



PROBLEM-SOLVING COURTS
DRUG PRE-TRIAL INTERVENTION
Policy and Procedural Manual

Administrative Office of the Courts
 Thirteenth Judicial Circuit
 Tampa, Florida



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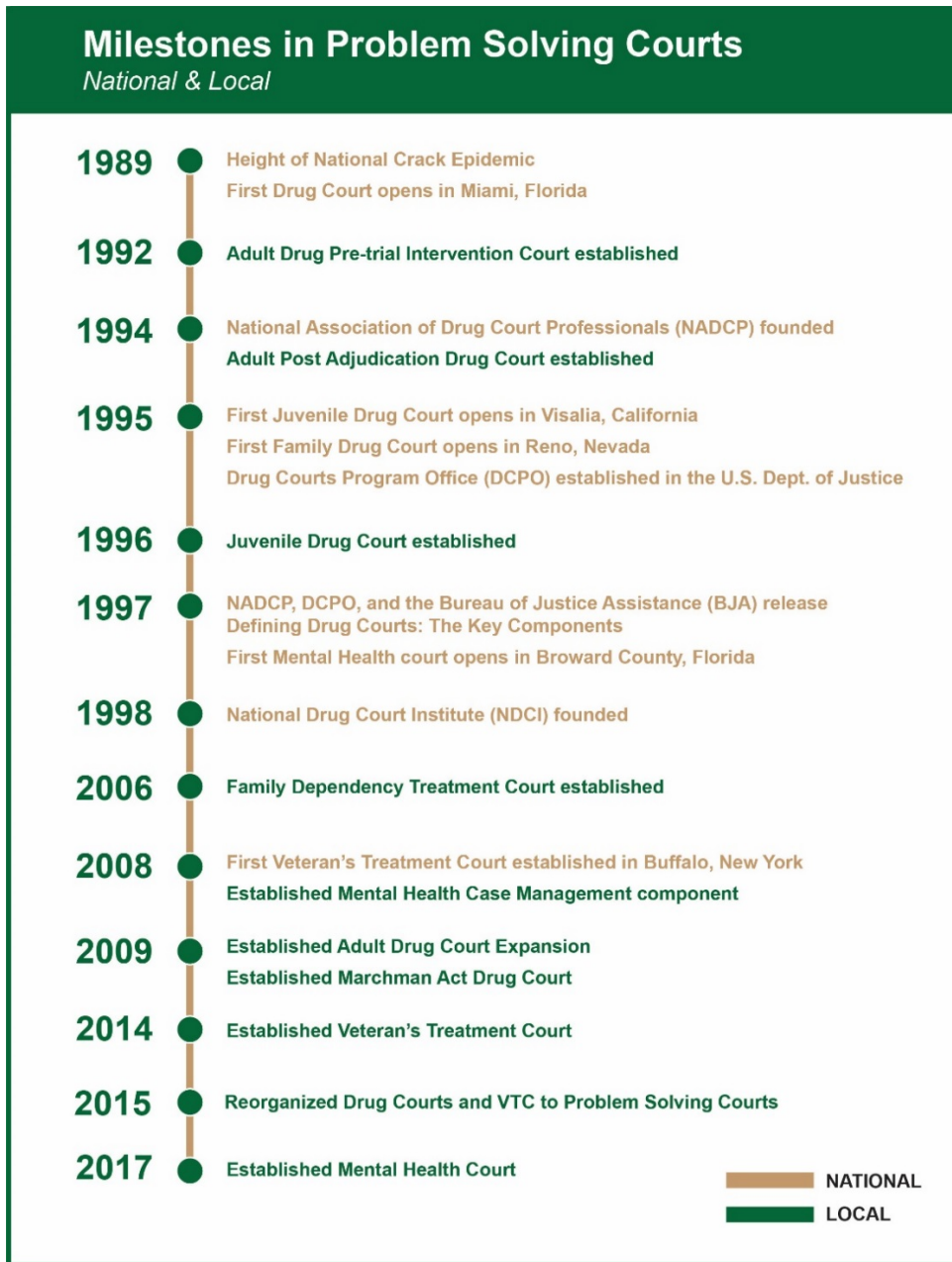
OVERVIEW

Problem-solving courts began in the early 1990's in response to significant backlogs and overcrowding in the criminal justice system related to drug offenders, and to the ineffectiveness in preventing the rapid cycling of this population through the system. These programs attempt to address underlying problems of addiction and have incorporated a range of evidence-based treatment principles into the criminal justice system. Problem-solving courts combine community treatment services with court supervision.

Last year, the *Florida Adult Drug Court Best Practice Standards* (2017) incorporated professionalism and fidelity into the drug court model (http://www.flcourts.org/core/fileparse.php/539/urlt/Florida_Adult_Drug_Court_Standards_Full_Document.pdf). These standards are based largely on the research and analysis conducted by National Association of Drug Court Professionals (NADCP). Hillsborough County's Thirteenth Judicial Circuit Court will utilize these standards across the seven problem-solving courts. In some courts, these standards are still in development but are of critical importance to the court's goals.

This manual provides structure to decision making for all key stakeholders in problem-solving courts. The court reserves the right, in each individual case, to make discretionary decisions consistent with the law and public policy. As can be seen below, Figure 1 depicts a timeline for problem-solving court milestones at both the national and local level.

Figure 1. National and Local Milestones in Problem-Solving Courts



OVERSIGHT COMMITTEE

Policies and procedures for the operation of the Thirteenth Judicial Circuit Court shall be established through the Problem-Solving Court Policy Manual and any change or amendment to this manual shall be made by the Oversight Committee. The purpose of the Oversight Committee is to gain input from committee member stakeholders, as well as to obtain their input and involvement in particular courts. The Committee is charged with recommending strategies to maintain the quality and effectiveness of treatment courts and to ensure viable treatment options. The Oversight Committee is comprised of the following individuals and representatives from the following agencies:

- Chief Judge
- Administrative Office of the Courts
- Public Defender's Office
- State Attorney's Office
- Department of Corrections' Community Corrections Office
- Hillsborough County Sheriff's Office
- Presiding Judges of Problem-Solving Courts

DEFINING ELEMENTS

Florida's problem-solving courts address the root causes of justice system involvement through specialized dockets, multidisciplinary team and a non-adversarial approach. Offering evidence-based treatment, judicial supervision and accountability, problem-solving courts provide individualized interventions for participants, thereby reducing recidivism and promoting confidence and satisfaction with the justice system process. Problem-solving courts offer a specialized court docket and include, but are not limited to, the following elements:

- **Problem-Solving Team:** Broad-based team of justice system stakeholders including judges, case managers, prosecutors, defense attorneys, treatment professionals, law enforcement officers, corrections personnel, child welfare personnel, and guardians ad litem
- **Non-Adversarial Approach:** Commitment to offering alternatives to the traditional adversarial litigation process
- **Continuum of Individualized Treatment Services:** Array of evidence-based services designed to identify and meet the unique needs of each participant
- **Judicial Leadership and Interaction:** Judge who leads the problem-solving team and monitors the court case using an increased number of hearings for monitoring compliance and progress
- **Responses to Participant Compliance:** Use of graduated, individualized and coordinated responses, both for incentives and sanctions, to promote both public safety and participants success

TEN KEY COMPONENTS

In 2000 and again in 2009, the Conference of Chief Justices (CCJ) and the Conference of State Court Administrators (COSCA) issued joint resolutions concluding that drug courts and other problem-solving courts are the most effective strategy to reduce drug abuse, prevent crime and restore families. In recognition of this fact, CCJ and COSCA called upon the justice system to extend the reach of problem-solving courts to every citizen in need, and further, to infuse the principles and practices of these proven programs throughout our system of justice. A National Consensus Panel, convened by the U.S. Department of Justice and the National Association of Drug Court Professionals (NADCP; U.S. Department of Justice, 1997), developed the Ten Key Components.

Their conclusions echo more than two decades of scientific research establishing the effectiveness of drug courts and that fidelity to the Ten Key Components is essential for achieving successful, cost-effective outcomes. In 2008, the Buffalo Veterans Treatment Court adopted, with slight modifications, the essential tenements of the U.S. Department of Justice Publication entitled *“Defining Drug Courts: The Key Components”* (Jan.1997). The essential elements of Mental Health Court are culled from a variety of sources, including interviews with former Bureau of Judicial Assistance (BJA) Mental Health Courts Program (MHCP) grantees, on-site visits to grantee and non-grantee mental health courts and a review of the scholarly literature. An original draft of the elements document was prepared for the 2004 BJA MHCP conference that served as source material for the *Guide to Mental Health Court Design and Implementation*. There are key differences between Drug Courts, Veterans Treatment Courts and Mental Health Courts. Tables 1 through 3 define the *Key Components* that provide the foundation for the successful operation of these courts.

Table 1. Ten Key Components of Drug Court

Key Component 1	Drug Courts integrate alcohol and drug treatment services with justice system case processing.
Key Component 2	Using a non-adversarial approach, prosecution and defense counsel promote public safety while protecting participants' due process rights.
Key Component 3	Eligible participants are identified early and promptly placed in the Drug Court program.
Key Component 4	Drug Courts provide access to a continuum of alcohol, drug, and related treatment and rehabilitation services.
Key Component 5	Abstinence is monitored by frequent alcohol and illicit drug testing.
Key Component 6	A coordinated strategy governs drug court responses to participants' compliance.
Key Component 7	Ongoing judicial interaction with each Drug Court participant is essential.
Key Component 8	Monitoring and evaluating achievement of program goals is necessary to gauge effectiveness.
Key Component 9	Continuing interdisciplinary education promotes effective Drug Court planning, implementation, and operations.
Key Component 10	Forging partnerships among Drug Courts, public agencies, and community-based organizations generates local support and enhances Drug Court program effectiveness.

Table 2. Ten Key Components of Veterans Treatment Court

Key Component 1	Veterans Treatment Courts integrate alcohol and drug treatment services with justice system case processing.
Key Component 2	Using a non-adversarial approach, prosecution and defense counsel promote public safety while protecting participants’ due process rights.
Key Component 3	Eligible participants are identified early and promptly placed in the Veterans Treatment Court program.
Key Component 4	Veterans Treatment Court provide access to a continuum of alcohol, drug, and related treatment and rehabilitation services.
Key Component 5	Abstinence is monitored by frequent alcohol and other drug testing.
Key Component 6	A coordinated strategy governs Veterans Treatment Court responses to participants’ compliance.
Key Component 7	Ongoing judicial interaction with each Veteran is essential.
Key Component 8	Monitoring and evaluating measure the achievement of program goals and gauge effectiveness.
Key Component 9	Continuing interdisciplinary education promotes effective Veterans Treatment Court planning, implementation, and operations.
Key Component 10	Forging partnerships among Veterans Treatment Courts, Veterans Administration, public agencies, and community-based organizations generates local support and enhances Veterans Treatment Court effectiveness.

Table 3. Ten Key Components of Mental Health Court

Key Component 1	<p style="text-align: center;">Planning and Administration</p> <p>Broad-based group of stakeholders representing criminal justice, mental health, substance abuse treatment, and related systems and the community guides the planning and administration of court.</p>
Key Component 2	<p style="text-align: center;">Target Population</p> <p>Eligibility criteria address public safety and consider community’s treatment capacity, as well as availability of alternatives to pretrial detention for defendants with mental illnesses. It also assesses relationship between mental illness and defendant’s offenses, while allowing individual circumstances to be considered.</p>
Key Component 3	<p style="text-align: center;">Timely Participant Identification and Linkage to Services</p> <p>Participants are identified, referred, and accepted into mental health courts, then linked to community-based service providers as quickly as possible.</p>
Key Component 4	<p style="text-align: center;">Terms of Participation</p> <p>Terms of participation are clear, promote public safety, facilitate defendant’s engagement in treatment, individualized to correspond to level of risk that defendant presents to community, and provide for positive legal outcomes for those individuals who successfully complete the program.</p>
Key Component 5	<p style="text-align: center;">Informed Choice</p> <p>Defendants understand program requirements before agreeing to participate in mental health court. They are provided legal counsel to inform this decision and subsequent decisions about program involvement. Procedures exist in mental health court to address concerns about a defendant’s competency whenever they arise.</p>
Key Component 6	<p style="text-align: center;">Treatment Supports and Services</p> <p>Mental health courts connect participants to comprehensive and individualized treatment services in community. They strive to use and increase availability of treatment and services that are evidence-based.</p>
Key Component 7	<p style="text-align: center;">Confidentiality</p> <p>Health and legal information should be shared so it protects potential participants’ confidentiality rights as mental health consumers and constitutional rights as defendants. Information gathered as part of participants’ court-ordered treatment should be safeguarded in case participants go back to traditional court processing.</p>
Key Component 8	<p style="text-align: center;">Court Team</p> <p>Team of criminal justice and mental health staff and treatment providers receives special, ongoing training and helps mental health court participants achieve treatment and criminal justice goals by reviewing and revising court process.</p>
Key Component 9	<p style="text-align: center;">Monitoring Adherence to Court Requirements</p> <p>Criminal justice and mental health staff collaboratively monitor participants’ adherence to court conditions, offer individualized graduated incentives and sanctions, and modify treatment to promote public safety and participants’ recovery.</p>
Key Component 10	<p style="text-align: center;">Sustainability</p> <p>Data are collected and analyzed to demonstrate the impact of mental health court, its performance is assessed periodically, court processes are institutionalized, and support for court in the community is cultivated and expanded.</p>

TEAM MEMBER RULES

The following are a list of rules for problem-solving court team members:

- Maintain, recognize, respect and value the distinct roles of each individual member of the team. Team members shall maintain a collaborative environment utilizing professional judgment and rendering candid advice on how to best meet treatment goals.
- Information discussed during court staffing meetings and court sessions should be held in confidence. Client sensitive information will be presented confidentially at the bench to minimize exposure in court.
- Participants (i.e., interested parties) shall not be transported in personal vehicles for any reason (except those designated by role).
- Relationships may not be established with any active program participant. Non-program functions* may not be attended with any active program participant (e.g., family events, birthday parties, etc.). **Appointments (such as medical, mental health, dental and/or financial) relating to participation in a problem-solving court program shall not apply.*
- Display professionalism and courtesy to all participants and fellow team members. Team members shall discourage unprofessional or unethical advances from participants and/or participant family members and should report the same to the problem-solving court team (e.g., receiving gifts, services, etc.).
- Information pertaining to participant non-compliance/program removal only will be shared with other treatment agencies when it is deemed clinically appropriate.

INCENTIVES AND SANCTIONS

Incentives

Rewards will be recommended by the problem-solving court team and granted at the judge's discretion to support treatment as positive reinforcement of program accomplishments. These may include but are not limited to:

- Call early on the docket
- Less frequent court hearings
- In court encouragement and recognition
- Travel privileges out of county or out of state
- Community service hours in lieu of court fees
- GED/college courses in lieu of court fees
- Early termination of probation/supervision
- Formal graduation and a certificate/token of completion
- Other incentives the court deems appropriate

Sanctions

Failure to comply with problem-solving court elements will result in court-ordered sanctions.

These may include but are not limited to:

- Additional community service hours
- Written assignment
- Admonishment from the judge
- Curfew
- No contact orders
- Increased court appearances
- Increased frequency of random drug screens
- Extended probation
- Incarceration
- Reinstatement of criminal proceedings
- Termination from the problem-solving court program
- Other sanctions the court deems appropriate

DRUG TESTING

Problem-solving court participants are expected to be alcohol and drug free. The court monitors compliance with this requirement by frequent, random observed drug tests. Drug testing is essential to the problem-solving court program by providing a framework for accountability to gauge treatment progress. Drug tests confirm abstinence and demonstrate compliance, serving as the foundation for incentives and sanctions along the path to graduation. All participants must follow court-ordered drug testing, which is typically completed at treatment program locations or the Department of Corrections (DOC). If a participant is found noncompliant or positive via drug testing, the court may order confirmation testing.

Table 4 provides a non-exhaustive list of prohibited substances and medications. A drug court specialist should be consulted for further clarification. Aside from illegal drugs and alcohol (in any form), participants are prohibited from using certain prescription drugs and are required to have all prescriptions disclosed prior to purchasing or ingesting.

Any and all "designer drugs" that can be purchased legally or illegally are strictly prohibited. Any and all "smoking mixtures" (other than adult-only products specifically designated to contain only tobacco) are strictly prohibited. Any and all products sold or marketed under false pretenses with the warning "not for human consumption" are strictly prohibited. In addition, using and/or being in possession of any alternative or "replacement" drugs such as Methadone and/or Suboxone, as well as any substance intended to replace an otherwise illegal substance, is strictly prohibited unless prior court approval has been granted.

Table 4: Examples of Prohibited Substances and Medications

Examples of Prohibited Substances and Medication Classifications	Examples of substances and medications prohibited in all Problem-Solving Court Programs
Alcohol (In Any Form)	Alcoholic beverages, all medications containing alcohol (cough syrups/liquid-caps such as Nyquil and Robitussin), energy drinks containing alcohol
Amphetamine	Adderall, Adipost, Benzedrine, Dexedrine, Dexatrim, Didrex, Phentermine (Adipex), Preludin, Ritalin, Speed, Vyvanse, White, all medications containing Pseudoephedrine (Alka-Seltzer Cold, Claritin-D, Comtrex Acute, Contac Cold Maximum, Dayquil/Nyquil, Dristan Maximum, Kolephrin, Maxiflu, Robitussin, Sinarest, Sudafed, Tavist Allergy, Tylenol Cold or Allergy) <i>Note: There are non-pseudoephedrine "D" versions available in almost all of these</i>
Barbiturate	Allobarbitol, Barbitol, Butalbitol (Fiorinal), Phenobarbitol (Luminal)
Benzodiazepine	Alprazolam (Xanax, Niravam), Clonazepam (Clonopin), Chlordiazepoxide (Librium), Diazepam (Valium), Flunirazepam (Rohypnol), Lorazepam (Ativan), Oxaprozin (Daypro), Oxazepam (Serax)
Cocaine	Big C, Crack, Powder, Rock, Snow
Dextromethorphan "DM"	Cold medications such as Alka Seltzer Cold, Coricidin, Dayquil, Dimetapp, Nyquil, Robitussin, Sudafed, Triaminic, Tylenol Cold, Vicks 44. <i>Note: There are non-dextromethorphan "DM" versions available of almost all of these</i>
Hallucinogens	Dimethyltryptamine (DMT), Ecstasy, Ketamine, LSD, Mushrooms, PCP, Tryptamine
Methamphetamine	Black Beauties, Chalk, Crank, Crystal, Glass, Ice, Meth, Tweak, Uppers
Miscellaneous Substances	Appetite suppressants - most are prohibited - Buprenorphine (Buprenex, Subutex, Suboxone), Caffeine Pills, Meperidine (Demerol), Fentanyl (Actiq, Duragesic), Inhalants, Kratom, Methadone, Propoxyphene (Darvocet, Darvon), Steroids, Soma, Xyrem (GBH), and all synthetic substances (e.g., Spice, K2). <i>Note: This list includes anything labeled "Not for Human Consumption"</i>
Opiate	Codeine (cough meds, Tylenol 3), Heroin, Hydrocodone (Lortab, Loracet, Norco, Vicodin, Vicoprofen), Hydromorphone (Dilaudid), Morphine
Oxycodone	Oxycodone (Oxycontin, Percodan, Percocet, Roxicet, Roxycodone)
THC (Marijuana)	Blunt, Bud, Dope, Grass, Herb, Joint, Mary Jane, Pot, Reefer, Roach, Weed, Edibles, CBD oil, Wax, medical marijuana, and other forms of THC

DRUG PRETRIAL INTERVENTION COURT OVERVIEW

Drug Pretrial Intervention (DPTI) court is designed to treat and assist those individuals whose drug and alcohol problems have resulted in being charged with their first non-violent felony. In June 1992, Chief Judge F. Dennis Alvarez began the first ever drug court, Drug Pretrial Intervention court in Tampa, Florida. An entire felony division, Division W, or the drug pretrial intervention division, was established for such offenders. However, the court program has not ever turned away a defendant due to limited space, with multiple treatment providers the court is able to provide services for anyone in need. The Administrative Office of the Court employs drug court specialists in this division. Also, the Department of Corrections has assigned full time probation officers (including one Spanish speaking probation officer) to this specific division.

The DPTI court program information can be found at the following website:

<http://www.fljud13.org/CourtPrograms/DrugCourtPrograms/DrugPretrialIntervention.aspx>

TEAM MEMBERS

The following is a list of the team members for drug pre-trial intervention court and related responsibilities: The National Drug Court Institute (NDCI) has identified nine core competencies that provide a foundation for defining participant roles:

- Participate fully as a problem-solving court team member, committing to the program and its mission and goals and work as full partners to ensure their success
- Advocate for effective incentives and sanctions for program compliance or lack thereof
- Knowledgeable of addiction, alcoholism and pharmacology and applies this knowledge in order to respond to compliance in a therapeutically appropriate manner
- Knowledgeable of gender, age, and cultural issues that may impact participant's success
- Initiate planning process by bringing together necessary agencies and stakeholders to evaluate current court processes and procedures
- Become a program advocate by utilizing community leadership role to create interest in and develop support for the program
- Effectively lead the team to develop all the protocols and procedures of the program
- Aware of the impact that substance abuse has on the court system, the lives of the offenders and their families and the community at large
- Contribute to education about efficacy of problem-solving courts

Drug Court Judge: The focus and direction of the problem-solving court is provided through the effective leadership of the judge. The judge will be responsible for maintaining a non-adversarial atmosphere within the court and is the leader of the problem-solving court team.

Drug Court Specialists: Court administration provides case management and oversight via drug court specialists. Responsibilities include (1) screening participants and providing options to judge; (2) providing case management to participants; (3) liaising with treatment providers and all community partners to ensure services are being provided; (4) providing updates at both staffings and court sessions; and (5) collaborating with stakeholders in order to identify lines of communication, continuity of care and effectiveness.

Public Defender's Office: The public defender's office is tasked with representing clients by protecting their due process rights and advocating for case resolutions that are in the clients' best interests. The public defender's role and duties include: (1) advocates for treatment while protecting the client's constitutional and statutory rights, (2) ensures due process rights are protected, (3) advocates for incentives, ensures sanctions are applied as appropriate, (4) monitors compliance with DPTI program rules and requirements, (5) requests and advocates for graduation from DPTI, (6) shares information, while protecting attorney-client privilege with DPTI team members as appropriate, and (7) protects confidential information and does not disclose confidential information to persons outside of the treatment team and defense team.¹

State Attorney's Office (SAO): The state attorney is tasked with protecting and enforcing public safety, advocating for the client's interests, and holding the clients' accountable for their obligations in the program. The state attorney's roles and duties include: (1) advocating for treatment while protecting the client's constitutional rights and statutory rights, (2) ensuring due process, (3) advocating for incentives or sanctions as appropriate and ensuring sanctions are applied fairly among DPTI clients, (4) monitoring compliance with DPTI program rules and requirements, (5) requesting and advocating for graduation, (6) sharing information with DPTI team members as appropriate, and (7) protecting confidential treatment information by not disclosing confidential information to persons outside of the treatment team.

Department of Corrections (DOC): The role of the probation officer is to engage in community supervision of the participant thus reinforcing the rules and policies of the problem-

¹Limited exceptions may exist. Determined by local rules, MOU and Federal and State Rules protecting recipients of alcohol and drug treatment. See *Ethical Considerations for Attorneys and Judges in Drug Court*, National Drug Court Institute.

solving court, and provides updates/progress reports to the court for review at staffing. A DOC probation officer attends court and provides information to the judge about participant's court-ordered probation.

Treatment Providers: Treatment providers assign dedicated, trained representatives to liaise with the adult drug court team. They also provide services in a timely manner. The treatment counselors, who may not attend staffing and court sessions on a regular basis, provide reports to drug court specialists pertaining to treatment compliance for participants. They prepare individual treatment plans and provide group and individual therapy sessions based on identified participants based on participant needs.

ELIGIBILITY CRITERIA

The following criteria must be met by eligible defendants:

- Has a substance abuse problem
- Currently charge with a nonviolent felony
- Has not been previously convicted of a felony
- Wishes to participate in the drug court model
- Does not contest the criminal charges

At arraignment or disposition, the presiding judge will verify that all cases meet the eligibility criteria. If any case does not meet the eligibility criteria for this drug court division, the judge will direct the Clerk to transfer the case to a standard division for disposition.

Determined eligible defendants will either: (a) decide to contest the charges; (b) decide to participate in the drug court model; or (c) request more time to decide whether to contest the charges or to participate in the drug court model.

Contest Charges. The judge will direct the clerk to transfer the case to a standard division for disposition.

Participate in the Drug Court Model. The defendant must enter a guilty plea and then be set for sentencing.

Request More Time for Decision. The judge may set a subsequent date to accept a plea. The subsequent date should be no more than 21 days from the date of arraignment, absent good cause shown. During this period, no pre-trial motions will be heard other than motions for pre-trial release or bond reductions. If at a subsequent court date, the defendant may choose to either:

- **Not Guilty Plea and Transfer of Case.** The judge will direct the Clerk to transfer the case to a standard division for disposition.

- **Guilty Plea and Participation in the Drug Court Model.** The defendant must enter a guilty plea and be set for sentencing.

SCREENING REFERRAL PROCESS

Drug court staff meet with potential participants for the admission screening procedure. At the time of disposition, each defendant is evaluated in the courtroom by a drug court specialist who identifies options for the judge regarding drug treatment services. The judge determines requirements for supervised probation which may include regular urine drug testing, support group attendance, etc. Each participant in the program is supervised by the lead treatment provider and expected to attend regular case reviews before the judge.

COURT PHASES

The *Florida Adult Drug Court Best Practice Standards* indicate that problem-solving courts have significantly better outcomes when they have a clearly defined phase structure and concrete behavioral requirements for advancement through the phases. The purpose of phase progression is to reward participants for their accomplishments and identify behavior expectations at each phase. Therefore, phase advancement should be predicated on the achievement of clinically important milestones, marking substantial progress towards recovery. Phase advancement should not be based simply on the length of time that participants have been enrolled in the program. Each problem-solving court will subscribe to a phase process listed below. Each phase consists of specified treatment objectives, therapeutic and rehabilitative activities and specific requirements for advancement into the next phase.

Please note that DPTI court has not adopted court phases at this time but a subcommittee identified from the oversight committee will be working on this key component in the next year.

COURT STAFFINGS

According to the *Florida Adult Drug Court Best Practice Standards*, court staffings are necessary to review participant progress, develop a plan to improve outcomes, and prepare for status hearings. All participants may not be discussed at each staffing; however, staffings are held frequently enough to ensure the team has an opportunity to consider the needs of each case. Docket size may necessitate the discussion of only non-compliant or difficult cases. By all team members discussing these cases together, a unified plan can be agreed upon before the court docket. **Please note that DPTI court has not fully adopted best practices for court staffings at this time but a subcommittee identified from the oversight committee will be working on this component in the next year.**

Consistent team member attendance at staffings is associated with significantly better outcomes. The staffings are presumptively closed and discussions are not transcribed or recorded; the meeting is not open to the public or to participants unless the court determines that a participant may attend to discuss a specific matter. Contested matters must be addressed and resolved in open court. The court team is encouraged to include participants in staffings when clinically indicated or necessary to protect a participant from serious harm resulting from public disclosure of highly sensitive treatment information.

At a minimum, the following data elements are required by all problem-solving court team members to appraise participant progress and compliance or noncompliance with the conditions of drug court:

- Assessment results pertaining to a participant's eligibility for problem-solving court and treatment and supervision needs
- Attendance at scheduled appointments
- Drug and alcohol test results, including efforts to defraud or invalidate said tests
- Attainment of treatment plan goals, such as completion of a required counseling regimen
- Evidence of symptom resolution, such as reductions in drug cravings or withdrawal symptoms
- Evidence of treatment-related attitudinal improvements, such as increased insight or motivation for change
- Attainment of court phase requirements, such as obtaining and maintaining employment or enrolling in an educational program
- Compliance with electronic monitoring, home curfews, travel limitations and geographic or association restrictions
- Adherence to legally prescribed and authorized medically assisted treatments
- Procurement of unauthorized prescriptions for addictive or intoxicating medications
- Commission of or arrests for new offenses
- Menacing, threatening, or disruptive behavior directed at staff members, participants or other persons

TREATMENT PROGRESS REPORTING PROCEDURE

Drug court specialists will provide a list of participants to treatment counselors in advance of staffing to allow timely progress report preparation. Prior to each staffing the treatment counselor will prepare and submit a drug court progress report electronically to the drug court specialist on each of their participants who appear on the docket. The progress report shall address at a minimum the following questions:

1. What is the participant's attendance status?
2. How do you describe the participant's level of participation?
3. Describe participant's progress in terms of individual treatment plan goal accomplishments such as "stages of change".
4. Describe drug test results including dates of positive or missed UA screens.
5. What special issues, if any, does the Court need to address?
6. What is projected discharge date and aftercare plan?

DISCHARGE PROCEDURES

Successful Discharge

Drug court specialists may recommend participants for graduation when they have met all court and treatment requirements. The DPTI team will meet to consider the merits of the recommendation to graduate and must agree that the participant has sufficiently integrated the necessary information to support long-term recovery. Certificates of Completion or other incentives may be handed out during the final court date. Once the participant graduates from the program, the state announces that the case is dismissed.

Unsuccessful Discharge

The drug court team may recommend to the judge that the participant be terminated from drug court due to non-compliance with requirements or conditions. The participant must be informed of the potential termination from drug court and allowed to have their attorney appear on their behalf when the issue is considered, unless the participant has absconded. The participant may elect to have a formal termination hearing on the record. After full consideration, the judge will enter a termination order or allow the participant to continue with the program. If a termination order is entered, the participant will be required to pay all outstanding treatment court fees. The judge will set a bond amount and return the case to the referral court for further proceedings. When a participant has absconded for a period of time, the judge may enter an order of termination, require the participant to pay all outstanding treatment court fees and return the case to the referral court for further proceedings.

Administrative Discharge

If a participant cannot complete drug court, through no fault of his/her own, the participant

may be administratively discharged. Examples of reasons for an administrative discharge include: mental illness, medical necessity and death. The judge may enter an order of termination, require the participant to pay all outstanding treatment court fees and return the case to the referral court for further proceedings.

Appendix A: Treatment Providers Affiliated with Problem Solving Courts

AGENCY	PHONE NUMBER/ADDRESS	SERVICES PROVIDED	REFERRAL PROCESS/CONTACTS
ACTS	<p>Main: 813-246-4899 Fax: 813-246-5119 4612 N. 56th St., Tampa, FL 33610</p> <p>Tarpon Springs Main: 727-935-0295 Fax: 727-934-0123 3575 Old Keystone Rd., Tarpon Springs, FL 34689</p> <p>Juvenile Addictions Receiving Facility Ph: (813) 933-4446</p> <p>Detox: 813-367-2317 Fax: 813-239-8261</p>	<p>-Outpatient detox -Outpatient -Residential -Drug Screening - Adult detox services - Juvenile detox services - Medication Assisted Treatment - Recovery Support - Aftercare</p>	<p>Contact Ryan Ingram for Medical Records requests, ph. 813-246-4899 f. 813-246-5119, ringram@actsfl.org</p> <p>-Pamela Troutman-Clinical Director, 813-239-8568 X 439 -Intake Specialist: Tyra Davis, 813-239-8568</p> <p>-Pinellas Domiciliary Tarpon Springs Clinical Supervisor: Nicole Brenneman nbrenneman@actsfl.org</p> <p>JARF: Richard Gibbons (813) 933-4446 rgibbons@actsfl.org</p>
Baycare Behavioral Health	<p>Outpatient: 2727 W. Dr. Martin Luther King Jr. Blvd Suite 640 Office: (813) 872-7582 Fax: (813) 873-9591</p> <p>Community Recovery Center: 6040 Indiana Avenue New Port Richey, Florida 34653 Phone: 727-841-4475 Fax: 727-841-4478</p>	<p>-Outpatient treatment -Residential treatment</p>	<p>Outpatient: 813-428-6181 for Behavioral Health Registration</p> <p>CRC: Diane Linder 727-841-4475 x 36 Diane.linder@baycare.org</p>
Crisis Center of Tampa Bay	<p>One Crisis Center Plaza Tampa, FL 33613 Main: 813-964-1964 Fax: 813-868-3996</p>	<p>-211 Contact Center/Veterans Support Line -Trauma Therapy -Strengthening Families Program</p>	<p>Veterans Hotline: Mordecai Dixon 813-964-1964 ext 3418, mdixon@crisiscenter.com</p> <p>Trauma Therapy, fill out referral form in JOIN and fax to 813-868-3996</p> <p>Strengthening Families: Trina Kucera 813-530-6017, tkucera@crisiscenter.com</p>
DACCO	<p>Main Campus: 4422 E. Columbus Dr. Tampa, FL 33605</p> <p>Outpatient: 1463 Oakfield Dr. Suite 113 Brandon, FL 33511</p> <p>Main: 813-384-4000 Fax: 813-612-9373</p>	<p>-Prevention Services -Specialty Services:</p> <ul style="list-style-type: none"> • HIV/AIDS • Vocational • Day Care • Acupuncture • Tobacco Cessation • Supportive Housing <p>-Outpatient/IOP Services -Residential Services -Day Treatment -Supportive Recovery</p>	<p>Contact Assessment & Referrals Debra Thomas Program Manager Assessment and Referral Office: 813-384-4115 Cell: 813-254-2771 Fax: 813-740-0823 debrat@dacco.org</p>

AGENCY	PHONE NUMBER/ADDRESS	SERVICES PROVIDED	REFERRAL PROCESS/CONTACTS
Florida Center/Avon Park	100 W. College Dr. Avon Park, FL 3858 Ph: (863) 452-3858 Fax:(813) 452-3863	Residential co-occurring mental health and substance abuse treatment	Twila Titus 863-452-3858 x 150 ttitus@TCHSonline.org
Gracepoint	Main Campus: 2212 E. Henry Ave. Tampa, FL 33610 Main: 813-272-2882		Gracepointwellness.org
MacDill AFB			Mental Health Clinic Main: 813-827-9170 Fax:813-828-6868 SOCOM Clinic Main: 813-827-9870 Fax:813-828-4436
Operation Par	Administration: 6655 66 th Street North Pinellas Park, 33781 Ph: 727-545-7564 Fax: 727-545-7584 Outpatient: 13800 66 th St. North Largo, Florida 33774 PAR Academy 6720 54 th Ave. N St. Petersburg, Florida 33709	Residential services Outpatient: services Juvenile residential services Medication Assisted treatment Detoxification	Call Access Center at:1-888-727-6398
Phoenix House	Residential: 15681 US HWY 301 Citra, FL 32113 Ph: 352-595-50000 Outpatient: 510 Vonderburg Dr. Suite #301 Brandon, FL 33511 Ph: (813) 881-1000	Residential Services Outpatient Services	Call 813-881-1000 x 1 for Welcome Center
Salvation Army	Tampa Adult Rehabilitation Center 13815 Salvation Army Ln. Ph: 813-972-0471 Fax: 813-971-0792	Residential treatment services for males	Intake Coordinator: Todd Quick Todd.quick@uss.salvationarmy.org 813-972-0471 x 59074
Tampa Crossroads	Administration and Non-Residential: 5109 N. Nebraska Ave. Tampa, FL 33603 Ph: 813-238-8557 x 200 Residential: 202 W. Columbus Dr. Tampa, FL 33602 Ph: 813-238-8557 x400	-Residential treatment for women -Intensive outpatient and outpatient treatment -Transitional Housing - Permanent Housing -Housing resources for Veterans -Job development and coaching	Residential: 813-238-8557 x 400 Non-Residential: 813-238-8557 x 200 Veterans: 813-238-8557 x 300 Clinical Director, Gwen Green ggreen@tampacrossroads.com 813-238-8557 x 202

AGENCY	PHONE NUMBER/ADDRESS	SERVICES PROVIDED	REFERRAL PROCESS/CONTACTS
VA: James A. Haley SUDS program	10770 N. 46th Street, Suite E-160, Tampa, FL 33617 (813) 631-7123	- Intensive Outpatient - Standard Outpatient - Referral to Choice	Walk-in SUDS evaluations are available daily at 8 am. With any questions or concerns please contact VJO Erika Lucas or VJO Tito Williams Tito Williams 813-442-9355 Tito.williams@va.gov Erika Lucas 813-450-7219 Erika.lucas@va.gov
Westcare	<p>(727) 502-0188 1735 Dr. M.L.K. Jr. Street S. St. Petersburg, FL</p> <p>8800 49th St. N., Suite 403 Pinellas Park, FL 33782 Ph: (727) 490-6762 Fax: (727) 541-3993</p> <p>1801 5th Ave. N St. Pete FL 33713 Ph: (727) 823-7811 Fax: (727) 823-7717 Intake office EXT 221 or 233</p> <p>1735 Dr. MLK Jr. St. S. St. Pete 33705 (727) 502-0188 Fax: (727) 502-9380 Intake EXT: 243</p> <p>2510 Central Ave St. Pete FL 33712 Ph: (727) 490-6769 Fax: (727) 321-7968 PTT Program Cell phone: (727) 560-8649</p>	<p>- Residential treatment for women and men Non-secure (short-term) 7 to 8 months Secure (long-term) 13 to 18 months</p> <p>- Outpatient</p> <p>-A Turning Point</p> <p>-Mustard Seed</p> <p>Mustard Seed Veterans community Living</p>	<p>Veronica Almy Wright Phone (727) 502-0188 x237 Fax (727) 802-0805 Email veronica.wright@westcare.com</p> <p>Elizabeth Darby Elizabeth.darby@westcare.com</p> <p>Katrina Tucker Katrina.tucker@westcare.com</p> <p>Angela Drayton Angela.drayton@westcare.com</p> <p>Angela Drayton Angela.drayton@westcare.com</p>

Appendix B: Drug Pre-Trial Intervention Court Administrative Order

IN THE THIRTEENTH JUDICIAL CIRCUIT HILLSBOROUGH COUNTY, FLORIDA

ADMINISTRATIVE ORDER S-2017-037 (Supersedes Administrative Order S-2010-013)

DRUG COURT

Section 397.334, Florida Statutes, codifies the Florida Legislature's intent to implement treatment-based drug court programs in each judicial circuit. In 1992, the Thirteenth Judicial Circuit first established the Drug Court division to serve as a specialized division of the Circuit Criminal Division.

It is necessary for the proper and efficient operation of the Thirteenth Judicial Circuit to update the administrative provisions in Drug Court.

By the power vested in the chief judge under article V, section 2(d), Florida Constitution; section 43.26, Florida Statutes; and Florida Rules of Judicial Administration 2.215(b)(2) and 2.215(e)(3), it is ORDERED:

I. Purpose

The purpose of the drug court division is to provide a non-adversarial forum, in addition to the pre-trial intervention program, whereby an individual who meets the eligibility criteria and voluntarily chooses to avail himself or herself of the benefits of drug court treatment may do so by pleading guilty and entering into a drug court treatment program as determined by the judge presiding in the drug court division.

2. Definitions

For purposes of this administrative order, the following terms have the following meanings:

A. *Co-defendant case* means two or more defendants charged, in the same case, with at least one drug offense (e.g. constructive possession of a controlled substance).

B. *Community sanctions* means probation, drug offender probation, community control, or community control II.

C. *Drug court model* means a case management system for drug offenses in which court-supervised drug treatment is used rather than litigation (i.e., no

trials or pre-trial motions). The treatment may include, but is not limited to, community sanctions, varying levels of drug treatment, and incarceration in accordance with the Criminal Punishment Code. The drug court model applies a protocol which includes the use of in-court substance abuse evaluators to aid the presiding judge in fashioning appropriate substance abuse treatment, conditions of community sanctions, and case reviews every four to six weeks as needed.

D. *Drug offense* means a felony violation of chapter 893, Florida Statutes.

E. *Drug treatment* means outpatient, intensive day-night, residential, or in-jail treatment programs.

F. *Felony* has the same meaning as provided in section 775.08(1), Florida Statutes.

G. *Forcible felony* means any felony listed in section 776.08, Florida Statutes.

H. *Guilty plea* means a plea of guilty to a criminal charge pursuant to Florida Rules of Criminal Procedure 3.170(a) and 3.172(d) in which the defendant either acknowledges his or her guilt or acknowledges that he or she feels the plea to be in his or her best interest.

I. *Non-violent felony* means a third degree felony violation of chapter 810 or any other felony offense that is not a forcible felony as defined in section 776.08, Florida Statutes.

J. *Standard division* means any of the following divisions of the Circuit Criminal Division: "A," "B," "C," "D," "E," "F," "G," and "I."

K. *Violent felony* means any forcible felony except a third degree felony violation of chapter 810.

L. *VOP* means violation of probation, violation of drug offender probation, violation of community control, or violation of community control II.

3. Drug Court Division "W" – Pre-Trial Intervention Program

Drug Court Division "W" serves as the pre-trial intervention program division. To be eligible for voluntary admission into Drug Court Division "W," a defendant must meet the following criteria: (a) be charged with a nonviolent

felony; (b) identified as having a substance abuse problem; and (c) not previously been convicted of a felony.

Defendants will be required to enter into an agreement for treatment, but will not be required to enter a plea of guilty or *nolo contendere* to the charges that caused them to be assigned to drug court. Successful completion of the drug treatment program will result in dismissal of the charge(s) against the defendant. *See* § 948.08, Fla. Stat.

4. Drug Court Division “Y” – Post-adjudicatory Drug Court

Drug Court Division “Y” serves as the post-adjudicatory treatment-based drug court division handling eligible drug offenses. These drug offenses will be strictly managed by the presiding judge according to the traditional drug court model. Drug Court Division “Y” will handle all eligible cases through final disposition, including VOPs.

A. Initial Case Filings

All third degree felony drug offenses and all second degree felony purchase or possession of a controlled substance cases, except co-defendant cases, along with any accompanying non-violent felony offenses and misdemeanor offenses, will initially be filed in Drug Court Division “Y.” All other drug offenses, including all co-defendant cases, will be filed in a standard division according to the assignment provisions in Administrative Order S-2017-009 (*Circuit Criminal Division*) or successor administrative orders.

B. Drug Court Division “Y” Eligibility

In order for a case to remain pending in Drug Court Division “Y” after the initial filing, the following criteria must be met: (a) the defendant has a substance abuse problem; (b) the defendant’s Criminal Punishment Code scoresheet total sentence points are 60 points or fewer; (c) the current offense is a nonviolent felony; (d) the defendant wishes to participate in the drug court model; and (e) the defendant does not wish in any way to contest the criminal charges.

C. Transfer to Drug Court Division “W”

Upon motion of either party or the court’s own motion, if a defendant is eligible for the drug court pre-trial intervention program, the defendant’s case(s) will be transferred from Drug Court Division “Y” to Drug Court Division “W.”

5. Arraignments in Drug Court Division “Y”

A. Information Provided to Defendant

At arraignment, all police reports and Criminal Punishment Code scoresheets, including relevant prior criminal history, will be provided by the Office of the State Attorney to the defendant to afford the defendant a meaningful opportunity to discuss options with counsel, to be verified for eligibility, and to be evaluated by a court substance abuse evaluator if desired.

B. Verification of Eligibility

At arraignment, the presiding judge in Drug Court Division “Y” will verify that all cases meet the eligibility criteria for Drug Court Division “Y.” If any case does not meet the eligibility criteria for Drug Court Division “Y,” the judge will direct the clerk to transfer the case to a standard division for disposition.

C. Defendant’s Decision

For those cases meeting the eligibility criteria for Drug Court Division “Y,” at arraignment the defendant will either: (a) decide to contest the charges; (b) decide to participate in the drug court model; or (c) request more time to decide whether to contest the charges or to participate in the drug court model.

i. Decision to Contest Charges

If, at arraignment, the defendant decides to contest the charges, then the presiding judge in Drug Court Division “Y” will direct the clerk to transfer the case to a standard division for disposition.

ii. Decision to Participate in the Drug Court Model

If, at arraignment, the defendant decides to participate in the drug court model, the defendant must enter a guilty plea and then be set for sentencing.

iii. Request More Time for Decision

If, at arraignment, the defendant requests more time to decide whether to contest the charges or to participate in the drug court model, then the presiding judge in Drug Court Division “Y” may set a subsequent date to accept a plea. The subsequent date should be no more than 21 days from the date of arraignment, absent good cause shown. During this period, no pre-trial motions will be heard other than motions for pre-trial release or bond reductions.

a. Not Guilty Plea & Transfer of Case

If, on the subsequent plea date, the defendant decides to contest any charge and plead not guilty, then the judge will direct the clerk to transfer the case to a standard division for disposition.

b. Guilty Plea & Participation in the Drug Court Model

If, on the subsequent plea date, the defendant decides to participate in the drug court model, the defendant must enter a plea of guilty and then be set for sentencing.

6. Sentencing in Drug Court Division “Y”

The defendant’s sentence will be imposed by the presiding judge in Drug Court Division “Y” after the defendant is assessed at sentencing by a court substance abuse evaluator to determine appropriate treatment options. Except as provided in section 7 of this administrative order, any defendant sentenced in Drug Court Division “Y” will remain in Drug Court Division “Y” until final disposition of the case.

7. VOP in Drug Court Division “Y”

A. Technical VOP

If a VOP arises as a result of any violation that does not involve a new criminal charge, the presiding judge in Drug Court Division “Y” will handle the VOP in accordance with the drug court model to final disposition.

B. Violent Felony Charges

If a VOP arises as a result of a new violent felony charge, the new charge and corresponding VOP will be transferred from Drug Court Division “Y” to a standard division for disposition.

C. Non-violent Felony Charges

If a VOP arises as a result of a new non-violent felony charge, the presiding judge in Drug Court Division “Y” will handle the VOP in accordance with the drug court model unless the defendant wishes to contest the new substantive charge. If the defendant decides to contest only the new substantive charge, then the presiding judge in Drug Court Division “Y” will direct the clerk to transfer the new substantive charge and corresponding VOP to a standard division for disposition. Otherwise, all VOPs will remain in Drug Court Division “Y.”

8. Hearing for Entry or Denial into Drug Court Division “Y”

If there is an issue or question as to the defendant’s eligibility for drug court in accordance with the law (i.e. substance abuse problem), or if the state does not recommend a defendant for admission to drug court under section 397.34, Florida Statutes, the court may hold a hearing to determine if the defendant will be allowed to enter or remain in Drug Court Division “Y.”

9. Co-Defendant Cases

All co-defendant cases will be initially filed in a standard division according to the assignment provisions in Administrative Order S-2017-009 (*Circuit Criminal Division*) or successor administrative orders.

A. Discretionary Transfer to Drug Court Division “Y”

Any defendant in a co-defendant case may be transferred to Drug Court Division “Y” by the presiding judge in a standard division if such defendant meets the following criteria: (a) the defendant’s Criminal Punishment Code scoresheet total sentence points are 60 points or fewer; (b) the current offense is a nonviolent felony; (c) the defendant wishes to participate in the drug court model; and (d) the defendant does not wish in any way to contest the criminal charges. If the presiding judge in a standard division decides to allow an eligible defendant in a co-defendant case to be transferred to Drug Court Division “Y,” the case will be transferred to Drug Court Division “Y” for acceptance of a guilty plea and sentencing.

B. Disposition of Remaining Cases in Standard Division

Any defendant in a co-defendant case who (a) does not have a Criminal Punishment Code scoresheet with total sentence points of 60 points or fewer; (b) has a violent felony offense pending; (c) does not wish to participate in the drug court model; or (d) desires in any way to contest the criminal charges will not be eligible for transfer to Drug Court Division “Y” and will remain in the standard division for disposition.

10. Transfer of Case from another Division to Drug Court Division “Y”

A. Transfers Generally

If at any time the presiding judge in another division determines that (a) the defendant’s Criminal Punishment Code scoresheet total sentence points are 60 points or fewer; (b) the current offense is a nonviolent felony; (c) the defendant wishes to participate in the drug court model; and (d) the defendant does not wish in any way to contest the criminal charges, the judge may transfer the case to Drug Court Division “Y,” subject to the limitation in section 11 of this administrative order. If a judge decides to transfer such a case in which a defendant has not entered a plea or has not been adjudicated for the pending criminal charge, the presiding judge will direct the clerk to transfer the case to Drug Court Division “Y” for acceptance of a guilty plea and sentencing. The clerk will place the case on the Drug Court Division docket within seven days.

B. Transfer of Eligible Departure Sentences

For offenses committed on or after July 1, 2009, if a defendant's offense is a non-violent felony, the defendant scores 60 points or fewer on the Criminal Punishment Code scoresheet, and the presiding judge determines that the defendant is amenable to the services of a post-adjudicatory treatment-based drug court, the judge may transfer the case to Drug Court Division "Y," subject to the limitation in section 11 of this administrative order. If a judge decides to transfer such a case to Drug Court Division "Y," the case will be transferred to Drug Court Division "Y" for acceptance of a guilty plea and sentencing.

C. Transfer of Eligible VOP cases from Division "K"

For any VOP case pending in Circuit Criminal Division "K" in which the underlying offense was committed on or after July 1, 2009, the judge may transfer the VOP to Drug Court Division "Y," subject to the limitation in section 11 of this administrative order, if (a) a defendant's underlying offense is a non-violent felony; (b) the defendant scores 60 points or fewer on the Criminal Punishment Code scoresheet including violation points; and (c) the presiding judge in Division "K" determines that the defendant is amenable to the services of a post-adjudicatory treatment-based drug court. If the Division "K" judge decides to transfer such a case to Drug Court Division "Y," the case will be transferred to Drug Court Division "Y" for acceptance of an admission and sentencing or modification.

D. Transfer of Certain Probation-Sentenced Cases

If the presiding judge in another division determines that a defendant who has been sentenced to probation for a non-violent felony is particularly amenable to the services of a post-adjudicatory treatment-based drug court, the defendant scores 60 points or fewer on the Criminal Punishment Code scoresheet, and the presiding judge in Drug Court Division "Y" consents to the transfer of the case, the presiding judge in the other division may transfer the supervision of probation to Drug Court Division "Y."

11. Transfer of Case from Drug Court Division "Y" to a Standard Division

If a case is transferred from Drug Court Division "Y" to a standard division for any reason, such case will not be transferred back to Drug Court Division "Y" except with the consent of the presiding judge in Drug Court Division "Y."

All cases transferred from Drug Court Division "Y" to a standard division will be reassigned as provided in Administrative Order S-2017-009 (*Circuit Criminal Division*) or successor administrative orders, unless the case originated

from a standard division. If a case is transferred into Drug Court Division “Y” from a standard division (*see* sections 9 and 10 of this administrative order) and is subsequently transferred out of Drug Court Division “Y,” such case will be reassigned back to the standard division from which the case originated.

For any case transferred from Drug Court Division “Y,” the clerk will provide notification in open court of the standard division to which the case is reassigned.

12. Acting County Court Judge

The judge assigned to Drug Court Division “Y” is appointed as an acting county court judge for the purpose of presiding over misdemeanor charges as specified in this administrative order.

13. Drug Court Oversight Committee

The Drug Court Oversight Committee will continue to oversee drug court operations in order to ensure proper training of court personnel and correct implementation of the drug court model. The committee is charged with recommending strategies to maintain the quality and effectiveness of drug court and to ensure that the many treatment options now available for drug court remain viable. The Drug Court Oversight Committee is comprised of representatives from the Public Defender’s Office, State Attorney’s Office, Administrative Office of the Courts, Community Corrections’ Office of the Department of Corrections, Hillsborough County Sheriff’s Office, treatment providers, and judicial representatives as determined by the chief judge.

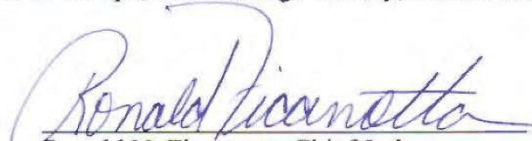
14. Previous Administrative Order Superseded

This administrative order supersedes Administrative Order S-2010-013 (*Drug Court*).

15. Effective Date

This administrative order is effective June 1, 2017.

ENTERED in Tampa, Hillsborough County, Florida on May 30, 2017.


Ronald N. Ficarrotta, Chief Judge

Original to: Pat Frank, Clerk of the Circuit Court
Copy to: All Circuit Criminal Division Judges
Gina Justice, Court Administrator
Julianne Holt, Public Defender
Andrew H. Warren, State Attorney
Corlis Campbell, Department of Corrections