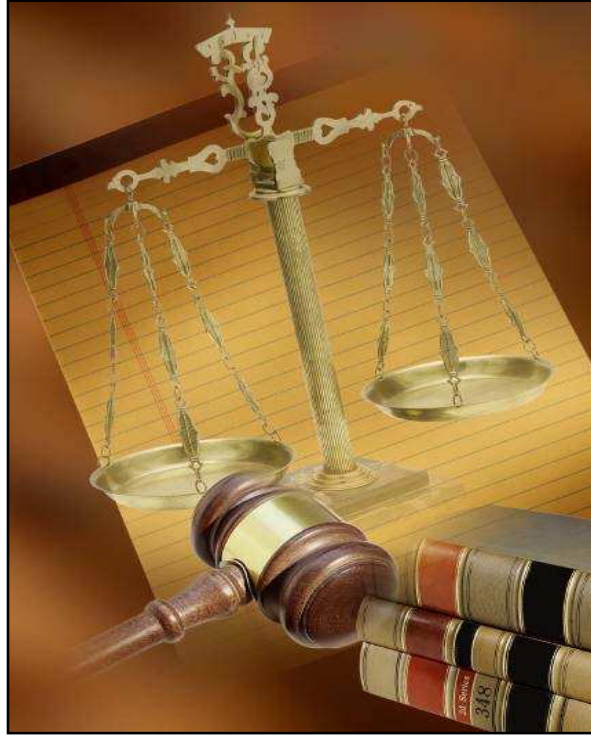


Juvenile Drug Court
Sample
Policies and Procedures

4th Judicial District Court



JUVENILE DRUG COURT

POLICIES AND PROCEDURES MANUAL

“There is no greater insight into the future than recognizing when we save our children, we save our selves.”--Margaret Mead, Anthropologist

TABLE OF CONTENTS

Mission.....	4
Goals.....	4
Target Population.....	4
Program Objectives.....	5
I. Introduction.....	5
II. Code of Conduct	6
III. Program Description.....	7
IV. Juvenile Drug Court Team.....	8
A. Individual Roles and Responsibilities.....	8
1. Drug Court Judge.....	8
2. District Attorney.....	8
3. Defense Attorney.....	9
4. Juvenile Probation Officers	9
5. JDC Treatment Staff	10
6. Law Enforcement.....	10
7. Program Director.....	11
B. Advisory Committee.....	11
C. Confidentiality.....	12
D. Professional Development	12
V. Operational Procedures for JDC.....	12
A. Referral and Screening	12
B. Program Orientation.....	14
1. Admission Orientation.....	14
2. Program In- Processing.....	14
VI. Program Components.....	15
A. Treatment.....	15
1. Family Counseling.....	15
2. Individual Counseling.....	16
3. Participant Groups.....	16
4a. Topic Group – Substance Abuse	16
4b. Topic Group – Life Skills.....	17
5. Moral Reconciliation Therapy (MRT) Group.....	18
6. Phase Requirements.....	21
B. Drug and Alcohol Testing	25
C. Surveillance.....	26
D. Case Staffing and Team Reporting.....	26

E. Judicial Progress Review & Court Rules.....	27
F. Sanctions and Incentives	28
G. Transportation Support.....	31
H. Program Completion and Termination.....	32
<u>VII. Counselor Licensure.....</u>	<u>32</u>
<u>VIII. Tracking Progress.....</u>	<u>32</u>
<u>IX. Program Administration.....</u>	<u>33</u>
A. Court Orders.....	33
B. Administrative Reporting.....	33
C. Contractual Agreement for Services.....	33
D. Performance Measures.....	34
E. Out-processing.....	34
<u>X. Summary.....</u>	<u>34</u>
<u>Appendix A. Traditional Program Tracks.....</u>	<u>35</u>

Mission

The mission of the 4th Judicial District Juvenile Drug Court is to stop the abuse of alcohol and other drugs and related criminal activity through extensive drug treatment, supervision and rehabilitation program.

Goals

The goals of the 4th Judicial District Drug Court are:

- Promote public safety while protecting the community and ensuring the protection of the participant's legal due process rights.
- To provide juveniles and their families the structure and support they need to avoid further criminal behavior and restore individuals to dignity and sober, healthy, productive living and become contributing members of our community.
- Strive to reduce recidivism
- In addition, the program will represent itself as a viable alternative sentencing option for the court, and promote on-going drug court team development.

Achievement of these goals will require a team effort by all players - judges and court staff, prosecutors, defense counsel, probation authorities, law enforcement and treatment providers.

Target Population

The 4th Judicial District Juvenile Drug Court (JDC) program targets youth between the ages of 13 and 17 (may turn 18 during the program this will be determined on a case by case basis) who have multiple referrals and/or adjudications for a variety of delinquent offenses, but often with one or more of the referrals involving substances. Those within the target population have or are in danger of having an unsuccessful period of probation that can be substantially attributed to the use of substances. Many identify either marijuana or alcohol as their primary drug of choice and use them multiple times each week. Many will also have used methamphetamines, cocaine, inhalants, or other drugs.

Program Objectives

The JDC Treatment Team will accomplish its goals via four measurable and achievable objectives that are:

- Increase the number of program participants demonstrating reduced drug use as measured by consistently clean drug screens, beginning within four (4) months of entry into the program and for one year following graduation from the program;
- Increase the number of program participants demonstrating no arrests for additional delinquent acts, or adult criminal acts (if age 18 or older), during the period of the program and for up to three years following graduation from the program;
- Improvement of individual educational performance within six (6) months of the beginning of the program as measured by increased grade point average; and,
- Enhancement of participant's family environment as assessed through parental/guardian involvement in family treatment component.
- Reduce the risk of relapse by teaching the participants the skills necessary to succeed in the areas of family, school, employment and the community.

Each member of the JDC team will be responsible for actions and initiatives that contribute to one or more of these objectives.

I. Introduction

This manual describes the policies and procedures of the Juvenile Drug Court for the Fourth Judicial District Court in San Miguel and Mora Counties. It details a eight-month program, including aftercare for juveniles who are court ordered to attend. This is a dynamic process: as the Juvenile Drug Court develops and expands, more additions and necessary changes will be updated in this manual.

- Roles and responsibilities of the Juvenile Drug Court Team;
- Procedures for referring, screening, and in-processing Juvenile Drug Court participants; and,
- Treatment for participants and their families.

The 4th Judicial District JDC is a dynamic organization that will strive to continuously improve program performance and capacity. As such, this manual is a living document that is revised when changes arise in the structure and environment of the program.

II. Code of Conduct

While a participant in the Juvenile Drug Court, you are expected to comply with all the terms of your probation and these Drug Court rules:

- You may not buy, own, or possess any firearms, ammunition, or other deadly weapons.
- You may not act in a manner that creates a risk of harm to yourself or others.
- You may not buy, consume, use, or possess alcoholic beverages or other products containing alcohol such as mouthwash, Nyquil, etc.
- Participants may not procure, possess, or consume any illegal or controlled substances, or paraphernalia.
- You must obtain approval from your Probation Officer prior to using any over-the-counter medications, nutritional supplements, or anything that may interfere with drug testing (i.e. poppy seeds).
- You must notify your Probation Officer of any prescribed medication you are taking.
- You may not use, possess, or consume any prescription medications unless they are specifically prescribed for you.
- You may not associate with known gang members, felons, persons who have been convicted of substance related offenses, persons under supervision of the Court, or others prohibited by your Probation Officer, except if specifically permitted by the Judge.
- You may not possess or display items (e.g. posters, artwork, signs, etc.) related to gangs, drugs, alcohol, sex, or criminal behaviors.
- You may not involve yourself in gang activities nor present yourself in a way that could convey gang affiliation.
- You may not acquire any new body piercings, or tattoos.
- You must ensure that your parents and the program's surveillance officers know your whereabouts and can locate you at all times.
- You must make yourself available for all required drug/alcohol tests.
- You must comply with any established curfew.
- You must comply with all program requirements, orders of the Court, and the directives of your probation officer, parents, guardians, and custodians.

- You must work hard to meet program requirements and accomplish program objectives.
- You may not wear clothing that is suggestive, revealing, or is associated with drugs, gangs, alcohol, sex, or criminal activity, or is not generally intended for wear outside of the home.
- All pagers, cell phones, and electronic entertainment devices must remain off during all JDC activities unless approved by JDC Staff.
- You must address Drug Court staff and fellow participants respectfully.
- You may not have visitors during JDC activities (does not include Court) unless the JDC Team member running the activity gives you permission.
- You may not use tobacco during any Drug Court Activities.

III. Program Description

JDC provides a community-based, multi-disciplinary, court-centered approach to the treatment of juveniles that enter the justice system due to behaviors substantially related to the abuse of substances. JDC incorporates members of the judicial process (judges, prosecutors, and public defenders), law enforcement representatives, juvenile probation officers, counseling and treatment staff, educators, and community leaders into an integrated network that manages the progress and rehabilitation of participants. Court-ordered treatment addresses the mental, physical, and emotional health of juveniles admitted to the program

Following acceptance, the individual and his or her parents, contracts with the court to undergo treatment and participate in all facets of the program. Program components include:

- Individual, group, and family counseling (i.e. MRT, parenting, life skills, and substance abuse issues); and case management
- Completion of approved individual improvement activities (such as: extra-curricular activities, educational pursuits, individual counseling);
- Intensive Supervision and Drug Testing; and
- Judicial Reviews.

Based on each participant's level of progress, the court will impose either sanctions or award incentives. Relapse is seen as a predictable part of substance abuse recovery. Relapse is identified through drug testing and is addressed in treatment sessions and court ordered sanctions. Sanctions or incentives imposed by the Drug Court Judge are intended to discourage or reward behavior, as appropriate.

IV. Juvenile Drug Court Team

Three groups comprise the 4th Judicial District's JDC team:

- The Screening Committee is comprised of the JDC Judge, Children's Court Attorney, Defense Attorney, Juvenile Probation Officer, JDC Treatment Staff, the JDC Program Director, and others persons or agencies deemed appropriate by the JDC Judge. This group is responsible for the selection of appropriate Drug Court participants from those who are referred.
- The Treatment Team includes the JDC Judge, Children's Court Attorney, Defense Attorney, Juvenile Probation, JDC Treatment Staff, and the JDC Program Director. This group oversees program compliance, progress, and administration.
- The JDC Advisory Committee is comprised of both Treatment Team members, Law Enforcement, and representatives from the community.

A. Individual Roles and Responsibilities

1. Drug Court Judge

The 4th Judicial District JDC is presided over by a District Court Judge. The judge serves as the ultimate authority for the Juvenile Drug Court and performs a variety of functions that include:

- Presiding over the participant screening process and JDC Case Staffings;
- Presiding over Judicial Reviews;
- Administering Drug Court sanctions and incentives; and,
- Chairing the JDC Advisory Committee and Policy and Procedures meetings.

2. District Attorney

The District Attorney, or designee, represents the issues for the State of New Mexico. Responsibilities include:

- Assisting with the identification of candidates for referral to the JDC;
- Serving as a member of the Screening Committee;
- Serving as a member of the JDC Treatment Team;
- Participating in Case Staffings and Judicial Reviews;
- Serving as a principal member of the JDC Advisory Committee & has a right to Vote on Policy and Procedures; and,
- Acting as the designated Children's Court Attorney in all matters related to the JDC.
- Serve as the Drug Court Judge Designee when the District Judge is not available.

3. Defense Attorney

The Defense Attorney is the primary advocate for juveniles referred to the JDC. Responsibilities include:

- Assisting with the identification of candidates for referral to the JDC;
- Serving as a member of Screening Committee;
- Providing legal counsel to JDC participants;
- Advocating on behalf of participants during judicial and administrative procedures;
- Serving as a member of the JDC Treatment Team;
- Participating in Case Staffings and Judicial Reviews;
- Assisting participants prepare for appearances before the Drug Court Judge (the attorney appears with participants during their presentation to the judge);
- Serving as a principal member of the JDC Advisory Committee & has a right to Vote on Policy and Procedures.
- Serve as the Drug Court Judge Designee when the District Judge is not available.

4. Juvenile Probation Officers

The assigned Juvenile Probation Officer is primarily responsible for ensuring each participant's compliance with the terms and conditions of their probation and acts as the primary liaison between the Juvenile Probation Office and the JDC. Responsibilities include:

- Assisting with the identification of candidates for referral to the JDC;
- Referring eligible juvenile offenders for drug court screening;
- Acting as a member of the Screening Committee;
- Monitoring juveniles admitted to the JDC program for compliance with both Drug Court and probationary requirements;
- Serving as a member of the JDC Treatment Team;
- Serving as a principal member of the JDC Advisory Committee & one person from each agency has a right to vote on Policy and Procedures; and,
- Participating in Case Staffings and Judicial Reviews.

5. JDC Treatment Staff

The JDC Treatment Staff is comprised of licensed mental health professionals or approved interns who are supervised in accordance with New Mexico Law and the rules of the designated licensing authority. JDC Treatment Staff are responsible for all aspects of treatment within the context of the JDC Program. Responsibilities include:

- Conducting screening and assessments of individuals referred to the JDC program;
- Serving as a member of the Screening Committee;
- Orienting families on the treatment component of the JDC program;
- Assisting in the placement of participants and families with available community resources such as: Community Based Services, Residential Treatment, individual and family counseling, etc.;
- Serving as a principal member of the JDC Treatment Team;
- Serving as a principal member of the JDC Advisory Committee one person from each agency has a right to vote on Policy and Procedures;
- Facilitating individual, group and family therapy for participants and their parents or guardians;
- Developing individual and family treatment plans;
- Reporting on participant and family progress toward treatment goals;
- Participating in Case Staffings and Judicial Reviews; and,
- Maintaining documentation on the treatment progress of each JDC client and family in accordance with professional and program standards.

6. Law Enforcement

Officers from numerous local law enforcement agencies to include the Las Vegas Police Department, New Mexico State Police, San Miguel County Sheriff's Office, Mora County Sheriff's Office support the JDC Program. Assigned officers perform the following functions:

- Assisting with participant monitoring;
- Assisting with arrangements and supervision of community service opportunities;
- Leading physical training sessions;
- Evaluating and reporting on levels of individual participation during the physical training sessions, community service projects and other structured activities;
- Serving as members of the JDC Advisory Committees & one person from each agency has a right to vote on Policy and Procedures.

7. Program Director

The JDC Program Director is primarily responsible for the day-to-day administration of the program under the direction of the District Judge and Court Administer. Additionally, the Program Director assists JDC Judges in coordinating the efforts of all other JDC team members. Responsibilities include:

- Developing and monitoring JDC budgets and maintaining compliance with required fiscal standards;
- Monitoring treatment and contract providers for compliance with contractual and JDC policy provisions;
- Assisting the JDC Judges in monitoring overall program effectiveness;
- Documenting and reporting program status and performance to funding sources;
- Identifying and pursuing resources (both financial and non-financial) in support of the JDC Program;
- Marketing the JDC program to community representatives;
- Serving as a member of the Screening Committee;
- Staffing and participating in Case Staffings and Judicial Reviews;
- Staffing and serving as a principal member of the JDC Advisory Committee one person from each agency has a right to vote on Policy and Procedures.;
- Directing and supervising Surveillance Officers; and,
- Directing and supervising JDC Administrative Staff.

B. Advisory Committee

The JDC Advisory Committee is an administrative body of ad hoc advisors that oversee program operations through a number of activities to include:

- Developing the policies and procedures that govern the JDC operational process;
- Assisting in raising money for incentives;
- Serving as subject matter experts on educational, policy, and community issues relevant to the JDC program.

Membership on the committee includes representatives of the local education system, the business community, other community agencies, and members of the JDC Treatment Team. The JDC program office maintains the minutes and membership of JDC Advisory Committee. The Committee typically meets monthly. The policy and procedure team is made up of eleven members therefore, a quorum of 6 must be present to begin the meeting and a quorum of 5 must be present to vote.

C. Confidentiality

Each member of the JDC Treatment Team is required to read and sign a Memorandum of Understanding (MOU) Among Drug Court Team Members with regard to the Confidentiality of Drug Court Participant Records and Information at each drug court. The MOU defines applicable federal confidentiality regulations for JDC program proceedings.

D. Professional Development

A key factor in maintaining proficiency is training. As appropriate, JDC Team members will be sponsored for professional development through both regional entities (i.e., Children Youth and Families Department (CYFD), the Administrative Office of the Courts (AOC), the New Mexico Drug Court Association (NMADCP), and national entities, such as the National Association for Drug Court Professionals (NADCP) and National Drug Court Institute(NDCI).

V. Operational Procedures for JDC

A. Referral and Screening

Participant referral to the JDC Program may be originated by several sources including:

- The District Judge;
- The Juvenile Probation Office;
- Defense Counsel for the Juvenile; and,
- The Children's Court Attorney.

Every child who admits to committing a delinquent act will under go an assessment and will be screened for the JDC program. Please also see the New Mexico Judiciary Drug Court Standards.

However, if a child has been charged with violent offense and/or sex offense, the child will not be considered into the Drug Court program. A violent offender is defined as a person who has been adjudicated of a delinquent act (felony level) during the course of which:

- The person carried, possessed, or used a firearm or other dangerous weapons; or,
- The person used force against another person; or,
- Death, or serious bodily injury, occurred to any person, without regard to whether any of the circumstances described above is an element of the offense or conduct of which or for which the person is charged or convicted.

Re-entry participants will be screened and assessed on a case by case basis. Participants charged with a non violent delinquent offense, however has a violent history will be screened and assessed on a case by case basis. (Violent Felony -the delinquent act deemed a felony if committed by an adult).

If the individual satisfies these preliminary admissions criteria, the referring entity makes a recommendation to the appropriate Children's Court Judge for such an order. If the

judge accepts the recommendation, it becomes part of the juvenile's probation agreement and the juvenile parents, or legal guardians are ordered to undergo an assessment for admission to the JDC program. In advance of the assessment, the Juvenile Probation Officer prepares a referral packet that includes the following:

- Release of Information;
- Criminal Information Form;
- Chronological Offense Record;
- Current Petition/Petition to Revoke;
- Judgment and Disposition;
- Probation Agreement;
- Most Recent G.P.A./Grade Report;
- Baseline Assessment (updated within past 6 months);
- UA Results (when available);
- Past Mental Health Evaluations (when available); and,
- Health Insurance/Medicaid Information (if covered).

In order to determine whether the juvenile in consideration is clinically appropriate for the JDC program, the JDC Treatment Staff and JDC Program Director shall, within 7 business days of receiving a referral from the Juvenile Probation Office, arrange to conduct an assessment and administer a series of diagnostic tests including the Substance Abuse Subtle Screening Inventory (SASSI), the Children's Functional Assessment Rating Scale (CFARS), and other appropriate instruments. If the JDC Treatment Staff is unable to arrange the assessment due to the unavailability of the client or parents, they shall notify the referring JPPO who shall assist in arranging the appointment with the juvenile and his or her parents. Additionally, if the court has ordered a forensic or psychological evaluation, Administrative Support Staff will facilitate the scheduling of that evaluation. Results of the assessment are presented to the Screening Committee for review.

In consultation with the Screening Committee and after reviewing the assessment and forensic evaluation (when available), the JDC Judge makes a determination of program eligibility that results in the acceptance of the juvenile into the JDC program. Once that determination is made, documentation relating to results of the screening process will be incorporated into the JDC record. Prior to admission to the program, the juvenile their parents or guardians are given an opportunity to observe a Judicial Review. If they are unable to understand any aspect of the JDC program, additional program information may be requested before final admission.

If it is determined that the juvenile is not appropriate for program participation, a letter will be submitted to the JPPO indicating that the juvenile was not accepted for participation in the program.

B. Program Orientation

1. Admission Orientation

Following acceptance to the program, the juvenile, the parents, or guardians will review, sign, and receive the following documents:

- Drug Court Contracts and Request for Admission;
- Consent for Drug Screening and Analysis;
- JDC Consent to Treatment and Limits of Confidentiality;
- Drug Court Activity Calendar; and
- Participant & Parent Handbooks.

It is the responsibility of the Defense Attorney along with the JDC program Director & Treatment provider to ensure that each document is fully reviewed and understood. The contracts are then presented to the Drug Court Judge whose signature on the contract constitutes final admission to the program.

Admission to the JDC program in no manner negates court ordered obligations for restitution. JDC Team members will assist participants in devising a plan for paying fines and making restitution that take into account an individuals ability to pay.

2. Program In-Processing

The juvenile, the parents, or guardians complete the Screening/Intake Form and meet with members of the JDC Team responsible for the various program components. Team members provide participants and parents information on program requirements and expectations to include:

- Program Phases;
- MRT;
- Individual, Family and Group Treatment;
- Educational Support;
- Surveillance;
- Drug Testing;
- Court Appearances;
- Incentives;
- Sanctions; and
- Aftercare.

Also during this meeting, the juvenile's insurance coverage or Medicaid eligibility is determined. Insurance information along with the completed physical form will be maintained in each juvenile's file. Following completion of program in-processing, JDC Treatment Staff begin to develop the client's and family's treatment plan. The treatment plan must be in place within 30 days of acceptance. The treatment plan must be reviewed and updated at least every three months.

VI. Program Components

The JDC program employs a combination of approaches as part of the JDC's overall treatment process. Each is designed to increase the participant's ability to live a substance-free lifestyle and improve each family's ability to provide appropriate support to their child.

A. Treatment

The JDC Parent Support Program provides parents and other involved adults support and encouragement, and serves to better equip caregivers and custodians to support their child while they make the changes needed to live a substance free and productive lifestyle. Parents and other involved adults are encouraged to provide frequent feedback on their experiences within the JDC directly to the Treatment Team and/or their child's judge. In addition, parents and other involved adults are encouraged to comment on the quality and helpfulness of each session. The JDC's Parent Support Program consists of two elements:

- **Orientation:** The program begins with an orientation session with a case manager and JDC Program Director, the participant, the participant's parent(s)/guardian(s) are provided with a contract, a Participant handbook, and a monthly schedules of their required activities. The case manager explains the following: goals and objectives of program participation, required program services, rules and expectations, abstinence policy, confidentiality, mandated reporting to the Court and intensive supervision by the JDC Judge and Team. This session provides the parents with an overview of Program requirements and orient them to available family support services. Additionally, the family's portion of the treatment plan is also developed and their appropriateness for participation in group sessions is determined.
- **Questions by the juveniles and/or their parents /guardians** are answered and reinforced during the orientation period. They also attend their first drug court review where the judge introduces them to all of the individuals who will be involved with them during the program (i.e. Treatment team. The judge will also explain the sanctions and incentives that are part of this Juvenile Drug Court Program. See phase requirements for parent responsibilities.

1. Family Counseling

At various points throughout the program, families of clients participate in family counseling. These sessions help families cope with changes and challenges from a positive perspective. Family sessions also help the family to provide support to their child while in the program and after graduation.

2. Individual Counseling

Throughout the program, including Aftercare, clients participate in individual counseling sessions. Individual sessions help participants make better use of the group experience and provide them an opportunity to address personal issues and progress. The goal of

treatment is positive social interactions and to promote an increase in the confidence and skills they possess in order to navigate the complicated adult world in which they will soon find themselves.

3. Participant Groups

Participants participate in two different groups. Participants work with the treatment staff on issues surrounding substance abuse /life skills and on MRT.

4 a. Topic Group – Substance Abuse

The Substance Abuse component addresses the following topics:

- **How did I get here?**
 - Life and Addiction History
 - When Did I Begin?
 - What led me here?

- **Warning Signs**
 - Identifying Triggers
 - Evaluating High Risk Situations

- **Healing the Hurts**
 - Mending Fences
 - Regaining Trust
 - Starting Over

- **Sobriety Checklist**
 - Why Stay Sober? Evaluating the Pros/Cons of use when things are hard.
 - Who are my safe people?
 - Who should I avoid?
 - Where else can I find help?

- **Making Plans**
 - Identifying Potential Barriers
 - Self-defeating vs. Effective Thoughts
 - Challenging Justification

- **Changing My Playground**
 - Choices
 - Can I stay on track and keep my old friends?
 - Establishing new relationships
- **Old Habits Die Hard**
 - Changing/Eliminating old patterns
 - Positive Self-Talk/Mantras
 - Practice-Practice-Practice

- **Maintenance**
 - Staying On Track
 - Recognizing Recurring Triggers
 - When to Ask for Help

4 b. Topic Group – Life Skills

The Life Skills component addresses the following topics:

- **Assertiveness/Positive Communication**
 - Conflict Resolution
 - Thought Stopping
 - Impulse Control
- **Trust/Intimacy**
 - Vulnerability
 - Barriers to Intimacy
- **Time Management**
 - Goal Setting
 - Delayed Gratification
 - Awareness
- **Self-Care**
 - Stress
 - Nutrition
 - Sleep
 - Hygiene
- **Healthy Relationships**
 - Family Roles/Dynamics
 - Sexism/Gender Roles and Expectations
 - What can you do when others around you can't/won't change?
 - Healthy vs. Unhealthy Emotions
- **Emotional Regulation**
 - Anger Management
 - Situation Appropriateness
 - Thought Stopping
 - Respecting Others' Emotions
 - Cognitive Distortion
 - Choices
 - Mood Management
- **Self-Esteem**
 - What Do I like About Me?
 - What Do I Dislike About Me?

- Everyone Has Roles – What is mine?
- **Coping Skills**
 - Grief/Loss
 - Unfairness

The second type of group is Moral Reconciliation Therapy (MRT®) developed by Drs. Robinson and Little. MRT® is closely integrated with the phase advancement and is described in detail below.

5. Moral Reconciliation Therapy (MRT®) Group/Program Phases

MRT ® groups incorporate cognitive therapy, motivational therapy, and behavioral modification, through the course of twelve progressive steps. The JDC Treatment Staff administers MRT® throughout phases until completion. Participants must complete all 12 MRT steps in order to graduate.

Step I: Honesty

During this step, participants begin to discuss dealing with difficulties and problems in their lives and taking control of their lives. An essential part of this is that the juveniles recognize that they are a source of problems in their lives. The “Pyramid of Life” exercise is completed. Honest, sincere statements must be made by participant, in front of the group about the role of alcohol, drugs, lies, cheating, jealousy, and other problems in their lives.

Step II: Trust

Participants make a choice to trust themselves and to trust in the program for help. They also choose to trust others in the same situation and have faith that they can overcome their problems. The “Shield and Life Mask” and “Life Wheel Exercises” are completed. Participants also recognize that there is, within oneself, a strong desire to better themselves. Participants also identify positive qualities in themselves and begin to trust that the program will help them.

Step III: Acceptance

Participants must become adaptable to situations and conditions in which they find themselves. They must come to understand that their beliefs often get in the way of happiness and that they have to learn how the world operates. The emphasis in this step is acceptance that all of one’s beliefs, attitudes, and habits are not right. To accomplish this step, participants must show the ability to accept the program’s concern, criticism, and the consequences resulting from actions without becoming argumentative. The “Worries, Wants, Needs” exercise is completed during this step.

Step IV: Awareness

Participants must fully assess their present life and become certain of all the things that comprise their life at the time of their admission to the program. The participant must become totally aware of the things that make up his/her life. Completion of the “Things in My Life” exercise illustrates the many activities included in daily life, family life, work, spirituality, recreation and relaxation, physical health and several other areas. This exercise is a way for participants to begin learning how to make priorities relating multiple aspects of life.

Step V: Healing Damaged Relationships

Participants must begin to repair the injury that they have caused to themselves and others by assessing each of the important relationships in their lives and then starting to work towards repairing them. The essence of this step is healing damaged relationships. This means taking full responsibility for their actions. The exercises “Best of Times/Worst of Times” and “Circle of Relationships” assists in identifying relationships that need healing, and outline important relationships in the participant’s life. Additionally, these exercises allow participants to identify specific people they have hurt, identify what occurred to damage that relationship, and to set a specific course of action to heal that relationship.

Step VI: Helping Others

The participant begins to help other people, especially those people who will give nothing in return. A minimum of ten hours of helping others is undertaken during this step. One-on-one discussions are conducted and documented with other members of the MRT® group in which the participant addresses specific questions relating to what brought them into the program. This step also serves to increase the trust and bonding within the group as they undergo treatment together. The last requirement of the step is to complete a “Trading Places” exercise where the participant identifies someone he/she admires, the admirable qualities of that person, and why he/she might like to have those qualities.

Step VII: Long-term Goals and Identity

Participants must make goals and act and think in accordance with those goals. The step stresses long-term goals and identity. Participants are familiarized with the importance of goal setting and how to initiate the process. Exercises are completed in which the participant is asked to define one, five, and ten year goals. Once those goals are defined, the participant is asked to devise an action plan that will facilitate the accomplishment of those goals.

Step VIII: Short-term Goals and Consistency

Participants learn to give up the idea of always being right about the way the world is and the way the world should be. In this step, the participant looks at short-term goals and

consistency. Participants are taught how to define action steps for reaching long-term goals. This step also requires completion of an action plan for reaching the one-year goals defined in Step VII.

Step IX: Commitment to Change

This step stresses the concept of never giving up; or, never conceding to failure. It stresses the idea of conceding and learning from mistakes. At this step, commitment to change is key. Fulfilling the step requires the participant to actively work on their individual action plan and not give up in achieving that plan. It is a review and redoing of Step VI, including another ten hours of helping others, additional one-on-one discussions with group members, and documentation that one has met the appropriate deadlines contained in the action plan.

Step X: Maintain Positive Change®

Participants are encouraged to recognize the negative, unethical attitudes, beliefs, and behaviors that they possess. Additionally, once those issues are recognized, the participant is encouraged to work systematically to eliminate them. This step emphasizes maintaining positive change. It requires patience, self-discipline, and self-insight. It is also at this point that the development of new attitudes, beliefs, and habits are beginning. To fulfill this step, an assessment of the present elements in one's life is completed (as done in Step 4) that includes a review of each element from a moral standpoint. This is done through the "Moral Assessment" exercise and by selecting the five biggest problem areas and noting actions required to address these areas. The "Trading Places" exercise done in Step VI is revisited.

Step XI: Keeping Moral Commitment

The participant is encouraged to become firm in his/her conviction to ethical behavior. They must become involved with other people in both meeting goals and helping others meet goals. Being involved with others in mutually rewarding and fulfilling projects is a requirement that must be completed before the participant may move up. The "Best of Times/Worst of Times" and "Circle of Relationship" exercises help to focus on the importance healthy relationships. Additionally, the participant is responsible for preparing a brief summary of the important things learned throughout the previous eleven steps of the program. The summary is prepared in written form for oral testimony to the group and to the JDC Team.

Step XII: Choosing Moral Goals

The participant is encouraged to reassess their life's master plan with the purpose of becoming the best person that they are capable of becoming. They are asked to look carefully at beliefs, attitudes, and behaviors using principles as guidelines. The step is about choosing moral goals that are healthy as well as productive. Completing this step requires preparation of a new master goal plan and a statement of why each goal is

chosen and how that goal will lead to the individual's happiness. These goals are prepared in written form for oral testimony to the group and to the JDC Advisory Committee.

6. Phase Requirements

Phase I (Minimum Eight Weeks)

Client Responsibilities

- Minimum of three weekly drug screens.
- Random drug screens by Surveillance staff as determined necessary on a case-by-case basis.
- Minimum of one weekly home visit by Surveillance staff.
- Mandatory MRT (Moral Reconciliation Therapy) Group (throughout phases until completion).
- Mandatory Peer Group (substance abuse / life skills / anger management).
- One weekly individual / family counseling session with treatment specialist.
- Minimum of two case management meetings per week.
- One bi-weekly multi-family psycho-educational group meeting.
- Bi-Weekly Drug Court appearance.
- Two hours per week of acupuncture.
- Two hours per week of Community Learning as approved by treatment staff (can be AA or NA meeting, martial arts or athletic program, stress management, tutoring, mentorship or other hours of self development in a community program as appropriate for the individual).
- Must be enrolled in an accredited educational program until high school graduation or completion of GED program. After graduation or completion of GED program must actively seek a minimum of part time work.
- Recreational/pro-social activities as posted.
- If it is deemed necessary, on a case-by-case basis, these requirements can be increased.

To enter Phase 2, clients must complete each of the weekly requirements for eight weeks. Drug Court Team will review and approve movement from week to week.

Parent Responsibilities:

- One weekly individual / family counseling session with treatment specialist.
- One bi-weekly multi-family psycho-educational group meeting.
- One bi-weekly Parent Psycho-Educational Group Meeting
- Bi-weekly Drug Court appearance
- One bi-monthly recreational/pro-social activity, throughout program.
- Parents to attend two Al-Anon meetings per week.

Phase II (8 weeks)

Client Responsibilities

- Minimum of two weekly drug screens.
- Random drug screens by Surveillance staff as determined necessary on a case-by-case basis.
- Minimum of one weekly home visit by Surveillance staff.
- Mandatory MRT (Moral Reconciliation Therapy) Group (throughout phases until completion).
- Mandatory Peer Group (substance abuse / life skills / anger management).
- One weekly individual / family counseling session with treatment specialist.
- Minimum of two case management meetings per week.
- One bi-weekly multi-family psycho-educational group meeting.
- Bi-weekly Drug Court appearance.
- Two hours per week of Community Learning as approved by treatment staff (can be AA or NA meeting, martial arts or athletic program, stress management, tutoring, mentorship or other hours of self development in a community program as appropriate for the individual).
- Must be enrolled in an accredited educational program until high school graduation or completion of GED program. After graduation or completion of GED program must actively seek a minimum of part time work.
- Recreational/pro-social activities as posted.
- If it is deemed necessary, on a case-by-case basis, these requirements can be increased.

To enter Phase 3, clients must complete each of the weekly requirements for ten weeks. Drug Court Team will review and approve movement from week to week.

Parent Responsibilities:

- One weekly individual / family counseling session with treatment specialist.
- One bi-weekly multi-family psycho-educational group meeting.
- One bi-weekly Parent Psycho-Educational Group Meeting
- Bi-weekly Drug Court appearance
- Parents to attend two Al-Anon meetings per week.

Phase III (8 Weeks)

Client Responsibilities

- Minimum of two weekly drug screens
- Random drug screens by Surveillance staff as determined necessary on a case-by-case basis.
- Minimum of one weekly home visit by Surveillance staff.
- Mandatory MRT (Moral Reconciliation Therapy) Group (throughout phases until completion).
- Mandatory Peer Group (substance abuse / life skills / anger management).

- One weekly individual / family counseling session with treatment specialist.
- Minimum of one case management meeting per week.
- One bi-weekly Multi-Family Psycho-Educational Group meeting.
- Bi-weekly Drug Court appearance.
- Two hours per week of Community Learning as approved by treatment staff (can be AA or NA meeting, martial arts or athletic program, stress management, tutoring, mentorship or other hours of self development in a community program as appropriate for the individual).
- Must be enrolled in an accredited educational program until high school graduation or completion of GED program. After graduation or completion of GED program must actively seek a minimum of part time work.
- Recreation/pro-social activities as posted.
- If it is deemed necessary, on a case-by-case basis, these requirements can be increased.

To enter the Aftercare component, client must complete each of the weekly requirements for ten weeks. Drug Court Team will review and approve movement from week to week.

Parent Responsibilities:

- Two Monthly individual / family counseling session with treatment specialist.
- One bi-weekly multi-family psycho-educational group meeting.
- One bi-weekly Parent Psycho-Educational Group Meeting
- Bi-weekly Drug Court appearance
- One bi-monthly recreational/pro-social activity, throughout program.
- Parents to attend one Al-Anon meetings per week.

Phase IV (8 weeks) AFTERCARE

Client Responsibilities

- Minimum of one weekly drug screen.
- Random drug screens by Surveillance staff as determined necessary on a case-by-case basis.
- Minimum of one weekly home visit by Surveillance staff.
- Mandatory MRT (Moral Reconciliation Therapy) Group (throughout phases until completion).Should client relapse due to new use, behavior issue, or for any other reason, s/he may be asked by the treatment specialist to return to MRT Group at whatever level the treatment specialist deems appropriate.
- Mandatory Peer Group (substance abuse / life skills / anger management) or third Community Learning hour.
- Bi weekly individual / family counseling session with treatment specialist.
- Minimum of one case management meeting per week.

- One bi-weekly Multi-Family Psycho-Educational Group meeting.
- Drug Court appearance minimum of every fourth week.
- Two hours per week of Community Learning as approved by treatment staff (can be AA or NA meeting, martial arts or athletic program, stress management, tutoring, mentorship or other hours of self development in a community program as appropriate for the individual).
- Must be enrolled in an accredited educational program until high school graduation or completion of GED program. After graduation or completion of GED program must actively seek a minimum of part time work.
- Recreational/pro-social activities as posted.
- If it is deemed necessary, on a case-by-case basis, these requirements can be increased.

To graduate from program, client must complete all the monthly requirements for eight weeks. A final review by the Drug Court Team will be completed prior to graduation.

Parent Responsibilities:

- One Monthly individual / family counseling session with treatment specialist.
- One bi-weekly multi-family psycho-educational group meeting.
- Drug Court appearance minimum of every fourth week.
- One bi-monthly recreational/pro-social activity, throughout program.
- Parents to attend one Al-Anon meetings per week.

An additional requirement is attendance at a cultural event. Finally, participants are closely assessed to determine whether they have demonstrated an understanding of, and displayed behaviors consistent with the concepts and values offered through MRT and the JDC Program.

In the event a participant is sent to an in-patient, residential treatment center (RTC) by the Drug Court Team, parental attendance at the Psycho-Educational Parent Group remains mandatory. Failure to do so results in a violation of Item #8 of parent contract. Attendance at the Psycho-Educational Multi-Family Group is encouraged but not required.

Upon request from RTC, the participant may be required to return to Phase I program level requirements for up to two weeks to allow Drug Court Time to receive and review discharge reports from the RTC and decide what, if any, program credit will be granted for the RTC stay. Phases III and IV will always be demanded upon from RTC, as the program stipulates that a participant must be clean and sober for Four (4) months in an out-patient setting in order to graduate from Juvenile Drug.

B. Drug and Alcohol Testing

Random drug and alcohol testing takes place throughout the course of the program, including Aftercare. The frequency and the type of test are based on the Program phase and the individual needs of the client. The most common forms of testing are urinalysis,

saliva analysis, and breath analysis. Breath analysis is completed through the use of instruments that detect for the presence of alcohol. Urinalysis tests can be either of the on-site or laboratory type that test for the presence of all commonly abused substances. Participants who have an initial positive result for the presence of alcohol or other prohibited substances are given the opportunity to corroborate the result with a written admission of use. All positive tests must be corroborated either through observation, a signed admission by the participant, a GC/MS test, or a fully calibrated testing instrument. Quantitative results for the presence of THC are always measured and reported. Creatinine levels are also tested and monitored in order to identify flushing and to differentiate past use from new use. Sanctions are administered as soon as possible following corroboration of a use.

There will be an orientation period, which will require a clean urine test for entry into Phase 1 week 1. If the client tests positive for Marijuana (THC), the client will be given 18 days from the first test date to provide a negative UA. Anything over 18 days will be considered a new usage for THC and will be sanctioned accordingly.

Urine Analysis (UA) Positive - Clients urine sample shows a presence of drugs/alcohol and will be sanctioned accordingly.

Urine Analysis (UA) No Show – Client misses a UA it will be sanctioned as a UA positive.

Urine Analysis (UA) Negative – Clients urine sample shows no presence of drugs/alcohol.

Urine Analysis (UA) Stall – Client is unable to produce a valid urine sample or doesn't show up for the UA on the day their color is called. A UA stall will be sanctioned the same as a positive UA.

Urine Analysis (UA) Excused- Client is sick with a valid doctors note and when on travel status

UA Analysis (UA) Dilute - Clients urine sample is confirmed diluted. The client will be sanctioned as a positive accordingly with the sanction list.

Relapse – can be defined as discrete event, which occurs at the moment a person resumes drug use. Both a Positive UA and a UA Stall are considered a Relapse.

Two consecutive missed UA's with no telephone call or no show will be considered absconding. With sufficient evidence, a request will be made for issuance of a bench warrant

In the event of a relapse, a client could lose credit and will not start receiving credit until the client is clean again.

Beginning July 1, 2009, drug testing hours will be as follows: Monday thru Friday between the hours of 7:00 am - 9:00 am the day your color is called for Juvenile Drug Court clients residing in or within 20 miles of Las Vegas.

For Juvenile Drug Court clients that reside more than 20 miles from Las Vegas can also be drug tested between the hours of 3:00-4:00 pm.

After 9:00 am & 4:00 pm , Urine Analysis (UA) will be considered a UA No show and will be sanctioned as UA positive.

Please note that the below sanctions will be reviewed and approved by the team to determine if the participant will lose credit and/or receive a double sanction.

**** When the client enters a denial and the urine specimen is sent to the laboratory for confirmation, the sanction will be held in abeyance until the results are received from the laboratory.**

***** Should the results confirm the results of the instant test kits; the client will receive double sanctions as part of the consequence for hiding the truth.**

C. Surveillance

Surveillance is conducted according to the **Surveillance and Drug Testing Procedures Manual adopted by the treatment provider** and is designed to promote individual accountability. The minimum number of field contacts and drug tests are tied to the participant's phase in the Program and are listed above. However, Surveillance Officers are free to exceed these minimum established standards. Generally, breath samples are analyzed each time a Surveillance Officer makes contact with a participant in the field.

Drug tests will be administered on Saturday and/or Sunday on a case-by-case basis approved by the Drug Court Team.

Travel Permits/Overnight Stays

You must obtain the permission of your JPPO prior to spending the night anywhere other than at your primary residence. Client must provide a UA before travel status and upon return.

- In emergencies, your JPPO may grant you permission.

D. Case Staffing and Team Reporting

Prior to the Judicial Review, the JDC Treatment Team members report to the JDC Judge on individual participants' performance and make recommendations regarding sanctions, incentives or other matters the JDC Judge may care to address with the participant during the Judicial Review. JDC Treatment Team members refrain from disclosing information presented during these case staffings. At this meeting and at the subsequent Judicial Review, team members report as appropriate on the following matters:

The Juvenile Probation Officer reports on:

- Significant interactions with the participant;
- Progress on probation;
- General information on the juvenile's well-being (including family situation and environment); and,
- Results of drug screens; and,
- Attendance and performance at school and work.

JDC Treatment Staff and the Administrative Support Staff provide information on:

- Individual compliance with program requirements (i.e., meeting attendance, assignment completion, etc.);
- Progress on the MRT® continuum;
- Significant issues raised in group, family, or individual meetings with the participant or their parents;
- General information regarding the emotional and mental status of the individual, including any family issues; and
- Parental attendance and participation in the Parent Support Group and other required activities.

Surveillance Officers/Case Managers report on:

- Issues observed in the participant's home during visits;
- Probation and Program violations (i.e., curfew, possession of contraband items, etc.); and,
- Substance abuse testing and incidents occurring in conjunction testing (i.e., stalls, attempts to adulterate urine, etc.).

Those team members submitting written documentation must submit it to the JDC Program office the day prior to the scheduled Judicial Review. Documentation is then compiled by the JDC Administrative Support Staff and presented to the JDC Treatment Team during case staffings. Case Staffings occur immediately preceding the Judicial Progress Reviews.

E. Judicial Progress Review & Court Rules

A key component of the Drug Court Program is the review of each individual's and family's progress conducted every other week by the JDC Judge. At the Judicial Progress Review, each participant appears before the JDC Judge along with their parent or guardian and the Defense Attorney. During this appearance, the participant reports on their treatment, educational, social, employment, and emotional status. A key issue in reporting is accountability for both positive and negative actions. Individual testimony, combined with input from the JDC Treatment Team, give the Judge a basis for decisions, including determining whether a participant has earned sanctions or incentives. All clients and parents must remain throughout the entire Drug Court Session. Clients and parents will be allowed to leave early only in the case of an emergency.

Court Rules

Males must wear a collared shirt with a tie and no sagging, failure to adhere to this dress code will result in no entrance to the courtroom, no credit for the week and other sanctions can be imposed.

Females must wear a blouse and slacks or skirt, failure to adhere to this dress code will result in no entrance to the courtroom, no credit for the week and other sanctions can be imposed.

Do not wear shorts, tank tops, gang/drug related clothing, ripped clothing, t-shirts, hats, and remove any facial piercing.

Do not wear shorts, tank tops, gang/drug related clothing, ripped clothing, t-shirts, hats, and remove any facial piercing.

Do not chew gum.

Address the judge as Your Honor or Sir/Mam.

Speak loud and clear.

Do not be late! Arrive 15 minutes before court begins.

An unexcused absence to Drug Court will result in a bench warrant being issued for the absentee drug court participant.

F. Sanctions and Incentives

Within the JDC Program, there is a continuum of sanctions from least to most restrictive. Participants that fail to comply with drug court expectations and rules may have one or more sanctions imposed. Sanctions and incentives are generally administered during Judicial Review Sessions, however; in some circumstances, an immediate response is more therapeutic. These sanctions typically begin with community service and move toward more severe sanctions such as detention. For major or repeated violations, the most severe sanctions, such as detention or termination from the program may be ordered. There are a number of reasons that discharge from the JDC program may be ordered including:

- Failure to comply with program rules and expectations;
- Inability to provide clean drug screens over an extended period of time; and
- Commission of offenses that result in program ineligibility.

It is important to note that when imposing sanctions at any level, all factors of the participant's life and compliance with the program are considered. Participants should not expect that sanctions imposed for a particular violation on a particular day for one client will be the same sanction imposed on another day, for another client, for what might otherwise seem to be the same violation.

Parents are also subject to the orders of the Court and are expected to support the JDC process and their child's recovery. Parents or guardians who are parties to the petition may be held in Contempt of Court for failures to comply with the orders of the Court or may receive other sanctions as are appropriate to the circumstances.

Like sanctions, incentives are also determined on an individual basis. Incentives may range from congratulations and encouragement to the program providing movie passes, gift certificates or other benefits to those who have been drug free and performed exceptionally well in the Program. Exceptional performance may include attending extra AA or NA meetings, volunteering to work more often than required, performing program requirements in a particularly noteworthy manner, or dedicating extra time to Program activities. The decision to award incentives to a participant is also based on behavior, performance, and input from the entire JDC Team. The Advisory committee will be responsible for raising monies to provide incentives.

Incentives

- Every 16 consecutive negative UA's – **One Week of credit approved by the team**
- 100% Attendance for Drug Court Activities 4 Weeks Straight – **Credit for one group approved by the team**
- 100% Attendance for Drug Court Activities 2 Weeks Straight – **One time one hour of extended curfew approved by the team**
- Attendance at School with no unexcused absences for 4 weeks – **One time two hour of extended curfew approved by the team**
- **One hour credit of community service** for compliance with each additional orders of court.
- **Fish Bowl Draws** – Draws will be earned by each client for 100 % compliance of Adult Drug Court activities for 2 weeks. Clients will draw at Drug Court and will redeem any items at the Drug Court program manager's office. This will be determined on a case by case basis.
- *Attendance at 4 Parent group sessions – **Certificate of Recognition***

Sanctions – Positive Urine Analysis and No Show Urine Analysis

1st Violation (2weeks)-	2 hours of Community service for each positive or missed UA (all community service must be completed by the
---	--

<p>Minimum</p>	<p>next drug court) Any missed groups and/or individual counseling will result in no credit per each week a group or counseling is missed * During the 18 day period (THC) the sanction will be held in abeyance if the client is clean before the 18 day period. If the client is positive after the 18 day period the sanction will be imposed for each positive UA.</p>
<p>2nd Violation (2weeks)- Minimum</p>	<p>4 hours of Community service for each positive or missed UA (all community service must be completed by the next drug court) Failure to complete the community service by the next drug court, the parents must complete the same amount of community service alongside their child. If the parents fail to complete the community service, they will report to the Drug Court Office with the child for groups where an activity will be provided while the child is in group. Any missed groups and/or individual counseling will result in no credit per each week a group or counseling is missed * During the 18 day period (THC) the sanction will be held in abeyance if the client is clean before the 18 day period. If the client is positive after the 18 day period the sanction will be imposed for each positive UA.</p>
<p>3rd Violation (2weeks)- Minimum</p>	<p>6 hours of Community service for each positive or missed UA (all community service must be completed by the next drug court) Failure to complete the community service by the next drug court, the parents must complete the same amount of community service alongside their child. If the parents fail to complete the community service, they will report to the Drug Court Office with the child for groups where an activity will be provided while the child is in group. Any missed groups and/or individual counseling will result in no credit per each week a group or counseling is missed The child will also lose one additional week of credit. * During the 18 day period (THC) the sanction will be held in abeyance if the client is clean before the 18 day period. If the client is positive after the 18 day period the sanction will be imposed for each positive UA.</p>
<p>4th Violation (2weeks)-</p>	<p>8 hours of Community service for each positive or missed UA (all community service must be completed by the</p>

Minimum	<p>next drug court) Failure to complete the community service by the next drug court, the parents must complete the same amount of community service alongside their child. If the parents fail to complete the community service, they will report to the Drug Court Office with the child for groups where an activity will be provided while the child is in group. Any missed groups and/or individual counseling will result in no credit per each week a group or counseling is missed The child will also lose one additional week of credit. * During the 18 day period (THC) the sanction will be held in abeyance if the client is clean before the 18 day period. If the client is positive after the 18 day period the sanction will be imposed for each positive UA.</p>
5th Violation (2weeks)- Minimum	<p>The electronic monitor for a 2 week period The child will also lose 2 additional weeks of credit</p>
6th Violation (2weeks)- Minimum	<p>The electronic monitor for a 4 week period The child will also lose 3 additional weeks of credit</p>
7th Violation (2weeks)- Minimum	<p>72 hours of Detention</p>
8th Violation (2weeks)- Minimum	<p>96 hours of Detention</p>
9th Violation (2weeks)- Minimum	<p>Seek inpatient Treatment</p>
10th Violation (2weeks)- Minimum	<p>Mandatory review by Drug Court Team and termination from the Juvenile Drug Court Program.</p>

The above chart of sanctions will be used as a guide and will be followed in order, however in some cases, a greater sanction may be necessary based on the severity of the violation, this may include detention or termination from the program at any phase.

Sanction for non compliant of additional orders of the court. (i.e. Judge asks for your progress report, and client fails to bring it)

1 hour of community service for each non compliance with the orders of the court.

Sanctions for non - compliance of the electronic monitor (not charging the monitor or violation of monitor i.e. out of range):

1st – 4 hours of community service

2nd – 8 hours of community service

3rd – 12 hours of community service

4th – participant will lose one week of credit

5th – to be determined by Drug Court Team.

All community service must be completed in order to advance to the next phase.

In the event of a relapse, a client in the last phase (phase 4 in the 8.5 months level 3, Phase 3 in the 4.5 month level 2, and phase 2 in the 90 day level 1) the client will be return to the beginning of the last phase.

Other sanctions for non-compliance with program may include, increased counseling, extra community service, no credit for week, repeating prior phase, or in-patient treatment.

Participants must also comply with any auxiliary services and/or programs (SF Mountain Center). Failure to comply may result in sanctions.

G. Transportation Support

The JDC is committed to providing its services to juveniles and families from all areas of San Miguel and Mora Counties and from families of all races, cultures, religions, ethnicities, and economic backgrounds. Each participant’s family bears the primary responsibility for transportation to and from JDC activities. In recognition that each family has access to differing levels of resources, all families are granted limited access to short-term transportation support to be used at their discretion. Longer-term support may be granted by the JDC Judge upon recommendation of the JDC Team and consistent with budgetary constraints.

H. Program Completion and Termination

Graduation from the JDC program is achieved when the individual satisfies all program requirements. In most cases, the participant will be awarded a Certificate of Completion and a memento from the Program during a formal graduation ceremony. At graduation, the participant will have completed Phase IV, and;

- Attended and reported on at least one cultural event (i.e., play, symphony, multi-national festival, art exhibit, etc.); and,

- Demonstrated substantial progress toward achievement of treatment, educational and vocational goals; and,
- Have obeyed the law and substantially complied with their probation agreement; and,
- Will have addressed the JDC Advisory Committee, discussing their participation in the program and their one, five, and ten year goals.
- Exit Interview and questionnaire

Participants may also be awarded graduate status when, upon recommendation of the JDC Team, the JDC Judge determines that Program objectives have been achieved through participation in alternative programming.

When discharge from the program is recommended, the JDC Judge will solicit input from each Team Member. The JDC Judge is the ultimate discharging authority for individuals in the program. If an individual is discharged from the program, a discharge summary is prepared by the JDC Treatment Staff and is forwarded to the Juvenile Probation Office within 14 days of discharge.

Participants who are neither graduated or terminated from the Program, but are not appropriate for continued participation, may upon recommendation of the JDC Team, and with the approval of the JDC Judge, be technically discharged. Participants who are technically discharged are not subject to probation revocation upon that basis.

VII. Counselor Licensure

Licensed mental health professionals, or interns pursuing licensed status, provide the clinical treatment for the JDC Program. All providers receive the level of supervision as is required by their profession and the laws of the State of New Mexico.

VIII. Tracking Progress

During the course of a juvenile's involvement with the JDC, records are maintained by JDC Administrative Support Staff. Each individual's progress is tracked and contains the following documentation:

- Initial Referral Information;
- Participant intake screening/information;
- Drug Court Contract and Request for Admission;
- Parental/Individual consent to release information;
- Consent for Drug Screen and Analysis;
- JDC Consent to Treatment and Limits of Confidentiality forms;
- Signed Receipt for Participant & Parent Handbooks;
- Participant/Family Treatment Plans;
- Psychiatric & Psychological Assessment (where applicable);
- Group and individual session notes;

- Program Activities & Incident Reports;
- UA results;
- Semester Grades including GPA;
- Personal Statements;
- JDC Judicial Review Forms; and
- Other relevant information.

Upon graduation, the JDC Administrative Support Staff provide copies of the current treatment plans, and discharge summary to the Juvenile Probation Office.

IX. Program Administration

A. Court Orders

Orders issued by the JDC Judge pertaining to purely drug court matters, Order to Drug Court Assessment and Orders on Drug Court Violation will be filed in the court case. All confidential information will be filed in the Drug Court file maintained by the Program Coordinator and not a matter of the court record.

B. Administrative Reporting

As a program that depends entirely on public monies, it is critical that financial and non-financial reporting by both the program office and service providers be consistent with all applicable state and federal guidelines. The Program Director is responsible for ensuring that all required programmatic reports are accurate and are submitted in a timely manner in accordance with state and federal guidelines.

C. Contractual Agreement for Services

Contractual agreements between service providers and the 4th Judicial District JDC Program will be consistent with all governing state and federal guidelines.

D. Performance Measures

The JDC Program Director is responsible for collecting necessary data and reporting on all required performance measures in accordance with funding source requirements, as well as state, and federal standards. As a minimum, the following measures will be calculated and reported quarterly:

- Percentage of substance free drug screens;
- Graduate re-referral/re-arrest rate;
- Percentage of participants showing improved GPAs since program admission; and
- Rate of parental participation in the Parent Support Group.

E. Out-processing

The purpose of out-processing is to provide continuous feedback to the JDC Treatment Team concerning the quality of the Program. Out-processing occurs just prior to graduation from the JDC program. An exit interview is conducted first with the participant and then the parents. At the time of out-processing, the JDC Treatment and Administrative Support Staff meet with the parents and the participant to conduct an exit interview and to assist them in completing appropriate evaluation instruments. Upon completion of out-processing, the JDC Treatment Staff will forward within 14 days, the results to the JDC Program Director for analysis and dissemination to members of the JDC Treatment Team and JDC Advisory Board for their review.

X. Summary

Policies and procedures alone cannot make a program successful. There is a key role, however, for a policy and procedure manual within a successful program. A clearly defined vision and mission provide strategic direction. Objectives outline the conditions through which the vision and mission are accomplished. Operating procedures define an action plan for team members to follow; and, roles and responsibilities establish who is responsible and accountable for carrying out those actions. Like any organization, the JDC Program is an open system that is influenced by its operating environment. As such, it will be necessary to alter the program's policies and procedures as that environment changes. Any future changes to this manual, or the JDC Program, however, should uphold the vision and mission of the program and be consistent with national and regional guidance for Juvenile Drug Courts.

Appendix A. Traditional Program Tracks (adjudicated)

The Highest Track Level 3:

Level 3 is a minimum of eight and half months and is divided into 4 phases (8 weeks each phase). Each phase has a different focus and level of intensity to assist participants in developing support systems that facilitated and maintain continued abstinence and recovery. Level 3 is the highest level of need with the most severe substance abuse issues. The table below describes the minimum activities for the Level 3. Level 3 clients' identification will have L3 and the end of the program ID.

	Phase 1	Phase 2	Phase 3	Phase 4
Individual Counseling	1 x a week	1 x a week	1 x a week	2 x a month
Group	1 x a week	1 x a week	1 x a week	1 x a week
MRT	1 x a week	1 x a week	1 x a week-	1 x a week-

	Phase 1	Phase 2	Phase 3	Phase 4
			until completion	until completion
Family Counseling	2 x a month	2 x a month	2 x a month	1 x a month
Court Reviews	2 x a month	2 x a month	2 x a month	1 x a month
Case Management	2 x a week	2 x a week	1 x a week	1 x a week
UA's	3 x a week	2 x a week	2 x a week	1 x a week

The Medium Track Level 2:

Level 2 is a minimum of four and half months and is divided into 3 phases (6 weeks each phase). Each phase has a different focus and level of intensity to assist participants in developing support systems that facilitated and maintain continued abstinence and recovery. Level 2 is medium treatment and substance abuse issues. The table below describes the minimum activities for the Level 2. Level 2 clients' identification will have L2 and the end of the program ID.

	Phase 1	Phase 2	Phase 3
Individual Counseling	1 x a week	1 x a week	2 x a month
Group	1 x a week	1 x a week	1 x a week
MRT	1 x a week	1 x a week	1 x a week- until completion
Family Counseling	2 x a month	2 x a month	1 x a month
Court Reviews	2 x a month	2 x a month	1 x a month
Case Management	2 x a week	2 x a week	1 x a week
UA's	3 x a week	2 x a week	2 x a week

The Early Intervention Track Level 1:

Level 1 is a minimum of three months and is divided into 2 phases (6 weeks each phase). Each phase has a different focus and level of intensity to assist participants in developing support systems that facilitated and maintain continued abstinence and recovery. Level 1 is minimal treatment and substance abuse issues. The table below describes the minimum activities for the Level 1. Level 1 clients' identification will have L1 and the end of the program ID.

	Phase 1	Phase 2
Individual Counseling	1 x a week	2 x a month
Group	1 x a week	1 x a week
MRT	1 x a week	1 x a week- must complete step 6
Family Counseling	2 x a month	1 x a month
Court Reviews	2 x a month	2 x a month
Case Management	2 x a week	2 x a week
UA's	3 x a week	2 x a week

After meeting all the Juvenile Drug Court level 1 & 2 tracks requirements, the participant will be eligible to graduate. While there will not be a formal Graduation Ceremony for level 1 & 2 graduates (receive a \$ 20-25 gift card instead of \$ 15), participant and family will be invited to participate in the next formal Graduation ceremony for a level 3 graduate. This ceremony will be used as a forum to acknowledge each Juvenile Drug Court level 1 & 2 graduate's accomplishments and the chance for the level 1 & 2 graduate to give a message of hope to the newer participants and their families. Family members, significant others, community leaders, speakers, the arresting officer, and court personnel will be encouraged to attend. As with the formal Graduation Ceremony, this ceremony will serve as a bridge to educate interested parties that, in fact, early intervention treatment programs and the criminal justice system ca work together in creating a paradigm that promotes change in the early stages of a juvenile's negative behavior, with goal of preventing further legal entanglements.



POLICIES AND PROCEDURES MANUAL

“There is no greater insight into the future than recognizing when we save our children, we save ourselves.” --Margaret Mead, Anthropologist

TABLE OF CONTENTS

Vision.....	42
Mission.....	42
Target Population.....	42
Program Objectives.....	42
1.0 Introduction.....	43
2.0 Code of Conduct	43
3.0 Program Description	45
4.0 Juvenile Drug Court Team.....	45
4.1 Individual Roles and Responsibilities.....	46
4.1.1 Drug Court Judge.....	46
4.1.2 District Attorney	46
4.1.3 Defense Attorney	46
4.1.4 Juvenile Probation Officers.....	46
4.1.5 JDC Treatment Staff	47
4.1.6 Surveillance.....	48
4.1.7 Law Enforcement.....	48
4.1.8 Program Director	48
4.1.9 Administrative Support Staff.....	49
4.2 Advisory Committee.....	49
4.3 Confidentiality	50
4.4 Professional Development	50
5.0 Operational Procedures for JDC.....	50
5.1 Referral and Screening.....	50
5.2 Program Orientation.....	52
5.2.1 Admission Orientation.....	52
5.2.2 Program In-Processing.....	53
6.0 Program Components.....	53
6.1 Treatment	54
6.1.1 Parental Support Program.....	54
6.1.2 Family Counseling.....	55
6.1.3 Individual Counseling.....	55
6.1.4 Participant Groups	56
6.1.5 Other Treatment Requirements.....	63
6.2 Drug and Alcohol Testing.....	63
6.3 Surveillance.....	63
6.4 Physical Training	64

6.5 Case Staffing and Team Reporting	64
6.6 Judicial Progress Review	65
6.7 Sanctions and Incentives.....	65
6.8 Transportation Support	66
6.9 Program Completion and Termination	66
6.10 Aftercare	67
7.0 Counselor Licensure	68
8.0 Tracking Progress	68
9.0 Program Administration.....	68
9.1 Court Orders.....	68
9.2 Administrative Reporting.....	68
9.3 Contractual Agreement for Services.....	69
9.4 Performance Measures.....	69
9.5 Out-processing	69
10.0 Summary	69

Juvenile Drug Court, 12th Judicial District

Vision

The 12th Judicial District Juvenile Drug Court seeks to enhance the community we serve through the treatment and rehabilitation of juvenile substance abusers.

Mission

Through a well-coordinated, multi-disciplinary approach involving treatment, education, and supervision, the 12th Judicial District Juvenile Drug Court Team will provide a structured and supportive environment where juveniles are taught concepts, principles, and skills which will enable them to make lifestyle changes, graduate Drug Court, remain drug free, and become contributing members of our community.

Target Population

The 12th Judicial District Juvenile Drug Court (JDC) program targets youth between the ages of 14 and 17 who have multiple referrals and/or adjudications for a variety of delinquent offenses, but often with one or more of the referrals involving substances. Those within the target population have or are in danger of having an unsuccessful period of probation that can be substantially attributed to the use of substances. Many identify either marijuana or alcohol as their primary drug of choice and use them multiple times each week. Many will also have used methamphetamines, cocaine, inhalants, or other drugs. Members of the target population will not require medically monitored detoxification or maintenance services and less than ten percent (10%) will be classified as chemically dependent.

Program Objectives

The JDC Treatment Team will accomplish its mission via four measurable and achievable objectives that are:

- Increase the number of program participants demonstrating reduced drug use as measured by consistently clean drug screens, beginning within four (4) months of entry into the program and for one year following graduation from the program;
- Increase the number of program participants demonstrating no arrests for additional delinquent acts, or adult criminal acts (if age 18 or older), during the period of the program and for up to three years following graduation from the program;
- Improvement of individual educational performance within six (6) months of the beginning of the program as measured by increased grade point average; and,

- Enhancement of participant’s family environment as assessed through parental/guardian involvement in family treatment component.

Each member of the JDC team will be responsible for actions and initiatives that contribute to one or more of these objectives.

1.0 Introduction

This manual defines the policies and procedures of the 12th Judicial District Juvenile Drug Court (JDC) program of Lincoln County, New Mexico. In addition to defining the drug court program, this document details:

- Roles and responsibilities of the Juvenile Drug Court Team;
- Procedures for referring, screening, and in-processing Juvenile Drug Court participants; and,
- Treatment for participants and their families.

The 12th Judicial District JDC is a dynamic organization that will strive to continuously improve program performance and capacity. As such, this manual is a living document that is revised when changes arise in the structure and environment of the program.

2.0 Code of Conduct

While a participant in the Juvenile Drug Court, you are expected to comply with all the terms of your probation and these Drug Court rules:

- You may not buy, own, or possess any firearms, ammunition, or other deadly weapons.
- You may not act in a manner that creates a risk of harm to yourself or others.
- You may not buy, consume, use, or possess alcoholic beverages or other products containing alcohol such as mouthwash, Nyquil, etc.
- You must obtain approval from your Probation Officer prior to using any over-the-counter medications, nutritional supplements, or anything that may interfere with drug testing (i.e. poppy seeds).
- You must notify your Probation Officer of any prescribed medication you are taking.
- You may not use, possess, or consume any prescription medications unless they are specifically prescribed for you.

- You may not associate with known gang members, felons, persons who have been convicted of substance related offenses, persons under supervision of the Court, or others prohibited by your Probation Officer, except if specifically permitted by the Judge.
- You may not possess or display items (e.g. posters, artwork, signs, etc.) related to gangs, drugs, alcohol, sex, or criminal behaviors.
- You may not involve yourself in gang activities nor present yourself in a way that could convey gang affiliation.
- You may not acquire any new body piercings, or tattoos.
- You must ensure that your parents and the program's surveillance officers know your whereabouts and can locate you at all times.
- You must make yourself available for all required drug/alcohol tests.
- You must comply with any established curfew.
- You must comply with all program requirements, orders of the Court, and the directives of your probation officer, parents, guardians, and custodians.
- You must work hard to meet program requirements and accomplish program objectives.
- You may not wear clothing that is suggestive, revealing, or is associated with drugs, gangs, alcohol, sex, or criminal activity, or is not generally intended for wear outside of the home.
- All pagers, cell phones, and electronic entertainment devices must remain off during all JDC activities unless approved by JDC Staff.
- You must address Drug Court staff and fellow participants respectfully.
- You may not have visitors during JDC activities (does not include Court) unless the JDC Team member running the activity gives you permission.

3.0 Program Description

JDC provides a community-based, multi-disciplinary, court-centered approach to the treatment of juveniles that enter the justice system due to behaviors substantially related to the abuse of substances. JDC incorporates members of the judicial process (judges, prosecutors, and public defenders), law enforcement representatives, juvenile probation officers, counseling and treatment staff, educators, and community leaders into an integrated network that manages the progress and rehabilitation of participants. Court-ordered treatment addresses the mental, physical, and emotional health of juveniles admitted to the program

Following acceptance, the individual and his or her parents, contracts with the court to undergo treatment and participate in all facets of the program. Program components include:

- Individual, group, and family counseling (i.e. MRT, parenting, life skills, and substance abuse issues);
- Completion of approved individual improvement activities (such as: extra-curricular activities, educational pursuits, individual counseling);
- Physical Training Sessions;
- Intensive Supervision and Drug Testing; and
- Judicial Reviews.

Based on each participant's level of progress, the court will impose either sanctions or award incentives. . Relapse is seen as a predictable part of substance abuse recovery. Relapse is identified through drug testing and is addressed in treatment sessions and court ordered sanctions. Sanctions or incentives imposed by the Drug Court Judge are intended to discourage or reward behavior, as appropriate.

4.0 Juvenile Drug Court Team

Three groups comprise the 12th Judicial District's JDC team:

- The Screening Committee is comprised of the JDC Judge, Children's Court Attorney, Defense Attorney, Juvenile Probation Officer, JDC Treatment Staff, the JDC Program Director, and others persons or agencies deemed appropriate by the JDC Judge. This group is responsible for the selection of appropriate Drug Court participants from those who are referred.
- The Treatment Team includes the JDC Judge, Children's Court Attorney, Defense Attorney, Law Enforcement, Juvenile Probation, JDC Treatment Staff, Surveillance Officers, and the JDC Program Director. This group oversees program compliance, progress, and administration.
- The JDC Advisory Committee is comprised of both Treatment Team members and representatives from the community.

4.1 Individual Roles and Responsibilities

4.1.1 Drug Court Judge

The 12th Judicial District JDC is presided over by a District Court Judge. The judge serves as the ultimate authority for the Juvenile Drug Court and performs a variety of functions that include:

- Presiding over the participant screening process and JDC Case Staffings;
- Presiding over Judicial Reviews;
- Administering Drug Court sanctions and incentives; and,
- Chairing the JDC Advisory Committee.

4.1.2 District Attorney

The District Attorney, or designee, represents the issues for the State of New Mexico. Responsibilities include:

Assisting with the identification of candidates for referral to the JDC;
Serving as a member of the Screening Committee;
Serving as a member of the JDC Treatment Team;
Participating in Case Staffings and Judicial Reviews;
Serving as a principal member of the JDC Advisory Committee; and,
Acting as the designated Children's Court Attorney in all matters related to the JDC.

4.1.3 Defense Attorney

The Defense Attorney is the primary advocate for juveniles referred to the JDC. Responsibilities include:

- Assisting with the identification of candidates for referral to the JDC;
- Serving as a member of Screening Committee;
- Providing legal counsel to JDC participants;
- Advocating on behalf of participants during judicial and administrative procedures;
- Serving as a member of the JDC Treatment Team;
- Participating in Case Staffings and Judicial Reviews;
- Assisting participants prepare for appearances before the Drug Court Judge (the attorney appears with participants during their presentation to the judge);
- Serving as a principal member of the JDC Advisory Committee.

4.1.4 Juvenile Probation Officers

The assigned Juvenile Probation Officer is primarily responsible for ensuring each participant's compliance with the terms and conditions of their probation and acts as the primary liaison between the Juvenile Probation Office and the JDC. Responsibilities include:

- Assisting with the identification of candidates for referral to the JDC;
- Referring eligible juvenile offenders for drug court screening;
- Acting as a member of the Screening Committee;
- Monitoring juveniles admitted to the JDC program for compliance with both Drug Court and probationary requirements;
- Serving as a member of the JDC Treatment Team;
- Serving as a principal member of the JDC Advisory Committee; and,
- Participating in Case Staffings and Judicial Reviews.

4.1.5 JDC Treatment Staff

The JDC Treatment Staff is comprised of licensed mental health professionals or approved interns who are supervised in accordance with New Mexico Law and the rules of the designated licensing authority. JDC Treatment Staff are responsible for all aspects of treatment within the context of the JDC Program. Responsibilities include:

- Conducting screening and assessments of individuals referred to the JDC program;
- Serving as a member of the Screening Committee;
- Orienting families on the treatment component of the JDC program;
- Assisting in the placement of participants and families with available community resources such as: Medication Management Services, Residential Treatment, individual and family counseling, etc.;
- Serving as a principal member of the JDC Treatment Team;
- Serving as a principal member of the JDC Advisory Committee;
- Facilitating individual, group and family therapy for participants and their parents or guardians;
- Developing individual and family treatment plans;
- Reporting on participant and family progress toward treatment goals;
- Participating in Case Staffings and Judicial Reviews; and,
- Maintaining documentation on the treatment progress of each JDC client and family in accordance with professional and program standards.

4.1.6 Surveillance

Surveillance Officers operate under the direction of the JDC Program Director or designee. Responsibilities include:

- Monitoring the home environment of program participants;
- Conducting random drug tests and monitoring program and probationary compliance at home, school, work, and other locations 24 hours a day, seven days a week;
- Initiating, monitoring, and removing electronic monitoring devices at the direction of the JDC Judge;
- Arranging and supervising work details and other community projects;
- Assisting with physical training sessions;
- Participating in Case Staffings and Judicial Reviews;
- Documenting activities and incidents arising from the conduct of assigned duties; and,
- Serving as a member of the JDC Advisory and Screening Committees.

4.1.7 Law Enforcement

Officers from numerous local law enforcement agencies to include the Ruidoso Police Department, Ruidoso Downs Police Department, New Mexico State Police, Lincoln County Sheriff's Office, Capitan Police Department, and Carrizozo Police Department support the JDC Program. Assigned officers perform the following functions:

- Assisting with participant monitoring;
- Assisting with arrangements and supervision of community service opportunities;
- Reviewing the physical examination results prior to allowing participants to engage in physical training activities;
- Leading physical training sessions;
- Evaluating and reporting on levels of individual participation during the physical training sessions, community service projects and other structured activities;
- Participating in Case Staffings and Judicial Reviews; and,
- Serving as members of the JDC Advisory and Screening Committees.

4.1.8 Program Director

The JDC Program Director is primarily responsible for the day-to-day administration of the program under the direction of the District Judge. Additionally, the Program Director assists JDC Judges in coordinating the efforts of all other JDC team members. Responsibilities include:

- Developing and monitoring JDC budgets and maintaining compliance with required fiscal standards;
- Monitoring treatment and contract providers for compliance with contractual and JDC policy provisions;
- Assisting the JDC Judges in monitoring overall program effectiveness;
- Documenting and reporting program status and performance to funding sources;
- Identifying and pursuing resources (both financial and non-financial) in support of the JDC Program;
- Marketing the JDC program to community representatives;
- Serving as a member of the Screening Committee;
- Staffing and participating in Case Staffings and Judicial Reviews;
- Staffing and serving as a principal member of the JDC Advisory Committee;
- Directing and supervising Surveillance Officers; and,
- Directing and supervising JDC Administrative Staff.

4.1.9 Administrative Support Staff

The JDC Administrative Support Staff provides administrative, programmatic, case management, and fiscal support to the Program. Responsibilities may include:

- Providing Case management support to the Treatment Staff;
- Orienting families on Program policies and expectations;
- Coordinating placement of participants and families with available community resources such as: Medication Management Services, Residential Treatment, and individual and family counseling, etc.;
- Ensuring all participants complete the required medical exam and providing the results to Law Enforcement;
- Maintaining current health insurance information on all participants;
- Administering a quality assurance program that assures fiscal accuracy and accountability, accurate and complete programmatic documentation, and electronic data collection;
- Assisting with the JDC budget and grant management through the monitoring, documentation, and reporting of program expenditures;
- Providing administrative support to the JDC program; and
- Assisting the Program Director with overall program management; and
- Recording proceedings of the JDC Advisory and Screening Committees.

4.2 Advisory Committee

The JDC Advisory Committee is an administrative body of ad hoc advisors that oversee program operations through a number of activities to include:

- Developing the policies and procedures that govern the JDC operational process;

- Reviewing program performance to include financial and non-financial performance reports and indicators;
- Serving as subject matter experts on educational, policy, and community issues relevant to the JDC program.

Membership on the committee includes representatives of the local education system, the business community, other community agencies, and members of the JDC Treatment Team. The JDC program office maintains the minutes and membership of JDC Advisory Committee. The Committee typically meets monthly.

4.3 Confidentiality

Each member of the JDC Treatment Team is required to read and sign a Memorandum of Understanding (MOU) Among Drug Court Team Members with regard to the Confidentiality of Drug Court Participant Records and Information. The MOU defines applicable federal confidentiality regulations for JDC program proceedings.

4.4 Professional Development

A key factor in maintaining proficiency is training. As appropriate, JDC Team members will be sponsored for professional development through both regional entities (i.e., Children Youth and Families Department (CYFD), the Administrative Office of the Courts (AOC), the New Mexico Drug Court Association (NMADCP), and national entities, such as the National Association for Drug Court Professionals (NADCP).

5.0 Operational Procedures for JDC

5.1 Referral and Screening

Participant referral to the JDC Program may be originated by several sources including:

- The Children’s Court Judge;
- The Juvenile Probation Office;
- Defense Counsel for the Juvenile; and,
- The Children’s Court Attorney.

A potential participant with adjudications for delinquent acts involving misdemeanor acts of violence may be admitted to a drug court program, however, violent offenders, pursuant to 42 U.S.C. § 3796 et seq. 1994, and others who pose a serious risk to the community, will not be admitted into the Drug Court program. A violent offender is defined as a person who has been adjudicated of a delinquent act (felony level) during the course of which:

- The person carried, possessed, or used a firearm or other dangerous weapons; or,

- The person used force against another person; or,
- Death, or serious bodily injury, occurred to any person, without regard to whether any of the circumstances described above is an element of the offense or conduct of which or for which the person is charged or convicted.

Consideration for admission to the Drug Court program shall be limited to those potential participants who:

- Have been adjudicated for drug offenses or drug related crimes having to do with alcohol or other drugs as defined in New Mexico Criminal Code and New Mexico Children's Code; or,
- Have been adjudicated for non-drug related offenses that were committed while under the influence, or committed to support their addiction or dependency, or are otherwise substantially related to the use or abuse of alcohol or drugs; or,
- Distributed illegal substances to support their dependency or addiction to alcohol or drugs; or,
- Have violated probation by commission of a drug offense, drug related crime, or drug use; and,
- Have no cognitive, behavioral, or physiological issues that are beyond the scope and ability of the JDC Program.

If the individual satisfies these preliminary admissions criteria, the referring entity makes a recommendation to the appropriate Children's Court Judge for such an order. If the judge accepts the recommendation, it becomes part of the juvenile's probation agreement and the juvenile parents, or legal guardians are ordered to undergo an assessment for admission to the JDC program. In advance of the assessment, the Juvenile Probation Officer prepares a referral packet that includes the following:

- Release of Information;
- Criminal Information Form;
- Chronological Offense Record;
- Birth Certificate;
- Social Security Card;
- Current Petition/Petition to Revoke;
- Judgment and Disposition;
- Probation Agreement;
- Most Recent G.P.A./Grade Report;
- Baseline Assessment (updated within past 6 months);
- UA Results (when available);
- Past Mental Health Evaluations (when available); and,
- Health Insurance/Medicaid Information (if covered).

In order to determine whether the juvenile in consideration is clinically appropriate for the JDC program, the JDC Treatment Staff shall, within 7 business days of receiving a referral from the Juvenile Probation Office, arrange to conduct an assessment and administer a series of diagnostic tests including the Substance Abuse Subtle Screening Inventory (SASSI), the Children's Functional Assessment Rating Scale (CFARS), the Wide Range Achievement Test (WRAT) and other appropriate instruments. If the JDC Treatment Staff is unable to arrange the assessment due to the unavailability of the client or parents, they shall notify the referring JPPO who shall assist in arranging the appointment with the juvenile and his or her parents. Additionally, if the court has ordered a forensic or psychological evaluation, Administrative Support Staff will facilitate the scheduling of that evaluation. Results of the assessment are presented to the Screening Committee for review.

In consultation with the Screening Committee and after reviewing the assessment and forensic evaluation (when available), the JDC Judge makes a determination of program eligibility that results in the acceptance of the juvenile into the JDC program. Once that determination is made, documentation relating to results of the screening process will be incorporated into the JDC record. Prior to admission to the program, the juvenile their parents or guardians are given an opportunity to observe a Judicial Review. If they are unable to understand any aspect of the JDC program, additional program information may be requested before final admission.

If it is determined that the juvenile is not appropriate for program participation, the referral packet will be returned to the Juvenile Probation Officer with a letter indicating that the juvenile was not accepted for participation in the program.

5.2 Program Orientation

5.2.1 Admission Orientation

Following acceptance to the program, the juvenile, the parents, or guardians will review, sign, and receive the following documents:

- Drug Court Contracts and Request for Admission;
- Consent to Release Information;
- Consent for Drug Screening and Analysis;
- JDC Consent to Treatment and Limits of Confidentiality;
- Drug Court Activity Calendar; and
- Participant & Parent Handbooks.

It is the responsibility of the Defense Attorney to ensure that each document is fully reviewed and understood. The contracts are then presented to the Drug Court Judge whose signature on the contract constitutes final admission to the program.

Admission to the JDC program in no manner negates court ordered obligations for restitution. JDC Team members will assist participants in devising a plan for paying fines and making restitution that take into account an individuals ability to pay.

5.2.2 Program In-Processing

The juvenile, the parents, or guardians complete the Screening/Intake Form and meet with members of the JDC Team responsible for the various program components. Team members provide participants and parents information on program requirements and expectations to include:

- Program Phases;
- MRT;
- Individual, Family and Group Treatment;
- Physical (within two weeks of admission);
- Physical Training (PT);
- Educational Support;
- Surveillance;
- Drug Testing;
- Court Appearances;
- Incentives;
- Sanctions; and
- Aftercare.

Also during this meeting, the juvenile's insurance coverage or Medicaid eligibility is determined. Insurance information along with the completed physical form will be maintained in each juvenile's file. Following completion of program in-processing, JDC Treatment Staff begin to develop the client's and family's treatment plan. The treatment plan must be in place within 30 days of acceptance. The treatment plan must be reviewed and updated at least every three months.

6.0 Program Components

The JDC program employs a combination of approaches as part of the JDC's overall treatment process. Each is designed to increase the participant's ability to live a substance-free lifestyle and improve each family's ability to provide appropriate support to their child.

6.1 Treatment

6.1.1 Parental Support Program

The JDC Parent Support Program provides parents and other involved adults support and encouragement, and serves to better equip caregivers and custodians to support their child while they make the changes needed to live a substance free and productive lifestyle. Parents and other involved adults are encouraged to provide frequent feedback on their experiences within the JDC directly to the Treatment Team and/or their child's judge. In addition, parents and other involved adults are encouraged to comment on the quality and helpfulness of each session. The JDC's Parent Support Program consists of five elements:

- **Orientation:** Upon entry into the JDC, parents and other involved adults are oriented to the process during a minimum of two individual sessions conducted by members of the JDC Treatment Staff. These sessions provide the parents with an overview of Program requirements and orient them to available family support services. Additionally, the family's portion of the treatment plan is also developed and their appropriateness for participation in group sessions is determined. When complete, parents, stepparents, guardians, and custodians who are party to the juvenile's petition are referred for mandatory participation in the Parent Support Group or an approved alternative. Participation in the Parent Support Group, or its alternative, is required throughout the JDC program.
- **Skill Building Group:** Immediately following the orientation sessions, parents and other involved adults begin to participate in a series of twelve structured group sessions. Curriculum is approved by the JDC's Advisory Board and is designed to address issues common to parents of teens experiencing problems with drugs or alcohol. Topics include Communication, Setting Boundaries, Understanding Substance Abuse, etc. Parents are expected to complete all twelve sessions and must attend make-up sessions for any groups missed.
- **Combined Parent/Participant Group:** Generally one time each month, the Juvenile Drug Court Treatment Staff arranges an opportunity for parents and participants to come together to work in a group setting. This combined group allows for both participants and their parents or caregivers to participate in skill building exercises and positive social interactions.
- **Parent Support Group:** When parents and other involved adults have substantially completed the Skill Building Group sessions (not including make-up sessions) they begin to participate in the Support Group. The Parent Support Group meets once a month with the treatment staff to discuss and work on issues of general interest or concern. Parents are expected to participate in all scheduled sessions and are responsible to arrange make-up sessions for any groups missed.

- **Family Focused Sessions:** Once parents and other involved adults begin participating in the Support Group, the treatment staff may also arrange for the family to participate in more family focused sessions. Typically, JDC Treatment Staff will meet with the family at least a once a month to discuss progress, setbacks, and the continuing needs of the family. With the concurrence of the JDC Judge, other family focused services can be substituted for these sessions.

Participation in the Parental Support Program is required of all parents, stepparents, guardians, and custodians who are parties to the juvenile's petition for as long as their child is a Drug Court participant, including periods where the client is not an active participant. Parents are responsible for arranging make-up sessions with the treatment staff any time they miss a required session. In exceptional circumstances, parents may petition the JDC Judge, in writing, to be exempted from program participation. The JDC Judge, in consultation with the JDC Treatment Team, may deny or grant their request in whole or in part.

In addition to participating in the basic components of the Parental Support Program and court hearings, parents, stepparents, guardians, and custodians who are party to the juvenile's petition may be required by the Court to engage in additional activities. Additional activities may include such things as marriage, family, or individual counseling, substance abuse counseling, AA/NA meetings, random drug or alcohol testing, warrantless searches of their home, or even inpatient treatment. These additional activities may be ordered any time the JDC Judge deems it necessary to support the child's progress in the JDC program. Parents, stepparents, guardians, and custodians may petition the Court to reconsider such orders. Failure to comply with any program requirements or other orders of the Court may result in the imposition of sanctions. Sanctions may, among others, include a verbal or written warning, assignment of community service, or being held in Contempt of Court.

6.1.2 Family Counseling

At various points throughout the program, families of clients participate in family counseling. These sessions help families cope with changes and challenges from a positive perspective. Family sessions also help the family to provide support to their child while in the program and after graduation.

6.1.3 Individual Counseling

Throughout the program, including Aftercare, clients participate in individual counseling sessions. Individual sessions help participants make better use of the group experience and provide them an opportunity to address personal issues and progress. The goal of treatment is positive social interactions and to promote an increase in the confidence and skills they possess in order to navigate the complicated adult world in which they will soon find themselves.

6.1.4 Participant Groups

Participants participate in three different groups. Participants work with the treatment staff on issues surrounding substance abuse, on developing life skills and on MRT.

6.1.4.1 Topic Group – Substance Abuse

The Substance Abuse component addresses the following topics:

- **How did I get here?**
 - Life and Addiction History
 - When Did I Begin?
 - What led me here?

- **Warning Signs**
 - Identifying Triggers
 - Evaluating High Risk Situations

- **Healing the Hurts**
 - Mending Fences
 - Regaining Trust
 - Starting Over

- **Sobriety Checklist**
 - Why Stay Sober? Evaluating the Pros/Cons of use when things are hard.
 - Who are my safe people?
 - Who should I avoid?
 - Where else can I find help?

- **Making Plans**
 - Identifying Potential Barriers
 - Self-defeating vs. Effective Thoughts
 - Challenging Justification

- **Changing My Playground**
 - Choices
 - Can I stay on track and keep my old friends?
 - Establishing new relationships

- **Old Habits Die Hard**
 - Changing/Eliminating old patterns
 - Positive Self-Talk/Mantras
 - Practice-Practice-Practice
- **Maintenance**
 - Staying On Track
 - Recognizing Recurring Triggers
 - When to Ask for Help

6.1.4.2 Topic Group – Life Skills

The Life Skills component addresses the following topics:

- **Assertiveness/Positive Communication**
 - Conflict Resolution
 - Thought Stopping
 - Impulse Control
- **Trust/Intimacy**
 - Vulnerability
 - Barriers to Intimacy
- **Time Management**
 - Goal Setting
 - Delayed Gratification
 - Awareness
- **Self-Care**
 - Stress
 - Nutrition
 - Sleep
 - Hygiene
- **Healthy Relationships**
 - Family Roles/Dynamics
 - Sexism/Gender Roles and Expectations
 - What can you do when others around you can't/won't change?
 - Healthy vs. Unhealthy Emotions
- **Emotional Regulation**
 - Anger Management
 - Situation Appropriateness
 - Thought Stopping
 - Respecting Others' Emotions
 - Cognitive Distortion
 - Choices

- Mood Management
- **Self-Esteem**
 - What Do I like About Me?
 - What Do I Dislike About Me?
 - Everyone Has Roles – What is mine?
- **Coping Skills**
 - Grief/Loss
 - Unfairness

The third type of group is Moral Reconciliation Therapy (MRT®) developed by Drs. Robinson and Little. MRT® is closely integrated with the phase advancement and is described in detail below.

6.1.4.3 Moral Reconciliation Therapy (MRT®) Group/Program Phases

MRT® groups incorporate cognitive therapy, motivational therapy, and behavioral modification, through the course of twelve progressive steps. The JDC Treatment Staff administers MRT® into four distinct phases:

6.1.4.3.1 Phase I

Introduction (Minimum Eight Weeks)

Phase I consists of a baseline drug screening and introduction to the rules, incentives, and sanctions of the program. Participants are stabilized into the routine of groups, drug court reviews, and other drug court expectations. They attend at least one activity each week intended to contribute to their personal, spiritual, educational, or cultural growth. These activities are referred to as Individual Improvement Activities. Juveniles are drug tested randomly by surveillance officers or other team members, and must have at least two consecutive weeks of clean drug screens in order to advance to the next phase. Unless on Home Detention, typically clients in Phase I must comply with a 7:00 p.m. curfew on Sunday - Thursday and 7:30 p.m. on Friday and Saturday, or another curfew set by the JPPO.

They are required to attain Step III of the MRT®, and show progress commensurate with their abilities in groups, individual counseling sessions, and physical training, as well as, at school, work, and on probation. All missed groups or meetings must be made up before participants may advance to the next phase. Also, during Phase I, JDC participants undergo further assessment of individual needs that becomes the basis for their individual treatment plan.

Phase I MRT® Steps:

Step I: Honesty

During this step, participants begin to discuss dealing with difficulties and problems in their lives and taking control of their lives. An essential part of this is that the juveniles recognize that they are a source of problems in their lives. The “Pyramid of Life” exercise is completed. Honest, sincere statements must be made by participant, in front of the group about the role of alcohol, drugs, lies, cheating, jealousy, and other problems in their lives.

Step II: Trust

Participants make a choice to trust themselves and to trust in the program for help. They also choose to trust others in the same situation and have faith that they can overcome their problems. The “Shield and Life Mask” and “Life Wheel Exercises” are completed. Participants also recognize that there is, within oneself, a strong desire to better themselves. Participants also identify positive qualities in themselves and begin to trust that the program will help them.

Step III: Acceptance

Participants must become adaptable to situations and conditions in which they find themselves. They must come to understand that their beliefs often get in the way of happiness and that they have to learn how the world operates. The emphasis in this step is acceptance that all of one’s beliefs, attitudes, and habits are not right. To accomplish this step, participants must show the ability to accept the program’s concern, criticism, and the consequences resulting from actions without becoming argumentative. The “Worries, Wants, Needs” exercise is completed during this step.

6.1.4.3.2 Phase II

Stabilization (Minimum Ten Weeks)

In order to advance into Phase II, participants are expected to have met or exceeded the expectations described in Phase I. Participant and family treatment interventions continue as required by their treatment plan. During Phase II, participants continue to work through their MRT® steps and begin to recognize the value of a drug free lifestyle. They continue to be drug tested randomly and must have at least four consecutive weeks of clean drug screens in order to advance to the next phase. Unless on Home Detention, typically clients in Phase II must comply with a 7:30 p.m. curfew seven days a week, or another curfew set by the JPPO.

They are also required to attain Step VI of the MRT®, and show progress commensurate with their abilities in the groups, individual counseling sessions, and physical training, as well as, at school, work, and probation. All missed groups or meetings must be made up before participants may advance to the next phase. When gender or culturally specific issues emerge, the clients are referred to a mentor, same sex counselor, medical consult, or other appropriate resource.

Phase II MRT® Steps:

Step IV: Awareness

Participants must fully assess their present life and become certain of all the things that comprise their life at the time of their admission to the program. The participant must become totally aware of the things that make up his/her life. Completion of the “Things in My Life” exercise illustrates the many activities included in daily life, family life, work, spirituality, recreation and relaxation, physical health and several other areas. This exercise is a way for participants to begin learning how to make priorities relating multiple aspects of life.

Step V: Healing Damaged Relationships

Participants must begin to repair the injury that they have caused to themselves and others by assessing each of the important relationships in their lives and then starting to work towards repairing them. The essence of this step is healing damaged relationships. This means taking full responsibility for their actions. The exercises “Best of Times/Worst of Times” and “Circle of Relationships” assists in identifying relationships that need healing, and outline important relationships in the participant’s life. Additionally, these exercises allow participants to identify specific people they have hurt, identify what occurred to damage that relationship, and to set a specific course of action to heal that relationship.

Step VI: Helping Others

The participant begins to help other people, especially those people who will give nothing in return. A minimum of ten hours of helping others is undertaken during this step. One-on-one discussions are conducted and documented with other members of the MRT® group in which the participant addresses specific questions relating to what brought them into the program. This step also serves to increase the trust and bonding within the group as they undergo treatment together. The last requirement of the step is to complete a “Trading Places” exercise where the participant identifies someone he/she admires, the admirable qualities of that person, and why he/she might like to have those qualities.

6.1.4.3.3 Phase III

Maintenance (Minimum Six Weeks)

During this phase participants are required to attain Step IX of the MRT® and continue to comply with all other aspects of the program as discussed above and are required to have six consecutive weeks of negative drug screens before advancing to the next phase. Unless on Home Detention, typically clients in Phase III must comply with an 8:00 p.m. curfew seven days a week, or another curfew set by the JPPO.

Phase III MRT® Steps

Step VII: Long-term Goals and Identity

Participants must make goals and act and think in accordance with those goals. The step stresses long-term goals and identity. Participants are familiarized with the importance of goal setting and how to initiate the process. Exercises are completed in which the participant is asked to define one, five, and ten year goals. Once those goals are defined, the participant is asked to devise an action plan that will facilitate the accomplishment of those goals.

Step VIII: Short-term Goals and Consistency

Participants learn to give up the idea of always being right about the way the world is and the way the world should be. In this step, the participant looks at short-term goals and consistency. Participants are taught how to define action steps for reaching long-term goals. This step also requires completion of an action plan for reaching the one-year goals defined in Step VII.

Step IX: Commitment to Change

This step stresses the concept of never giving up; or, never conceding to failure. It stresses the idea of conceding and learning from mistakes. At this step, commitment to change is key. Fulfilling the step requires the participant to actively work on their individual action plan and not give up in achieving that plan. It is a review and redoing of Step VI, including another ten hours of helping others, additional one-on-one discussions with group members, and documentation that one has met the appropriate deadlines contained in the action plan.

6.1.4.3.4 Phase IV

Self-Maintenance (Minimum Twelve Weeks)

This is one of the most demanding phases of the program. During Phase IV, participants must attain step XII of the MRT®; and continue with individual counseling sessions. For the first four weeks, participants attend all of the groups discussed above. In the second

four weeks, participants attend only two groups each week and begin to work on post-graduation plans including formulation of an on-going relapse/continuing care plan with the Treatment Staff. The final four weeks requires attendance at the MRT® group exclusively. Participants continue to be randomly drug tested and are required to have twelve consecutive weeks of negative drug screens before being eligible for graduation. Unless on Home Detention, typically clients in Phase IV must comply with a 9:00 p.m. curfew seven days a week, or another curfew set by the JPPO.

Phase IV MRT® Steps:

Step X: Maintain Positive Change®

Participants are encouraged to recognize the negative, unethical attitudes, beliefs, and behaviors that they possess. Additionally, once those issues are recognized, the participant is encouraged to work systematically to eliminate them. This step emphasizes maintaining positive change. It requires patience, self-discipline, and self-insight. It is also at this point that the development of new attitudes, beliefs, and habits are beginning. To fulfill this step, an assessment of the present elements in one's life is completed (as done in Step 4) that includes a review of each element from a moral standpoint. This is done through the "Moral Assessment" exercise and by selecting the five biggest problem areas and noting actions required to address these areas. The "Trading Places" exercise done in Step VI is revisited.

Step XI: Keeping Moral Commitment

The participant is encouraged to become firm in his/her conviction to ethical behavior. They must become involved with other people in both meeting goals and helping others meet goals. Being involved with others in mutually rewarding and fulfilling projects is a requirement that must be completed before the participant may move up. The "Best of Times/Worst of Times" and "Circle of Relationship" exercises help to focus on the importance healthy relationships. Additionally, the participant is responsible for preparing a brief summary of the important things learned throughout the previous eleven steps of the program. The summary is prepared in written form for oral testimony to the group and to the JDC Team.

Step XII: Choosing Moral Goals

The participant is encouraged to reassess their life's master plan with the purpose of becoming the best person that they are capable of becoming. They are asked to look carefully at beliefs, attitudes, and behaviors using principles as guidelines. The step is about choosing moral goals that are healthy as well as productive. Completing this step requires preparation of a new master goal plan and a statement of why each goal is chosen and how that goal will lead to the individual's happiness. These goals are prepared in written form for oral testimony to the group and to the JDC Advisory Committee.

6.1.5 Other Treatment Requirements

An additional requirement is attendance at a cultural event. Finally, participants are closely assessed to determine whether they have demonstrated an understanding of, and displayed behaviors consistent with the concepts and values offered through MRT and the JDC Program.

6.2 Drug and Alcohol Testing

Random drug and alcohol testing takes place throughout the course of the program, including Aftercare. The frequency and the type of test are based on the Program phase and the individual needs of the client. The most common forms of testing are urinalysis, saliva analysis, and breath analysis. Breath analysis is completed through the use of instruments that detect for the presence of alcohol. Urinalysis tests can be either of the on-site or laboratory type that test for the presence of all commonly abused substances. Participants who have an initial positive result for the presence of alcohol or other prohibited substances are given the opportunity to corroborate the result with a written admission of use. All positive tests must be corroborated either through observation, a signed admission by the participant, a GC/MS test, or a fully calibrated testing instrument. Quantitative results for the presence of THC are always measured and reported. Creatinine levels are also tested and monitored in order to identify flushing and to differentiate past use from new use. Sanctions are administered as soon as possible following corroboration of a use.

6.3 Surveillance

Surveillance is conducted according to the **Surveillance and Drug Testing Procedures Manual** and is designed to promote individual accountability. The minimum number of field contacts and drug tests are tied to the participant's phase in the Program and are listed below. However, Surveillance Officers are free to exceed these minimum established standards. Generally, breath samples are analyzed each time a Surveillance Officer makes contact with a participant in the field.

- Phase I – Average of three (3) drug tests and five (5) field contacts per week;
- Phase II – Average of three (3) drug tests and four (4) field contacts per week;
- Phase III - Average of two (2) drug tests and three (3) field contacts per week;
- Phase IV – Average of two (2) drug tests and two (2) field contacts per week; and,
- Aftercare – Average one (1) drug test and one (1) field contact per week.

6.4 Physical Training

Participants participate in a weekly Physical Training (PT) session. Sessions are supervised by members of local Law Enforcement, who may be assisted by JDC Surveillance Officers. A typical PT session involves basic stretching exercises, calisthenics, followed by an activity such as basketball, hiking, swimming, etc.

These PT sessions serve two primary purposes. First, it provides participants an opportunity to interact with law enforcement officers and other authority figures in a different environment where they can develop supportive relationships with them. PT also provides participants a means to relieve stress, allay depressive symptoms (through the release neurotransmitters), develop physically, and to feel good about their physical accomplishments.

6.5 Case Staffing and Team Reporting

Prior to the Judicial Review, the JDC Treatment Team members report to the JDC Judge on individual participants' performance and make recommendations regarding sanctions, incentives or other matters the JDC Judge may care to address with the participant during the Judicial Review. JDC Treatment Team members refrain from disclosing information presented during these case staffings. At this meeting and at the subsequent Judicial Review, team members report as appropriate on the following matters:

The Juvenile Probation Officer reports on:

- Significant interactions with the participant;
- Progress on probation;
- General information on the juvenile's well-being (including family situation and environment); and,
- Results of drug screens; and,
- Attendance and performance at school and work.

JDC Treatment Staff and the Administrative Support Staff provide information on:

- Individual compliance with program requirements (i.e., meeting attendance, assignment completion, etc.);
- Progress on the MRT® continuum;
- Significant issues raised in group, family, or individual meetings with the participant or their parents;
- General information regarding the emotional and mental status of the individual, including any family issues; and
- Parental attendance and participation in the Parent Support Group and other required activities.

Law enforcement officers report on:

- Individual participation and attendance at community service and physical training sessions; and,
- Other information regarding an individual's status as deemed appropriate.

Surveillance Officers report on:

- Issues observed in the participant's home during visits;
- Probation and Program violations (i.e., curfew, possession of contraband items, etc.); and,
- Substance abuse testing and incidents occurring in conjunction testing (i.e., stalls, attempts to adulterate urine, etc.).

Those team members submitting written documentation must submit it to the JDC Program office the day prior to the scheduled Judicial Review. Documentation is then compiled by the JDC Administrative Support Staff and presented to the JDC Treatment Team during case staffings. Case Staffings occur immediately preceding the Judicial Progress Reviews.

6.6 Judicial Progress Review

A key component of the Drug Court Program is the review of each individual's and family's progress conducted every other week by the JDC Judge. At the Judicial Progress Review, each participant appears before the JDC Judge along with their parent or guardian and the Defense Attorney. During this appearance, the participant reports on their treatment, educational, social, employment, and emotional status. A key issue in reporting is accountability for both positive and negative actions. Individual testimony, combined with input from the JDC Treatment Team, give the Judge a basis for decisions, including determining whether a participant has earned sanctions or incentives.

6.7 Sanctions and Incentives

Within the JDC Program, there is a continuum of sanctions from least to most restrictive. Participants that fail to comply with drug court expectations and rules may have one or more sanctions imposed. Sanctions and incentives are generally administered during Judicial Review Sessions, however; in some circumstances, an immediate response is more therapeutic. These sanctions typically begin with community service and move toward more severe sanctions such as electronic monitoring. For major or repeated violations, the most severe sanctions, such as detention or termination from the program may be ordered. There are a number of reasons that discharge from the JDC program may be ordered including:

- Failure to comply with program rules and expectations;
- Inability to provide clean drug screens over an extended period of time; and
- Commission of offenses that result in program ineligibility.

It is important to note that when imposing sanctions at any level, all factors of the participant's life and compliance with the program are considered. Participants should not expect that sanctions imposed for a particular violation on a particular day for one client will be the same sanction imposed on another day, for another client, for what might otherwise seem to be the same violation.

Parents are also subject to the orders of the Court and are expected to support the JDC process and their child's recovery. Parents or guardians who are parties to the petition may be held in Contempt of Court for failures to comply with the orders of the Court or may receive other sanctions as are appropriate to the circumstances.

Like sanctions, incentives are also determined on an individual basis. Incentives may range from congratulations and encouragement to the court providing movie passes, gift certificates or other benefits to those who have been drug free and performed exceptionally well in the Program. Exceptional performance may include attending extra AA or NA meetings, volunteering to work more often than required, performing program requirements in a particularly noteworthy manner, or dedicating extra time to Program activities. The decision to award incentives to a participant is also based on behavior, performance, and input from the entire JDC Team.

6.8 Transportation Support

The JDC is committed to providing its services to juveniles and families from all areas of Lincoln County and from families of all races, cultures, religions, ethnicities, and economic backgrounds. Because Lincoln County encompasses a large rural area, some families would not be in a position to participate in the JDC without some transportation support. Each participant's family bears the primary responsibility for transportation to and from JDC activities. In recognition that each family has access to differing levels of resources, all families are granted limited access to short-term transportation support to be used at their discretion. Longer-term support may be granted by the JDC Judge upon recommendation of the JDC Team and consistent with budgetary constraints.

6.9 Program Completion and Termination

Graduation from the JDC program is achieved when the individual satisfies all program requirements. In most cases, the participant will be awarded a Certificate of Completion and a memento from the Program during a formal graduation ceremony. At graduation, the participant will have completed Phase IV, and;

- Attended and reported on at least one cultural event (i.e., play, symphony, multi-national festival, art exhibit, etc.); and,
- Demonstrated substantial progress toward achievement of treatment, educational and vocational goals; and,
- Have obeyed the law and substantially complied with their probation agreement; and,

- Will have addressed the JDC Advisory Committee, discussing their participation in the program and their one, five, and ten year goals.

Participants may also be awarded graduate status when, upon recommendation of the JDC Team, the JDC Judge determines that Program objectives have been achieved through participation in alternative programming.

When discharge from the program is recommended, the JDC Judge will solicit input from each Team Member. The JDC Judge is the ultimate discharging authority for individuals in the program. If an individual is discharged from the program, a discharge summary is prepared by the JDC Treatment Staff and is forwarded to the Juvenile Probation Office within 14 days of discharge.

Participants who are neither graduated or terminated from the Program, but are not appropriate for continued participation, may upon recommendation of the JDC Team, and with the approval of the JDC Judge, be technically discharged. Participants who are technically discharged are not subject to probation revocation upon that basis.

6.10 Aftercare

Aftercare is a critical component of the JDC program and is key to the continuing sobriety and success of graduates and their families. Aftercare is six months in length; a minimum of three months is mandatory. The purpose of aftercare is to assist the graduate and the family in successfully transitioning from the structured and supportive environment of the JDC program into a more normal lifestyle. During Aftercare, graduates continue to be monitored and drug tested by Surveillance Officers, as well as, other members of the team. Graduates are:

- Expected to maintain a substance-free, law abiding lifestyle;
- Encouraged to attend JDC Groups as often as they find it helpful but as a minimum, they must arrange to participate once a week in a JDC Group four (4) times a month for the first (1st) month of Aftercare, two times a month for the second (2nd) month of Aftercare, and during the third (3rd) month of Aftercare (at the discretion of the JDC Treatment Team) either participate in one (1) JDC Group or prepare and make an approved presentation to the JDC group;
- Expected to participate in family and individual sessions as deemed appropriate by the JDC Treatment Staff; and,
- Encouraged to participate in PT throughout Aftercare; and
- Unless on Home Detention, comply with a 9:30 p.m. curfew seven days a week, or another curfew set by the JPPO.

In the event that circumstances arise that indicate that a graduate is not appropriate for continued Aftercare services, the JDC Program Director, after consulting with the JDC Program Staff and the Juvenile Probation Officer, may give notice of termination of all or a portion of Aftercare services.

7.0 Counselor Licensure

Licensed mental health professionals, or interns pursuing licensed status, provide the clinical treatment for the JDC Program. All providers receive the level of supervision as is required by their profession and the laws of the State of New Mexico.

8.0 Tracking Progress

During the course of a juvenile's involvement with the JDC, records are maintained by JDC Administrative Support Staff. Each individual's progress is tracked and contains the following documentation:

- Initial Referral Information;
- Participant intake screening/information;
- Drug Court Contract and Request for Admission;
- Parental/Individual consent to release information;
- Consent for Drug Screen and Analysis;
- JDC Consent to Treatment and Limits of Confidentiality forms;
- Signed Receipt for Participant & Parent Handbooks;
- Participant/Family Treatment Plans;
- Psychiatric & Psychological Assessment (where applicable);
- Group and individual session notes;
- Program Activities & Incident Reports;
- UA results;
- Semester Grades including GPA;
- Personal Statements;
- JDC Judicial Review Forms; and
- Other relevant information.

Upon graduation, the JDC Administrative Support Staff provide copies of the current treatment plans, and discharge summary to the Juvenile Probation Office.

9.0 Program Administration

9.1 Court Orders

Orders issued by the JDC Judge pertaining to purely drug court matters are to be prepared and filed with a Miscellaneous Cause Number and maintained in a sequestered file.

9.2 Administrative Reporting

As a program that depends entirely on public monies, it is critical that financial and non-financial reporting by both the program office and service providers be consistent with all applicable state and federal guidelines. The Program Director is responsible for ensuring

that all required programmatic reports are accurate and are submitted in a timely manner in accordance with state and federal guidelines.

9.3 Contractual Agreement for Services

Contractual agreements between service providers and the 12th Judicial District JDC Program will be consistent with all governing state and federal guidelines.

9.4 Performance Measures

The JDC Program Director is responsible for collecting necessary data and reporting on all required performance measures in accordance with funding source requirements, as well as state, and federal standards. As a minimum, the following measures will be calculated and reported quarterly:

- Percentage of substance free drug screens;
- Graduate re-referral/re-arrest rate;
- Percentage of participants showing improved GPAs since program admission; and
- Rate of parental participation in the Parent Support Group.

9.5 Out-processing

The purpose of out-processing is to provide continuous feedback to the JDC Treatment Team concerning the quality of the Program. Out-processing occurs just prior to graduation from the JDC program. An exit interview is conducted first with the participant and then the parents. At the time of out-processing, the JDC Treatment and Administrative Support Staff meet with the parents and the participant to conduct an exit interview and to assist them in completing appropriate evaluation instruments. Upon completion of out-processing, the JDC Treatment Staff will forward within 14 days, the results to the JDC Program Director for analysis and dissemination to members of the JDC Treatment Team and JDC Advisory Board for their review.

10.0 Summary

Policies and procedures alone cannot make a program successful. There is a key role, however, for a policy and procedure manual within a successful program. A clearly defined vision and mission provide strategic direction. Objectives outline the conditions through which the vision and mission are accomplished. Operating procedures define an action plan for team members to follow; and, roles and responsibilities establish who is responsible and accountable for carrying out those actions. Like any organization, the JDC Program is an open system that is influenced by its operating environment. As such, it will be necessary to alter the program's policies and procedures as that environment changes. Any future changes to this manual, or the JDC Program, however, should uphold the vision and mission of the program and be consistent with national and regional guidance for Juvenile Drug Courts.