Governor's Advisory Commission on Opioids and Addiction

Virginia Specialty Dockets: Drug Treatment Court Dockets

> "Providing Treatment, Promoting Recovery, and Saving Lives"



Hon. Jack S. "Chip" Hurley, Jr., Judge Vice Chair, Drug Treatment Court Advisory Committee Tazewell County Adult Drug Treatment Court March 15, 2019

Objectives

- **† Virginia Drug Treatment Court Dockets**
- **Benefits of Medically Assisted Treatment (MAT)
 - *All Eligible Drug Court Participants
- **m** Proposed Funding Formula
 - **™** Establish Sustainability
 - **™** Ensure Accountability
- *** Adult Drug Treatment Courts in Every Judicial Circuit



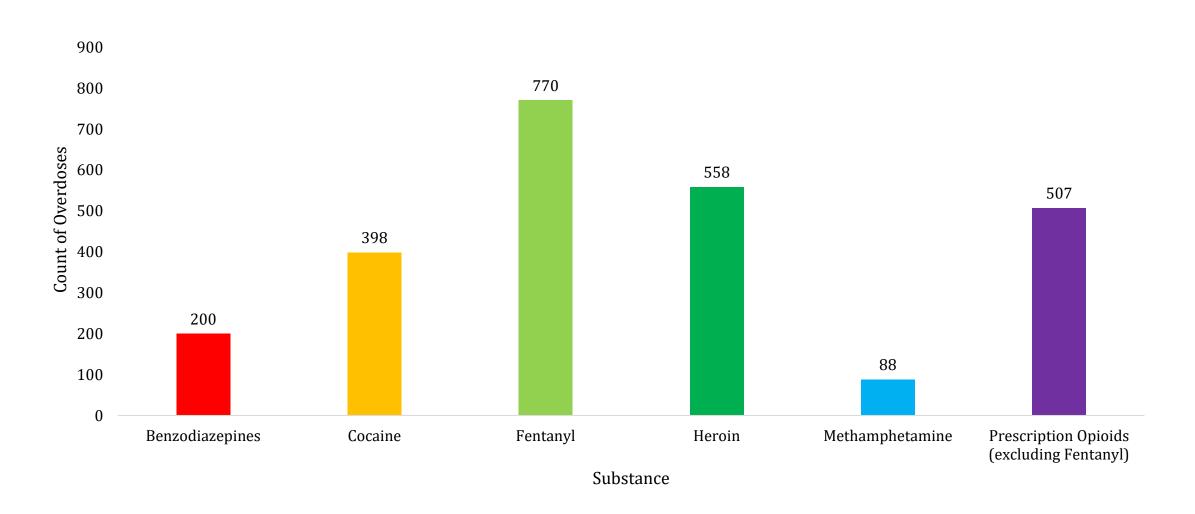
47,600 Individuals Died the United States From Drug Overdoses in 2017

(Pecto Park, San Diego - Capacity 42,445)



2019 NACM MIDYEAR CONFERENCE (February 10-12); Deborah Taylor Tate, Co-Chair, NJOTF, Director, Tennessee AOC

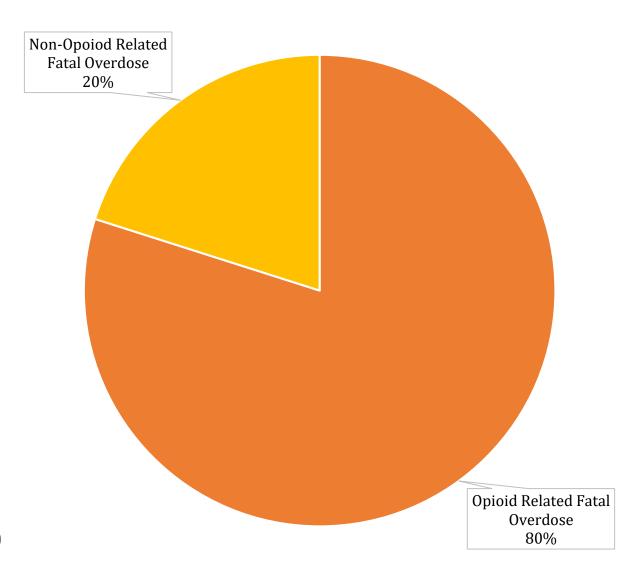
Fatal Drug Overdoses in Virginia, 2017



Virginia Department of Health, Office of the Chief Medical Examiner (July, 2018). http://www.vdh.virginia.gov/content/uploads/sites/18/2018/07/Quarterly-Drug-Death-Report-FINAL-Q1-2018.pdf

Fatal Drug Overdoses in Virginia, 2017

Of the 1,538 instances of fatal drug overdose in 2017, 1,229 or **80%** were related to the use of opioids.



Virginia Department of Health, Office of the Chief Medical Examiner (July, 2018)



Virginia

"Even as Virginia expects a slight dip in fatal opioid related drug overdoses in 2018, deaths caused by cocaine and methamphetamines as well as babies born addicted are on the rise, indicating a disease of despair......

what we are dealing with is an addiction epidemic, not an opioid epidemic.....we may get a handle on prescription opioids just to see meth and other things take their place."

State Health Commissioner M. Norman Oliver speaking at a Virginia Board of Health meeting on December 13, 2018 (Bridget Balch, Richmond Times Dispatch, December 15, 2018)

Drug Stricken SWVA

Virginia's Rural Communities - Devastated by the Opioid and Prescription Drug Crisis since the 1990s

TAZEWELL COUNTY CIRCUIT COURT GRAND JURY DOCKET, JULY 8 Narcotics cases Burge Calfee Belcher Collins Comer Addison Akers Anderson Barnett Bucklen Burks Cox Hayes B. Johnson R. Johnson Lamb Harrison Jennelle Deal Green Grose Hamer Lewis McCraven McGlothlin Moore Panagopoulas Pauley Robertson Robinette Митау Olivo Pendergrass Redmond Repass Rife Thompson J. Tibbs Shrader Sigmon Solis M. Tibbs Vance White Whitt Stinson Wyatt

Addiction Epidemic



Right Fork
Drug
Treatment
Court Dockets

Left Fork
Business as
Usual (BAU)

Virginia Drug Treatment Court Dockets

As an alternate to traditional court processing, drug treatment court dockets have proven successful in deterring addicts from future criminal acts.

The **Recidivism Rate** of drug court graduates are approximately half or less than the re-arrest rates of non-drug court graduates.





Virginia's Drug Treatment Court Dockets Save \$\$\$

- \$ Virginia drug treatment court program saved nearly \$20,000 per participant for total costs against the similar comparison group who were in a "business as usual" model.
- \$ In that same year the Impact Study reported Virginia's recidivism rate was 26.6% for Drug Court and 40.4% for a matched comparison group for a new conviction and 15.2% compared to 26.1% respectively for a new felony conviction.
- \$ Virginia's recidivism rate measured by rearrests, of **45%**, indicates that Virginia drug courts as a whole out-perform many drug courts in other states at 52%.
- \$ These findings suggest a robust and sustained impact of drug court on recidivism compared to the business-as-usual alternative.

Virginia's Drug Treatment Court Dockets

- **✓** 36 Adult Drug Treatment Courts
 - + 2 Not Operational
- **✓ 2 DUI Treatment Courts**
 - + 1 Not Operational
- ✓ 3 Family Drug Treatment Courts

 +1 Not Operational
 - +1 Not Operational
- ✓ 7 Juvenile Drug Treatment Courts



□Target population:

ohigh risk/high need, non-violent offenders struggling with substance use disorder

Virginia's Drug Treatment Court Dockets

- □Combine comprehensive **treatment** with intensive legal **supervision** and monitoring;
 - Utilize Evidenced Based treatment and including Medically Assisted Treatment (MAT) & Moral Reconation Therapy (MRT)
- ☐ Hold participants **accountable**:
 - ograduated sanctions for failure to adhere to program rules and expectations and incentives for positive behaviors



9 Components of Effective MAT Programs

Counseling and other services – plus medication – are essential.

Courts are selective about treatment programs and private prescribing physicians.

Courts develop strong relationships with treatment programs and require regular communication regarding participant progress.

Screening and assessment must consider all clinically appropriate forms of treatment.

Judges rely heavily on the clinical judgment of treatment providers as well as the court's own clinical staff.

Endorsement of medication-assisted treatment by all members of the drug court team is the goal, but not a prerequisite.

Monitoring for illicit use of medication-assisted treatment medication is a key component of the program and can be accomplished in different ways.

Medications for medication-assisted treatment are covered through government and/or private insurance programs.

Medication-assisted treatment operates very similarly to other kinds of treatment.

Medication Assisted Treatment (MAT)

- FDA has only approved medication therapy options for the treatment of individuals struggling with the following addictions
 - ➤ Opioid Dependence
 - > Alcohol Dependence
 - > Nicotine Dependence
- FDA approved MAT options are proven to be safe and effective when used in combination with counseling and psychosocial supports (SAMSHA)
- Research has proven time and again that MAT is effective when prescribed and used appropriately
- MAT is much underused, in part due to discrimination against MAT patients, despite state/federal laws prohibiting it (SAMHSA)

Drug Court MAT Policy Example

- Drug Treatment Courts allows participants to access and receive Medication Assisted Treatment (MAT) services from approved providers.
- Drug Treatment Court **does not** deny admission to eligible and appropriate referrals who are receiving MAT services and does not require its participants to discontinue MAT services as a graduation eligibility criterion
- Drug Court allows access to MAT when available through the local Community Services Boards (CSB)
- Drug Court does not use MAT as an admission criterion or as a graduation criterion
- Drug Court has relationships with approved local OBOT providers/prescribers, including the Opioid Treatment Program ("methadone clinic"), who adhere to Best Practices for MAT prescribing
- Drug Court has graduated participants receiving MAT; the decision to discontinue MAT is an individual participant's decision made jointly with his/her MAT prescriber



National Drug Court Institute



"It is not acceptable for drug courts to have blanket prohibitions against MAT or to act of the basis of incomplete or erroneous information when making fundamental decisions that affect participants' health and welfare. Failing to consider scientific evidence falls short of best practice standards."

Those with substance use addiction must have access to all FDA approved MAT options

- Appropriate individuals must have access to the MAT option most appropriate for his/her needs
- reduce the stigma associated with the use of MAT
- no recommended maximum duration for MAT maintenance treatment

....including Drug Court participants

Four Keys of Medically Assisted Treatment (MAT)



42% of active drug court participants report opiates as their drug of choice

Proposed Sustainability Funding Formula

- \$ Flat funding allowed only the 14 original Drug Court dockets to be consistently "funded dockets"
- \$ 2012 allowed new Drug Court applications to be considered for approval by Advisory Committee if the jurisdiction was not requesting state funding.
- \$ Drug Court Dockets rely on:
 - In-kind donations for staff and resources from participating agencies and other community partners/stakeholders;
 - Federal grant funding sources, i.e., SAMHSA and BJA Drug Court Implementation and Enhancement Grants
 - Foundation funds and/or donations with a 501c3 partner
- \$ The General Assembly has now authorized limited funding to address the sustainability needs of current Drug Court programs, and tasked the Advisory Committee with the responsibility of allocating these funds



Proposed Sustainability Funding Formula

- **➡** The Committee's proposed formula ensures:
 - Accuracy measured by data entered in the Statewide Drug Court Database by every operational Drug Court
 - Fairness eventually provide some level of funding to all operational Drug Court Docket
 - ► Transparency measuring data and consistently applying the funding formula with all Drug Court programs
- Factors to consider in formula:
 - Average number of **active** participants over the previous three (3) years
 - the size category of the docket
- Single floor funding to be applied to all adult & juvenile dockets using three sizes.
 - **Small** capacity is maintained with a minimum of ten active participants
 - ► **Medium** capacity is maintained between a minimum of 11 active participants
 - **Large** capacity is more than 75 or more active participants

Sustainability Formula

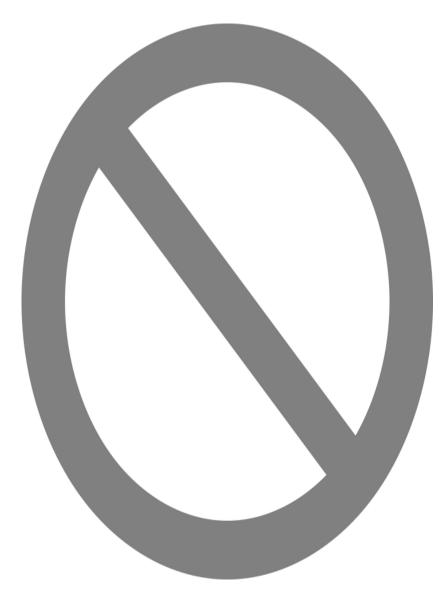
- \$The original ten Adult Drug Court Dockets will receive \$240,000 unless their budgets were previously adjusted to less
- \$ Original Juvenile Drug Court Docket funding will transition from \$175,000 in FY2020 to \$165,000 in FY2022 and thereafter
- \$ Newly funded Adult Drug Court Dockets with <u>over ten</u> active participants will be phased in to receive \$90,000



Sustainability Funding Accountability

Drug Court Dockets supported by these funds must adhere to compliance measures including, but not limited to the following:

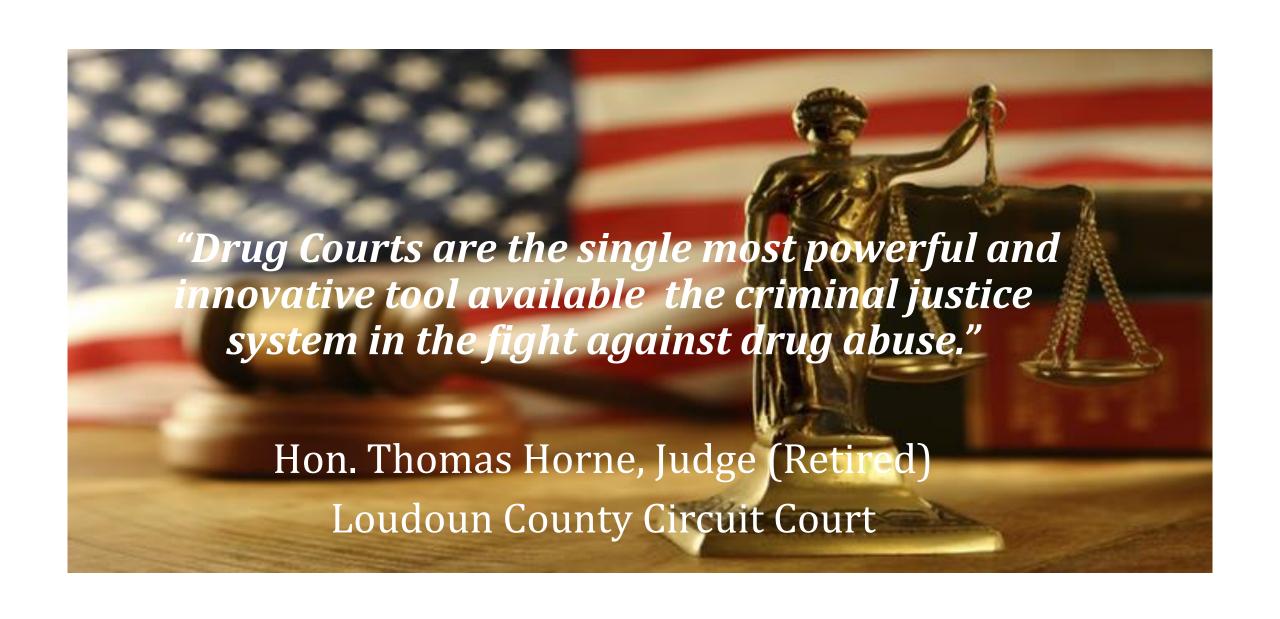
- Approved by the Statewide Drug Treatment Court Advisory Committee to operate
- Adherence to the Virginia Drug Treatment Court Standards and the National Ten Key Components for Drug Courts
- Demonstrated use of Evidence Based Practices
- Maintain accurate, complete, and current data in the Statewide Specialty Docket Database
- Complete quarterly progress & fiscal grant reports by the expected target dates
- Maintain appropriate retention and recidivism rates compared to statewide measures

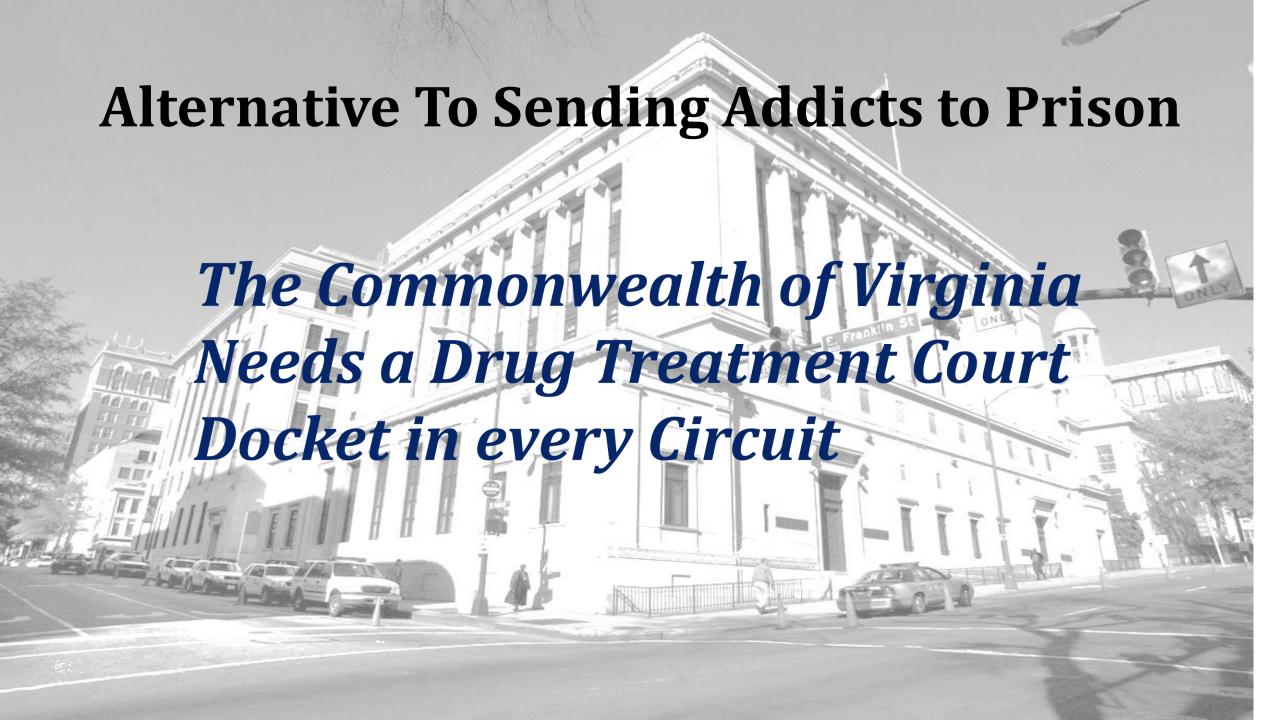


Pending Additional Funding

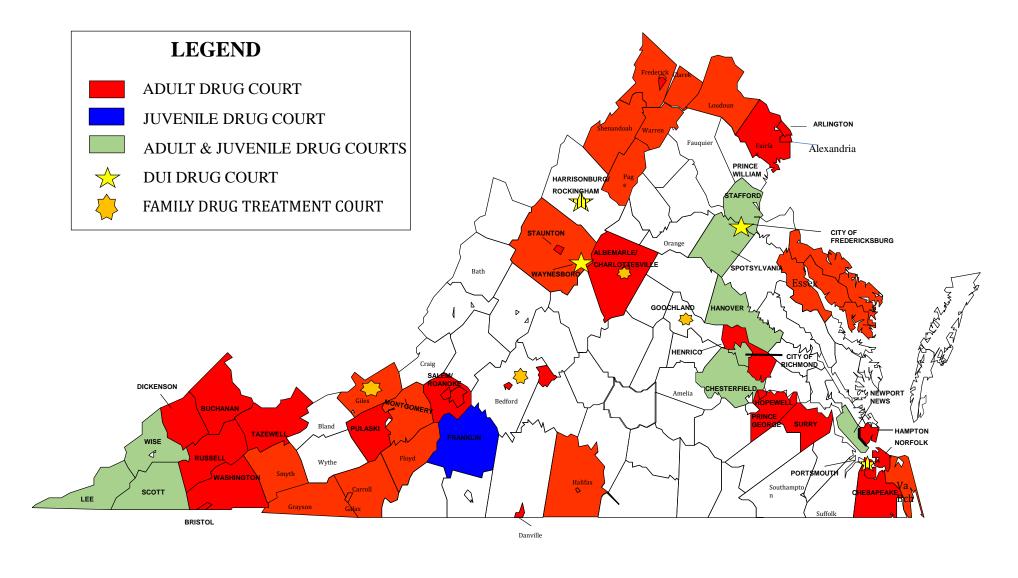
Ineligible for the first round of proposed funding:

- Orug Court Dockets approved but <u>not</u> operational before January 1, 2017
- Orug Court Dockets not approved by Advisory
 Committee
- ODrug Court Dockets with fewer than ten active participants

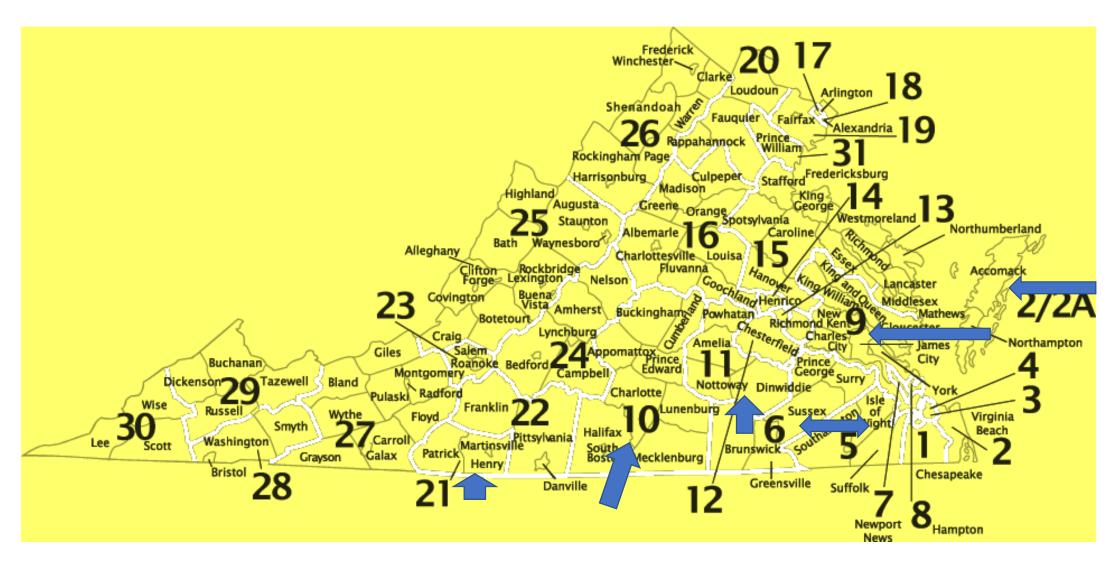




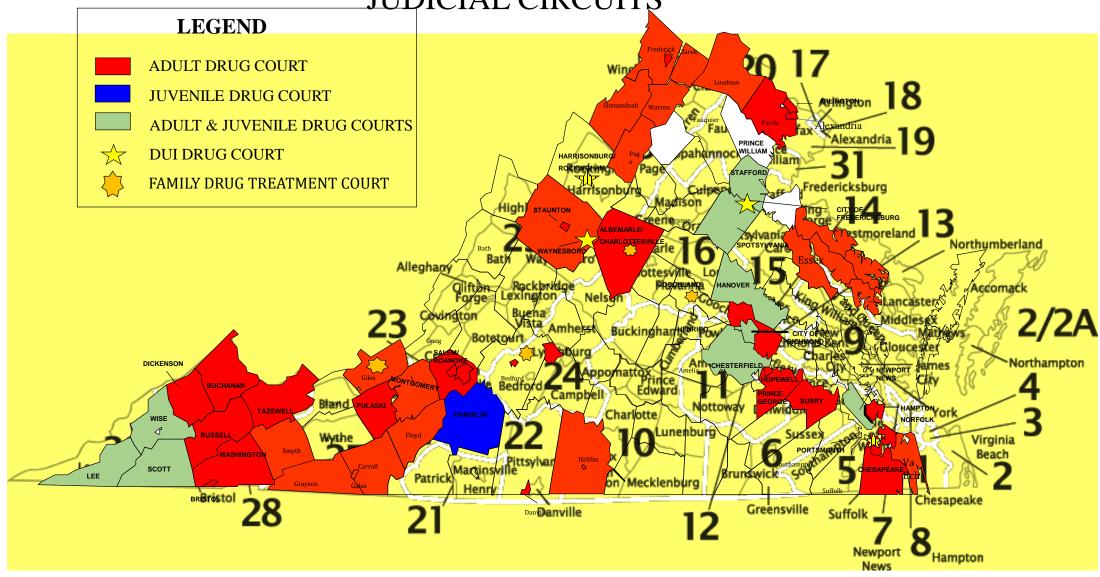
VIRGINIA'S DRUG TREATMENT COURTS



31 Virginia Judicial Circuits



VIRGINIA'S DRUG TREATMENT COURTS & JUDICIAL CIRCUITS



Drug Courts "Providing Treatment, Promoting Recovery, and Saving Lives"



Who's on Board?

Additional Information

Contact:

Anna Powers, Coordinator
Department of Judicial Services
Office of the Executive Secretary
Supreme Court of Virginia
804-786-3321

apowers@vacourts.gov

