In the event the participant provides a diluted, altered, or positive sample, or fails to submit a sample, this information should be communicated with the veterans treatment court team immediately.⁵²

BPS

⁴⁸ Adult Drug Court Best Practice Standards, Volume 1 (NADCP, 2013)

⁴⁹ Adult Drug Court Best Practice Standards, Volume 1 (NADCP, 2013)

⁵⁰ Colorado Problem-Solving Courts Best Practices Manual (Problem-Solving Court Advisory Committee, 2014); Colorado Statewide Process Assessment and Outcome Evaluation (NPC Research, 2012)

⁵¹ Colorado Problem-Solving Courts Best Practices Manual (Problem-Solving Court Advisory Committee, 2014); Colorado Statewide Process Assessment and Outcome Evaluation (NPC Research, 2012)

⁵² Colorado Problem-Solving Courts Best Practices Manual (Problem-Solving Court Advisory Committee, 2014); Colorado Statewide Process Assessment and Outcome Evaluation (NPC Research, 2012)

- 5.5** A period of greater than 90 continuous days of documented sobriety shall be required before a participant is eligible to graduate from the program.⁵³ **FP**

STANDARD VI: *A coordinated strategy governs veterans treatment court responses to participants' compliance.*

- 6.1** All veterans treatment courts shall have procedures for the use of incentives, sanctions, and therapeutic adjustments, including a system for reporting noncompliance, established in writing and included in the court's policies and procedures manual, and provided to the team for use in staffings.⁵⁴ **FP**
- 6.1.1** Written policies and procedures for incentives, sanctions, and therapeutic adjustments are in place.⁵⁵ **FP**
- 6.1.2** The policies and procedures guidelines are shared with participants in advance of their participation in the court.⁵⁶ **FP**
- 6.1.3** Clear definitions shall describe behaviors that elicit sanctions, incentives, and therapeutic adjustments.⁵⁷ **FP**
- 6.1.4** Phase advancement criteria are in place.⁵⁸ **FP**
- 6.1.5** Graduation criteria are in place.⁵⁹ **FP**
- 6.1.6** Termination criteria are in place.⁶⁰ **FP**
- 6.1.7** Team has reasonable discretion based on case circumstances.⁶¹ **BPS**
- 6.2** The formal system of incentives and sanctions shall be organized on a gradually escalating scale, offering a range of options, and applied in a consistent and appropriate manner to match

⁵³ Colorado Statewide Process Assessment and Outcome Evaluation (NPC Research, 2012)

⁵⁴ Colorado Problem-Solving Courts Best Practices Manual (Problem-Solving Court Advisory Committee, 2014); Colorado Statewide Process Assessment and Outcome Evaluation (NPC Research, 2012)

⁵⁵ Adult Drug Court Best Practice Standards, Volume 1 (NADCP, 2013)

⁵⁶ Adult Drug Court Best Practice Standards, Volume 1 (NADCP, 2013)

⁵⁷ Adult Drug Court Best Practice Standards, Volume 1 (NADCP, 2013)

⁵⁸ Adult Drug Court Best Practice Standards, Volume 1 (NADCP, 2013)

⁵⁹ Adult Drug Court Best Practice Standards, Volume 1 (NADCP, 2013)

⁶⁰ Adult Drug Court Best Practice Standards, Volume 1 (NADCP, 2013)

⁶¹ Adult Drug Court Best Practice Standards, Volume 1 (NADCP, 2013)

- a participant’s conduct and level of compliance, taking into consideration proximal and distal goals.⁶² **FP**
- 6.3** Incentives and sanctions should be tailored to the individual participant.⁶³ **BPS**
- 6.4** The program utilizes incentives to reinforce desired behaviors. (Examples include: employment, educational programs, peer support groups, volunteer service, etc.)⁶⁴ **FP**
- 6.5** Information regarding incidents of participant noncompliance shall be communicated to all members of veterans treatment court teams to coordinate an appropriate response/sanction.⁶⁵ **FP**
- 6.6** Incentives and sanctions must be immediate, certain, fair, and of appropriate intensity. Incentives and sanctions should be administered as closely in time to the targeted behavior as possible. If a participant does not agree with an immediate sanction, a non-compliance docket appearance date should be set to provide the participant with the hearing requested pursuant to standard 6-8-4. Incentives and sanctions should target specific behaviors and be administered with a clear direction for the desired behavior change.⁶⁶ **FP**
- 6.6.1** Clear explanation for every consequence is given to the participant.⁶⁷ **FP**
- 6.6.2** If a consequence is handed down by a team member other than the judicial officer, the consequence must be agreed upon by the team and the judicial officer must discuss the consequence at the earliest opportunity with the participant. **BPS**
- 6.7** Participant consequences are *equivalent* to others in the same phase for comparable conduct.⁶⁸ **BPS**
- 6.7.1** Gender, race, ethnicity, nationality, socioeconomic status, or sexual orientation is not considered in imposition of consequences.⁶⁹ **FP**
- 6.7.2** Consequences can be modified for safety and harm related circumstances. **BPS**
- 6.8** Jail sanctions are used judiciously and sparingly.⁷⁰ **FP**

⁶² Colorado Problem-Solving Courts Best Practices Manual (Problem-Solving Court Advisory Committee, 2014); Colorado Statewide Process Assessment and Outcome Evaluation (NPC Research, 2012)

⁶³ Adult Drug Court Best Practice Standards, Volume 1 (NADCP, 2013)

⁶⁴ Adult Drug Court Best Practice Standards, Volume 1 (NADCP, 2013)

⁶⁵ Colorado Problem-Solving Courts Best Practices Manual (Problem-Solving Court Advisory Committee, 2014); Colorado Statewide Process Assessment and Outcome Evaluation (NPC Research, 2012); Adult Drug Court Best Practice Standards, Volume 1 (NADCP, 2013)

⁶⁶ Adult Drug Court Best Practice Standards, Volume 1 (NADCP, 2013)

⁶⁷ Adult Drug Court Best Practice Standards, Volume 1 (NADCP, 2013)

⁶⁸ Adult Drug Court Best Practice Standards, Volume 1 (NADCP, 2013)

⁶⁹ Adult Drug Court Best Practice Standards, Volume 1 (NADCP, 2013)

⁷⁰ Colorado Problem-Solving Courts Best Practices Manual (Problem-Solving Court Advisory Committee, 2014); Colorado Statewide Process Assessment and Outcome Evaluation (NPC Research, 2012); Adult Drug Court Best Practice Standards, Volume 1 (NADCP, 2013)

- 6.8.1** Less severe sanctions are used before jail sanctions are used.⁷¹ **FP**
- 6.8.2** Jail sanctions have a definite term.⁷² **FP**
- 6.8.3** Jail sanctions do not exceed six consecutive days.⁷³ **BPS**
- 6.8.4** Veterans have an opportunity to be heard before the imposition of jail.⁷⁴ **BPS**
- 6.9** Veterans treatment courts shall respond to non-prescribed use of addictive or intoxicating substances.⁷⁵ **FP**
 - 6.9.1** Habit-forming prescriptions are not allowed unless clinically necessary. Programs shall adopt local policies concerning the eligibility or ineligibility for program admission of veterans with prescriptions for habit-forming drugs. Local policies shall also be adopted concerning use of habit-forming drugs while participating in the program. **FP**
 - 6.9.2** When available, non-addictive alternatives to habit-forming medications are required. **FP**
- 6.10** Professional demeanor shall be maintained in all interactions with participants **FP**
 - 6.10.1** Sanctions are delivered without anger or ridicule. **FP**
 - 6.10.2** Foul or abusive language is not used in imposing sanctions. **FP**
 - 6.10.3** Participants are not shamed at review hearings. **FP**
- 6.11** Participants have opportunity to explain their perspective on factual issues.⁷⁶ **BPS**
 - 6.11.1** Participants with language, cognition, or nervousness issues may have a legal representative speak for them. **FP**
- 6.12** Treatment plans are in place for every participant.⁷⁷ **FP**
 - 6.12.1** Treatment plans are modified to reach treatment goals.⁷⁸ **FP**

⁷¹ Adult Drug Court Best Practice Standards, Volume 1 (NADCP, 2013)

⁷² Adult Drug Court Best Practice Standards, Volume 1 (NADCP, 2013)

⁷³ Adult Drug Court Best Practice Standards, Volume 1 (NADCP, 2013)

⁷⁴ Adult Drug Court Best Practice Standards, Volume 1 (NADCP, 2013)

⁷⁵ Adult Drug Court Best Practice Standards, Volume 1 (NADCP, 2013)

⁷⁶ Adult Drug Court Best Practice Standards, Volume 1 (NADCP, 2013)

⁷⁷ Colorado Problem-Solving Courts Best Practices Manual (Problem-Solving Court Advisory Committee, 2014); Colorado Statewide Process Assessment and Outcome Evaluation (NPC Research, 2012)

⁷⁸ Adult Drug Court Best Practice Standards, Volume 1 (NADCP, 2013)

- 6.12.2** Therapeutic adjustments are based on recommendations of qualified treatment staff.⁷⁹ **FP**
- 6.12.3** Therapeutic adjustments are not used as sanctions.⁸⁰ **FP**
- 6.12.4** Compliant participants not responding to treatment receive adjustments rather than sanctions.⁸¹ **BPS**
- 6.13** Phase promotion is based on achievement of realistic and defined behavior objectives.⁸² **FP**
- 6.13.1** Phase advancement requires specific period of sobriety and/or compliance with recommended and appropriate mental health medication.⁸³ **BPS**
- 6.13.2** Incentives and sanctions are adjusted based on phase advancement. **BPS**
- 6.13.3** Supervision may be reduced in later phases of the program. **BPS**
- 6.13.4** Drug testing is not reduced except in the most exceptional circumstances, clearly indicated by participant behavior and sobriety. **BPS**
- 6.13.5** If a phase regression occurs, a remedial plan is created. **BPS**
- 6.14** Participants shall be employed, in school, or participating in an approved pro-social activity in order to qualify for graduation from the program.⁸⁴ **BPS**
- 6.15** Termination is based on repeated failures to comply with treatment and supervision. **FP**
- 6.15.1** Termination does not occur based on continued use if a participant is otherwise compliant. **BPS**
- 6.15.2** Termination does not result in an augmented sentence or disposition.⁸⁵ **FP**

⁷⁹ Adult Drug Court Best Practice Standards, Volume 1 (NADCP, 2013)

⁸⁰ Adult Drug Court Best Practice Standards, Volume 1 (NADCP, 2013)

⁸¹ Adult Drug Court Best Practice Standards, Volume 1 (NADCP, 2013)

⁸² Adult Drug Court Best Practice Standards, Volume 1 (NADCP, 2013)

⁸³ Colorado Statewide Process Assessment and Outcome Evaluation (NPC Research, 2012)

⁸⁴ Colorado Statewide Process Assessment and Outcome Evaluation (NPC Research, 2012)

⁸⁵ Colorado Problem-Solving Courts Best Practices Manual (Problem-Solving Court Advisory Committee, 2014)

STANDARD VII: *Ongoing judicial interaction between participants and a dedicated veterans treatment court judicial officer is essential*

- 7.1** The judicial officer shall serve a term of no less than two consecutive years and shall be assigned to the veterans treatment court on a voluntary basis.^{86 87} **FP**
- 7.2** The judicial officer shall be knowledgeable about the veterans treatment court model, substance use disorders, treatment modalities, alcohol and drug testing, behavior modification, trauma-related disorders, and other related issues and attend annual veterans court training.⁸⁸ **FP**
- 7.2.1** The judicial officer shall remain informed about current legal, ethical, and constitutional issues.⁸⁹ **FP**
- 7.2.2** The judge participates in webinars, online learning programs, and training workshops to ensure contemporary knowledge about advances in the veterans treatment court field. **BPS**
- 7.2.3** The judicial officer should receive training in military culture, the Veterans Administration, and veteran-specific issues – particularly if s/he does not have military experience. **BPS**
- 7.3** The veterans treatment court team structure should include a backup judicial officer who is trained to handle any proceedings or staffings in the event that the presiding judicial officer is unavailable. The backup judicial officer should be knowledgeable in problem-solving courts generally, and in the policies and procedures specific to the local veterans treatment court.⁹⁰ **BPS**
- 7.4** The judicial officer shall regularly attend and participate in all pre-court staff meetings during which participants progress is reviewed and sanctions, incentives, and therapeutic adjustments are discussed by the entire veterans treatment court team.⁹¹ **FP**
- 7.4.1** The judicial officer makes all final decisions concerning the imposition of incentives or sanctions that impact a participants legal status or liberty interests. **FP**
- 7.4.2** In making these decisions, the judge shall take into consideration the expertise and perspectives of all team members, and after discussing the matter in court with the participant. **BPS**

⁸⁶ Finnegan, M.W., Carey, S.M., & Cox, A.A. (April 2007). *The Impact of a Mature Drug Court Over 10 Years of Operation: Recidivism and Costs (Final Report)*. NPC Research, Portland, OR

⁸⁷ Adult Drug Court Best Practice Standards, Volume 1 (NADCP, 2013)

⁸⁸ Colorado Problem-Solving Courts Best Practices Manual (Problem-Solving Court Advisory Committee, 2014); Colorado Statewide Process Assessment and Outcome Evaluation (NPC Research, 2012)

⁸⁹ Adult Drug Court Best Practice Standards, Volume 1 (NADCP, 2013)

⁹⁰ Adult Drug Court Best Practice Standards, Volume 1 (NADCP, 2013)

⁹¹ Adult Drug Court Best Practice Standards, Volume 1 (NADCP, 2013)

- 7.4.3** Decisions regarding therapeutic responses or interventions must be made with reliance on the input of trained treatment professionals. **FP**
- 7.5** A regular schedule of status hearings shall be followed to monitor participant progress.⁹² **FP**
- 7.6** Participants shall attend, at minimum, bi-weekly status hearings while in the first phase of the veterans treatment court program.⁹³ **FP**
- 7.6.1** Depending on the veteran’s risk and need, status hearings may occur with greater or less frequency. **FP**
- 7.7** Status hearings shall occur no less than once per month during the last phase of the program.⁹⁴ **FP**
- 7.8** Status reviews shall be conducted with each participant on an individual basis.⁹⁵ **FP**
- 7.9** The judicial officer shall spend an average of three minutes with each participant during status hearings, especially those participants who are doing well. **FP**

STANDARD VIII: *The veterans treatment court routinely monitors its adherence to best practice standards and employs scientifically valid and reliable procedures to evaluate its effectiveness.*⁹⁶

- 8.1** Participant progress, success, and satisfaction should be monitored on a regular basis (including at program entry and graduation/termination) through the use of surveys, including exit surveys at the time of graduation or termination. **FP**
- 8.2** Participant data should be monitored and analyzed on a regular basis per local policy development to determine program effectiveness. **BPS**
- 8.3** A process and outcome evaluation should be conducted by an independent evaluator within 3 years of implementation of a veterans treatment court program and in regular intervals, as necessary, appropriate, and/or feasible for the program, thereafter. **BPS**
- 8.4** Findings from evaluations should be considered when (and used for) modifying program operations, procedures, and practices. **FP**

⁹² Adult Drug Court Best Practice Standards, Volume 1 (NADCP, 2013)

⁹³ Adult Drug Court Best Practice Standards, Volume 1 (NADCP, 2013)

⁹⁴ Adult Drug Court Best Practice Standards, Volume 1 (NADCP, 2013)

⁹⁵ Adult Drug Court Best Practice Standards, Volume 1 (NADCP, 2013)

⁹⁶ Colorado Problem-Solving Courts Best Practices Manual (Problem-Solving Court Advisory Committee, 2014); Colorado Statewide Process Assessment and Outcome Evaluation (NPC Research, 2012)

- 8.5 Data needed for program monitoring and management should be kept in electronic data systems, be easily obtainable, and maintained in useful formats for regular review by program teams and management. **FP**
- 8.6 Courts shall use the preferred statewide case management program, currently PSC3D, in the interest of the formal and systematic collection of program performance data. **FP**
- 8.7 The veterans treatment court team will coordinate through Colorado Crime Information Center (CCIC), State Court Administrator’s Office (SCAO), the Division of Probation Services (DPS) and other available means to obtain recidivism data. **FP**
- 8.8 The veterans treatment court team will work collaboratively with the SCAO to conduct a cost-benefit analysis of the veterans treatment court program. **BPS**
- 8.9 Veterans treatment court programs will participate in the TAPS/Fidelity peer review process as determined necessary by SCAO. Participation in the peer review could be included as appropriate process evaluation (see 8.3). **FP**

STANDARD IX: *Continuing interdisciplinary education for the entire team promotes effective VTC planning, implementation and operations.*⁹⁷

- 9.1 Veterans treatment court programs shall address staff training requirements and continuing education in their policy and procedures manual. Training shall align with COLORADO PROBLEM-SOLVING COURT and national standards and the practices endorsed by THE NATIONAL ASSOCIATION OF DRUG COURT PROFESSIONALS (NADCP) and the NATIONAL DRUG COURT INSTITUTE (NDCI), and JUSTICE FOR VETS. The training and education recommendations of the Colorado Problem-Solving Court Advisory Committee’s Education Sub-Committee shall be followed (See APPENDIX B). **FP**
- 9.2 Training and education should include topics such as: military culture; the drug court model; best practices; motivational interviewing; substance use disorders; treatment; co-occurring disorders; sanctions and incentives; drug testing standards and protocols; confidentiality and ethics; impact of veterans’ race, culture, ethnicity, gender, sexual orientation, and trauma histories. Team members will assist in cross-training other team members in their specific disciplines. **FP**
- 9.3 Court teams, to the extent possible, should attend comprehensive training yearly or every other year as provided by SCAO or JUSTICE FOR VETS. **FP**

⁹⁷ Colorado Problem-Solving Courts Best Practices Manual (Problem-Solving Court Advisory Committee, 2014); Colorado Statewide Process Assessment and Outcome Evaluation (NPC Research, 2012)

- 9.4** New team members shall attend formal orientation and training on problem-solving court basics, consistent with the recommendations of the Training and Education Subcommittee (See APPENDIX B). **FP**

STANDARD X: *Forging partnerships among veterans treatment court, public agencies, and community-based organizations generates local support and enhances veterans treatment court program effectiveness.*⁹⁸

- 10.1** The veterans treatment court team/steering committee shall meet periodically to oversee the operations of the court and to establish and review policies and procedures. The policies and procedures should address sustainability of the court's operation, resources, information management, and evaluation needs. The policies and procedures shall include implementation tasks and timeframes to ensure compliance with this document, and the PROBLEM-SOLVING COURT BEST PRACTICE MANUAL. The policies and procedures should incorporate the goals of participant abstinence from alcohol and illicit drugs, and the promotion of law-abiding behavior in the interest of public safety. **FP**

- 10.1.1** The veterans treatment court team should, at a minimum, meet quarterly to review policies and procedures. Participating agencies may differ depending on the court type. Recommended agencies include: the prosecutor's office, the public defender's office, community corrections agency or probation department, the court, law enforcement, Department of Veterans Affairs, and the treatment provider. **BPS**

- 10.2** The veterans treatment court shall organize a local Advisory Committee that may consist of representatives from the court, community organizations, law enforcement, treatment providers, Department of Veterans Affairs, health providers, social services agencies, the business community, media, faith community, and other community groups. The Advisory Committee should meet at least twice per year to provide guidance to the veterans treatment court team. **FP**

⁹⁸ Colorado Problem-Solving Courts Best Practices Manual (Problem-Solving Court Advisory Committee, 2014); Colorado Statewide Process Assessment and Outcome Evaluation (NPC Research, 2012)

STANDARD XI: *The Colorado veterans treatment court mentor programs provide overall support, advocacy, and mentorship for military veterans involved in the criminal justice system to increase their chances of successful rehabilitation and community reintegration by pairing trained and qualified mentors with participants to help with their transition out of the criminal justice system.*

- 11.1** Veterans treatment courts shall provide participants admitted to the court the opportunity to work with a “veteran mentor” who can offer coaching, guidance, advocacy, and recommendation to relevant resources to support them throughout the program.^{99 100 101 102} **FP**
- 11.2** Veterans treatment courts shall hire and retain a lead peer mentor coordinator (LPMC) who serves as the peer mentor program manager and is responsible for the administrative work and coordinating the day-to-day operations of the assigned peer mentor program. **FP**
- 11.2.1** In collaboration with the Veterans Treatment Court and other stakeholders, the LPMC shall develop and implement a strategic plan for the peer mentor program that meets the long-term goals of the VTC and ensures program sustainability, including recruitment, training, retention, and supervision of a diverse corps of peer mentors. **FP**
- 11.3** Veterans treatment courts shall provide training to peer mentors on best practices and ethics for mentoring fellow veterans, consistent with the recommendations of the Training and Education subcommittee¹⁰³. **FP**
- 11.4** Veterans treatment courts may define a confidentiality policy for peer mentors. **FP**
- 11.5** Veterans treatment courts should make every attempt to accept program graduates as mentors. **BPS**

⁹⁹ Timko, C., Flatley, B., Tjemslund, A., McGuire, J., Clark, S., Blue-Howells, J., ... & Finlay, A. (2016). A Longitudinal Examination of Veterans Treatment Courts' Characteristics and Eligibility Criteria. *Justice Research and Policy*, 17(2), 123-136.

¹⁰⁰ Johnson, R. S., Stolar, A. G., Wu, E., Coonan, L. A., & Graham, D. P. (2015). An analysis of successful outcomes and associated contributing factors in veterans' court. *Bulletin of the Menninger Clinic*, 79(2), 166-173.

¹⁰¹ Peak Research, LLC. (2016). FY 16-17 VTC Evaluation Report.

¹⁰² Knudsen, K. J., & Wingenfeld, S. (2016). A Specialized Treatment Court for Veterans With Trauma Exposure: Implications for The Field. *Community Mental Health Journal*, 52(2), 127–135. <https://doi.org/10.1007/s10597-015-9845-9>.

¹⁰³ Timko, C., Flatley, B., Tjemslund, A., McGuire, J., Clark, S., Blue-Howells, J., ... & Finlay, A. (2016). A Longitudinal Examination of Veterans Treatment Courts' Characteristics and Eligibility Criteria. *Justice Research and Policy*, 17(2), 123-136.

APPENDIX A: HISTORICALLY DISADVANTAGED GROUPS

Historically Disadvantaged Groups (HDG) should have programs matched to their specific needs and receive fair and equal treatment.^{104 105} Issues of significance in serving HDG populations are:

I. EQUIVALENT ACCESS

- a. Assessment tools validated for the HDG population **BPS**
- b. Eligibility criteria are nondiscriminatory **FP**
- c. Admissions criteria are adjusted to accommodate diversity **BPS**
- d. Participants provide feedback on clarity, relevance, and cultural sensitivity of assessments **BPS**

II. EQUIVALENT TREATMENT

- a. Equal access to treatment is assured **FP**
- b. Treatment modalities are validated for HDG populations **BPS**
- c. Treatment is responsive to HDG issues **FP**

III. EQUIVALENT RETENTION

- a. Program monitors completion rates for HDG **FP**
- b. Remedial plans are placed into action if needed **FP**
- c. Remedial plans are evaluated for effectiveness **FP**
- d. Education and employment assistance is provided to HDG participants as appropriate **BPS**
- e. Program progress results are tracked by HDG identification **FP**

IV. EQUIVALENT INCENTIVES AND SANCTIONS

- a. HDG participants receive same incentives as other participants **FP**

¹⁰⁴ Colorado Problem-Solving courts Best Practices Manual (Problem-Solving Court Advisory Committee, 2014); Colorado Statewide Process Assessment and Outcome Evaluation (NPC Research, 2012)

¹⁰⁵ Adult Drug Court Best Practice Standards, Volume 1 (NADCP, 2013)

APPENDIX B: RECOMMENDED TRAINING/EDUCATION GUIDELINES

Veterans Treatment Courts

The Training and Education Subcommittee of the problem-solving court Advisory Committee exists for the purpose of developing standards and training curricula that promote adherence to “best practices” and fidelity to the problem-solving court model. Standardized training curricula and protocols will increase consistency in training and education practices in veterans treatment courts across the state and ensure that all veterans treatment court programs have access to critical resources, information and training.

- New veterans treatment court team members should have substantial experience in their traditional role and should demonstrate the ability to function in a collaborative team environment, a willingness to learn and step outside of a traditional role when appropriate, a willingness to utilize “best practices,” and a commitment to the principles of problem-solving courts. **BPS**
- New veterans treatment court team members should be provided access to trainings and materials prior to joining the drug court team. **FP**
- Consistent with “best practices,” new team members should be assigned to the veterans treatment court team for a minimum term length of two (2) years. **BPS**
- New veterans treatment court team members should complete the (Phase I) core curriculum trainings within three (3) months of joining the veterans treatment court team. It is further required that each new team member complete the NDCI online training course “Essential Elements of Adult Drug Courts” prior to attending the first veterans treatment court staffing and/or court. **FP**
- Veterans treatment court teams shall collaborate and share training and education resources with other problem-solving court teams whenever possible. Problem-solving court coordinators will serve as points of contact for collaboration efforts. **FP**
- The veterans treatment court team members will assume the responsibility of educating peers, colleagues, and the judiciary as a whole on the principles, practices, and expectations of problem-solving courts. Additionally, the veterans treatment court team members are tasked with sharing the principles and philosophies, as well as the value, of problem-solving courts with the community. **FP**

TEAM TRAINING

1. Treatment staff is culturally sensitive
2. Treatment staff attends training in cultural sensitivity
3. Program staff is culturally sensitive
4. Program staff is trained in cultural sensitivity
5. Judicial Officer is trained in cultural sensitivity
6. Judicial Officer demonstrates cultural sensitivity
7. Bias is monitored by performance procedures
8. Identified solutions to bias are employed