

PROBLEM-SOLVING COURTS JUVENILE DRUG COURT

Policy and Procedural Manual

Administrative Office of the Courts

Thirteenth Judicial Circuit Tampa, Florida



JULIANNE M. HOLT PUBLIC DEFENDER 13TH JUDICIAL CIRCUIT



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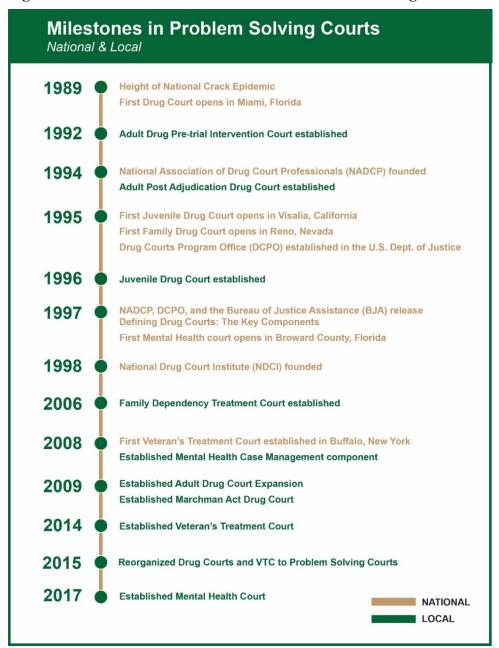
OVERVIEW

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	Planning and Administration 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.		
	Target Population		
Key Component 2	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.		
	•		
Key Component 3	Timely Participant Identification and Linkage to Services Participants are identified, referred, and accepted into mental health courts, then linked to community-based service providers as quickly as possible.		
	Terms of Participation		
	Terms of participation are clear, promote public safety, facilitate defendant's		
Key Component 4	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.		
Informed Choice			
Key Component 5	Defendants understand program requirements before agreeing to participate in mental health court. They are provided legal counsel to inform this decision and		
Key Component 3	subsequent decisions about program involvement. Procedures exist in mental health		
	court to address concerns about a defendant's competency whenever they arise.		
	Treatment Supports and Services		
Key Component 6	Mental health courts connect participants to comprehensive and individualized		
ixey component o	treatment services in community. They strive to use and increase availability of		
	treatment and services that are evidence-based.		
Confidentiality			
Key Component 7	Health and legal information should be shared so it protects potential participants'		
Key Component /	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.		
	Court Team		
Key Component 8	Team of criminal justice and mental health staff and treatment providers receives		
Key Component 8	special, ongoing training and helps mental health court participants achieve		
	treatment and criminal justice goals by reviewing and revising court process.		
	Monitoring Adherence to Court Requirements		
Key Component 9	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.		
	Sustainability Data are collected and analyzed to demonstrate the impact of mental health court, i		
Key Component 10	performance is assessed periodically, court processes are institutionalized, and		
	support for court in the community is cultivated and expanded.		

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
	<u>Note</u> : There are non-pseudoephedrine "D" versions available in almost all of these
Barbiturate	Allobarbital, Barbital, Butalbital (Fiorinal), Phenobarbital (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. Note: There are non-dextromethorphan "DM" versions available of almost all of these
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). <u>Note</u> : This list includes anything labeled "Not for Human Consumption"
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

JUVENILE DRUG COURT OVERVIEW

Juvenile drug court (JDC) is designed to treat and assist those youths whose drug and alcohol problems have resulted in being charged with a drug offense. In February 1996, Chief Judge F. Dennis Alvarez began the first juvenile drug court in the state of Florida located in Hillsborough County. This court is a diversion program that targets youth who have committed drug-related offenses or acknowledge a history of substance abuse upon arrest for nonviolent offenses. The program is typically offered to youth who are first or second time offenders and is a minimum six to twelve month program in which participants are required to attend substance abuse counseling, submit to random drug screens, attend school or obtain a general equivalency diploma (GED), follow court-ordered sanctions, and comply with any other orders issued by the court. The end goal is to have the legal charges dismissed, the plea vacated and the petitions to be closed upon completion of the program. The Administrative Office of the Court employs drug court specialists in this division. The juvenile drug court program information can be found at the following website:

http://www.fljud13.org/CourtPrograms/DrugCourtPrograms/JuvenileDrugCourt.aspx

TEAM MEMBERS

The following is a list of the team members for JDC 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 works 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 JDC 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 JDC team.

Drug Court Specialist: 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 JDC program rules and requirements, (5) requests and advocates for graduation from JDC, (6) shares information, while protecting attorney-client privilege with JDC 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 client' 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 client, (4) monitoring compliance with JDC program rules and requirements, (5) requesting and advocating for graduation, (6) sharing information with JDC team members as appropriate, and (7) protecting confidential treatment information by not disclosing confidential information to persons outside of the treatment team.

Treatment Providers: Treatment providers assign dedicated, trained representatives to liaise with the adult drug court team. They also provide needed services in a timely manner. The

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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.

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 participant needs.

ELIGIBILITY CRITERIA

The following eligibility criteria must be met by the eligible defendants:

- Arrested or given a civil citation for a drug offense or admitted substance abuse issue at time of arrest
- Considered a juvenile (17 and under) at the time of arrest but can be 18 when entering the drug court program
- Plead guilty to the criminal charges (but are not sentenced)
- Voluntarily accepts being part of the JDC program

SCREENING REFERRAL PROCESS

There are two ways that a youth can be referred to the JDC program:

Juvenile Assessment Center (JAC): If a youth is arrested, they are transferred to the juvenile assessment center (JAC) and a case manager conducts a comprehensive assessment. At that time, the case manager may recommend JDC to the state attorney's office. The youth is given a court date to appear before a juvenile delinquency judge. At this time, the state attorney's office may be offered JDC and can opt in to the program. If they accept the JDC program, the case is then transferred to JDC and the youth and his/her family are given information about orientation and JDC arraignment. At orientation, the youth and his/her family are given a thorough overview of the JDC program. Upon completion of orientation, the youth and his/her family attend JDC arraignment and formally accept the program in front of the judge.

Juvenile Arrest Avoidance Program (JAAP): if a youth fails to complete the JAAP (citation) program, they may have the opportunity to bring their charge(s) directly into JDC. The youth will now have the opportunity to have their newly filed charges dismissed.

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 JDC 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.

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 treatment 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 JDC 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. Upon successful completion of the program, the participant's criminal charges are dismissed.

Unsuccessful Discharge

The JDC 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 JDC 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 when formal termination hearings are conducted, that information will be made available to the judge.

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. 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 JDC, 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	SERVICES	REFERRAL PROCESS/CONTACTS
	NUMBER/ADDRESS	PROVIDED	
ACTS	Main: 813-246-4899 Fax: 813-246-5119 4612 N. 56 th St., Tampa, FL 33610 Tarpon Springs Main: 727-935-0295 Fax: 727-934-0123 3575 Old Keystone Rd., Tarpon Springs, FL 34689 Juvenile Addictions Receiving Facility Ph: (813) 933-4446	-Outpatient detox -Outpatient -Residential -Drug Screening - Adult detox services - Juvenile detox services - Medication Assisted Treatment - Recovery Support - Aftercare	Contact Ryan Ingram for Medical Records requests, ph. 813-246-4899 f. 813-246-5119, ringram@actsfl.org -Pamela Troutman-Clinical Director, 813-239-8568 X 439 -Intake Specialist: Tyra Davis, 813-239-8568 -Pinellas Domiciliary Tarpon Springs Clinical Supervisor: Nicole Brenneman nbrenneman@actsfl.org JARF: Richard Gibbons (813) 933-4446 rgibbons@actsfl.org
	Detox: 813-367-2317 Fax: 813-239-8261		
Baycare Behavioral Health	Outpatient: 2727 W. Dr. Martin Luther King Jr. Blvd Suite 640 Office: (813) 872-7582 Fax: (813) 873-9591	-Outpatient treatment -Residential treatment	Outpatient: 813-428-6181 for Behavioral Health Registration
	Community Recovery Center: 6040 Indiana Avenue New Port Richey, Florida 34653 Phone: 727-841-4475 Fax: 727-841-4478		CRC: Diane Linder 727-841-4475 x 36 Diane.linder@baycare.org
Crisis Center of Tampa Bay	One Crisis Center Plaza Tampa, FL 33613 Main: 813-964-1964 Fax: 813-868-3996	-211 Contact Center/Veterans Support Line -Trauma Therapy -Strengthening Families Program	Veterans Hotline: Mordecai Dixon 813-964-1964 ext 3418, mdixon@crisiscenter.com Trauma Therapy, fill out referral form in JOIN and fax to 813-868-3996 Strengthening Families: Trina Kucera 813-530-6017, tkucera@crisiscenter.com
DACCO	Main Campus: 4422 E. Columbus Dr. Tampa, FL 33605 Outpatient: 1463 Oakfield Dr. Suite 113 Brandon, FL 33511 Main: 813-384-4000 Fax: 813-612-9373	-Prevention Services -Specialty Services: • HIV/AIDS • Vocational • Day Care • Acupuncture • Tobacco Cessation • Supportive Housing -Outpatient/IOP Services -Residential Services -Day Treatment -Supportive Recovery	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

AGENCY	PHONE	SERVICES	REFERRAL PROCESS/CONTACTS
	NUMBER/ADDRESS	PROVIDED	
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		Gracepointwellness.org
MacDill AFB	Main: 813-272-2882		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	Residential services Outpatient: services Juvenile residential services Medication Assisted treatment Detoxification	Call Access Center at:1-888-727-6398
Phoenix House	St. Petersburg, Florida 33709 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 x 400	-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	SERVICES	REFERRAL PROCESS/CONTACTS
	NUMBER/ADDRESS	PROVIDED	
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 <u>Tito.williams@va.gov</u> Erika Lucas 813-450-7219 Erika.lucas@va.gov
Westcare	(727) 502-0188 1735 Dr. M.L.K. Jr. Street S. St. Petersburg, FL	- Residential treatment for women and men Non-secure (short-term) 7 to 8 months Secure (long-term) 13 to 18 months	Veronica Almy Wright Phone (727) 502-0188 x237 Fax (727) 802-0805 Email veronica.wright@westcare.com
	8800 49 th St. N., Suite 403 Pinellas Park, FL 33782 Ph: (727) 490-6762 Fax: (727) 541-3993	- Outpatient	Elizabeth Darby Elizabeth.darby@westcare.com
	1801 5 th Ave. N St. Pete FL 33713 Ph: (727) 823-7811 Fax: (727) 823-7717 Intake office EXT 221 or 233	-A Turning Point	Katrina Tucker Katrina.tucker@westcare.com
	1735 Dr. MLK Jr. St. S. St. Pete 33705 (727) 502-0188 Fax: (727) 502-9380 Intake EXT: 243	-Mustard Seed	Angela Drayton <u>Angela.drayton@westcare.com</u>
	2510 Central Ave St. Pete FL 33712 Ph: (727) 490-6769 Fax: (727) 321-7968 PTT Program Cell phone: (727) 560-8649	Mustard Seed Veterans community Living	Angela Drayton <u>Angela.drayton@westcare.com</u>

Appendix B: Adult Post-Adjudication Drug Court Administrative Order

IN THE THIRTEENTH JUDICIAL CIRCUIT HILLSBOROUGH COUNTY, FLORIDA

ADMINISTRATIVE ORDER S-2014-022 (Supersedes Administrative Order S-2014-016)

UNIFIED FAMILY COURT

In *In Re: Report of the Family Court Steering Committee*, 794 So. 2d 518 (Fla. 2001), the Florida Supreme Court endorsed the creation of a unified family court system in the circuit courts of Florida. The Court's concept of "one family, one judge" or "one family, one team" to coordinate multiple cases involving one family was expected to improve the resolution of disputes within the judicial system for children and families. Since 2001, this circuit has implemented various strategies to improve the resolution of disputes involving children and families.

In *In re Amendments to the Florida Rules of Judicial Administration and In re Amendments to the Florida Family Law Rules of Procedure*, 39 Fla. L. Weekly S25 (January 16, 2014), the Florida Supreme Court adopted Rule 12.003 which requires that all related family cases must be handled before one judge "unless impractical." Although the implementation of a "one family, one judge" approach may present challenges, we now implement the "one family, one judge" concept in accordance with the most recent decision of the Florida Supreme Court.

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

1. Unified Family Court Division

For purposes of this administrative order, "Unified Family Court Division" means any of the following divisions of the Thirteenth Judicial Circuit:

Subject Matter Division	Letter
Domestic Relations / Family Law	A
Domestic Relations / Family Law	В
Domestic Relations / Family Law	C
Domestic Relations / Family Law	D
Domestic Relations / Family Law	Е
Domestic Relations / Family Law	F

Domestic Relations / Family Law	I
Domestic Relations / Family Law (East)	R
Domestic Relations / Family Law (East)	T
Title IV-D Child Support	Y
Domestic Violence	G
Domestic Violence	Н
Domestic Violence (East)	S
Domestic Violence (East)	V
Juvenile Delinquency	A
Juvenile Delinquency	В
Juvenile Delinquency	F
Juvenile Drug Court	E
Juvenile Dependency	C
Juvenile Dependency	D
Juvenile Dependency	S
Independent Living Transition Services	I
Dependency Drug Court	J
Delinquency-Dependency Crossover	M
Dependency Specialty	V

2. Unified Family Court Cases

All judges assigned to Unified Family Court Divisions will preside over "family cases" involving a single family in accordance with this administrative order, including but not limited to: dissolution of marriage; annulment; support unconnected with dissolution of marriage; paternity; child support; UIFSA; custodial care of and access to children; proceedings for temporary or concurrent custody of minor children by extended family; adoption; name change; declaratory judgment actions related to premarital, marital, or postmarital agreements; civil domestic violence, repeat violence, dating violence, stalking, and sexual violence injunctions; juvenile dependency; termination of parental rights; juvenile delinquency; emancipation of a minor; CINS/FINS; truancy; and modification and enforcement of orders entered in these cases.

3. Notice of Related Cases Form

In accordance with Florida Rule of Judicial Administration 2.545(d), petitioners in all Unified Family Court Divisions, except the Domestic Relations / Family Law Divisions, must complete and file a Notice of Related Cases form in conformity with Florida Family Law Rules of Procedure Form 12.900(h) if any related cases are pending and known or reasonably ascertainable.

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Petitioners in the Domestic Relations / Family Law Divisions must complete and file a Notice of Related Cases form in conformity with Florida Family Law Rules of Procedure Form 12.900(h) even if there are no related cases.

In accordance with Rule 2.545(d)(4), the petitioner must file the Notice in each of the related cases that are currently open and pending with the court. The petitioner must serve the Notice on: (a) all other parties in each of the related cases; (b) the respective presiding division judges; and (c) the administrative judge of the Unified Family Court.

The Clerk of the Circuit Court ("clerk") will provide Notice of Related Cases forms and instructions for completion to all petitioners or their attorneys in all Unified Family Court Divisions.

4. Administrative Judge Duties

Upon service of a Notice of Related Cases form on the Administrative Judge of the Unified Family Court, the administrative judge will determine if it is practical to transfer or consolidate the related family cases. If the administrative judge determines that it is practical to transfer or consolidate two or more related family cases, the administrative judge will enter an order transferring or consolidating the related family cases and specifying which Unified Family Court Division will hear the cases. If the administrative judge determines that it is impractical to transfer or consolidate related family cases, the administrative judge will enter an order giving a reason for such determination.

The administrative judge of the Unified Family Court is the final arbiter on whether related family cases involving the same parties or children should be transferred or consolidated to one division.

The administrative judge of the Unified Family Court will be assisted in the judge's duties under this administrative order by the clerk and by the court's Case Management Unit.

5. Inconsistent Provisions of Other Administrative Orders

If any provisions of this administrative order are inconsistent with the provisions of any other administrative order, the provisions of this administrative order control.

6. Previous Administrative Order Superseded

This administrative order supersedes Administrative Order S-2014-016 (*Unified Family Court*).

7. Effective Date

This administrative order is effective April 1, 2014.

It is ORDERED in Tampa, Hillsborough County, Florida, on this day of March, 2014.

Manuel Menendez, Jr., Chief Judge

Original to: Pat Frank, Clerk of Court

Copy to: All Unified Family Court Division Judges

Hillsborough County Bar Association, Marital & Family Law Section