



Where Did All Our
Clients Go?
Using Data to Explore
Barriers to Entry

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Learning Objectives

- Understand the sources of data that can and should be used to gain an understanding of your potential referral pool.
- Filter data to understand the total number of eligible participants.
- Explore “artificial barriers” that impact entry into the treatment court.
- Develop action plans to implement changes after completion of a data analysis exercise.



A wooden boardwalk made of light-colored planks winds through a vast, grassy dune landscape. The path curves from the foreground towards the middle ground, leading the eye into the distance. The dunes are covered in tall, green grasses and some purple flowers. In the background, there are more dunes and a line of trees under a cloudy, overcast sky.

Explore

- Is your Treatment Court at capacity in terms of number of client the team and providers can serve?
- How was this number originally calculated/determined?
- What do you believe may be barriers to entry?
- Why bother?

Steps to Using Data to Identify Service Population

Create

Create workgroup & review current referral and entry protocols



Collect

Collect data to understand the scope of the need.
Analyze current practices



Provide

Provide training to stakeholders in the justice system

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Step One:

Create Workgroup & Review Current Practice

Step One

- You can't do this alone!
- Create data workgroup – ensure representation by prosecutor and defense.
 - Sources of data will also drive some of workgroup composition
- Meet outside of regular staffing or policy meetings
- Set realistic timelines
 - Begin with review of current eligibility criteria and process for entry.
 - Review best practice standards
 - Discuss sources of data
 - Contacts
 - Barriers

Example: Adult Drug Court National Best Practice Standards – Standard One (!)

- **Objective Eligibility and Exclusion Criteria:** Eligibility and exclusion criteria are defined objectively, specified in writing, and communicated to potential referral sources including judges, law enforcement, defense attorneys, prosecutors, treatment professionals, and community supervision officers. The Drug Court team does not apply subjective criteria or personal impressions to determine participants' suitability for the program.
- **High-Risk and High-Need Participants:** The Drug Court targets offenders for admission who are addicted to illicit drugs or alcohol and are at substantial risk for reoffending or failing to complete a less intensive disposition, such as standard probation or pretrial supervision. These individuals are commonly referred to as high-risk and high-need offenders. If a Drug Court is unable to target only high-risk and high-need offenders, the program develops alternative tracks with services that are modified to meet the risk and need levels of its participants. If a Drug Court develops alternative tracks, it does not mix participants with different risk or need levels in the same counseling groups, residential treatment milieu, or housing unit.
- **Validated Eligibility Assessments:** Candidates for the Drug Court are assessed for eligibility using validated risk-assessment and clinical-assessment tools. The risk-assessment tool has been demonstrated empirically to predict criminal recidivism or failure on community supervision and is equivalently
- **Criminal History Disqualifications:** Current or prior offenses may disqualify candidates from participation in the Drug Court if empirical evidence demonstrates offenders with such records cannot be managed safely or effectively in a Drug Court. Barring legal prohibitions, offenders charged with drug dealing or those with violence histories are not excluded automatically from participation in the Drug Court.
- **Clinical Disqualifications:** If adequate treatment is available, candidates are not disqualified from participation in the Drug Court because of co-occurring mental health or medical conditions or because they have been legally prescribed psychotropic or addiction medication.

Example: OJJDP JDTC Guidelines

2.1 – Eligibility criteria should include the following: Youth with **substance use disorder**; who are **14 years old or older**; and who have a **moderate to high risk of reoffending**

2.2 – Assess for risk of reoffending using a validated instrument

2.3 – Screen for substance use with a validated, culturally responsive assessment

2.4 – Divert youth who do not meet criteria

2.5 – Ensure that eligibility criteria results in equity of access

Sources of Data

- Drug Court MIS
- State Patrol
- Local Law Enforcement
- Administrative Office of the Courts
- Probation (risk/need assessment results)
- Jail/Pretrial (screeners)
- Prosecutor filings
- Health Department
- Others – discuss!



Step Two

Develop Data Request and Collect Data

```
mirror_mod = modifier_ob.  
#set mirror object to mirror.  
mirror_mod.mirror_object =  
#operation == "MIRROR_X":  
mirror_mod.use_x = True  
mirror_mod.use_y = False  
mirror_mod.use_z = False  
#operation == "MIRROR_Y":  
mirror_mod.use_x = False  
mirror_mod.use_y = True  
mirror_mod.use_z = False  
#operation == "MIRROR_Z":  
mirror_mod.use_x = False  
mirror_mod.use_y = False  
mirror_mod.use_z = True  
  
#selection at the end -add  
mirror_ob.select= 1  
modifier_ob.select=1  
context.scene.objects.active  
("Selected" + str(modifier_ob.  
mirror_ob.select = 0  
= bpy.context.selected_object  
data.objects[one.name].select  
  
print("please select exactly  
  
-- OPERATOR CLASSES ----  
  
types.Operator):  
X mirror to the selected  
object.mirror_mirror_x"  
mirror X"  
  
context):  
context.active_object is not
```

Frame the Data Request

- Who will this be submitted to?
- Who will write it up or hold meetings to relay the request?
- “Data Use Agreements” necessary?
- Time-frame (e.g. 2019-2020)
- Specific variables
- Individual vs. aggregate
- In what format?
- By what date?

Aggregate vs. Individual Records

- Benefits/drawbacks of each method
 - Data is nuanced – e.g. geography, race/ethnicity
- If pulling individual level records, consider partnering with a local University to provide needed expertise.
- Support from state-level AOC



Collect Data

- Collect data around the population & how many would meet the program/statutory criteria:
 - Risk Level
 - Charge(s)
 - Criminal History
 - Age
 - Race/ethnicity
 - Substance Use Disorder

Where to start? Depends on Availability

- Funnel by –

Legal:

- Charge(s)
- Age

Risk:

High, moderate or low

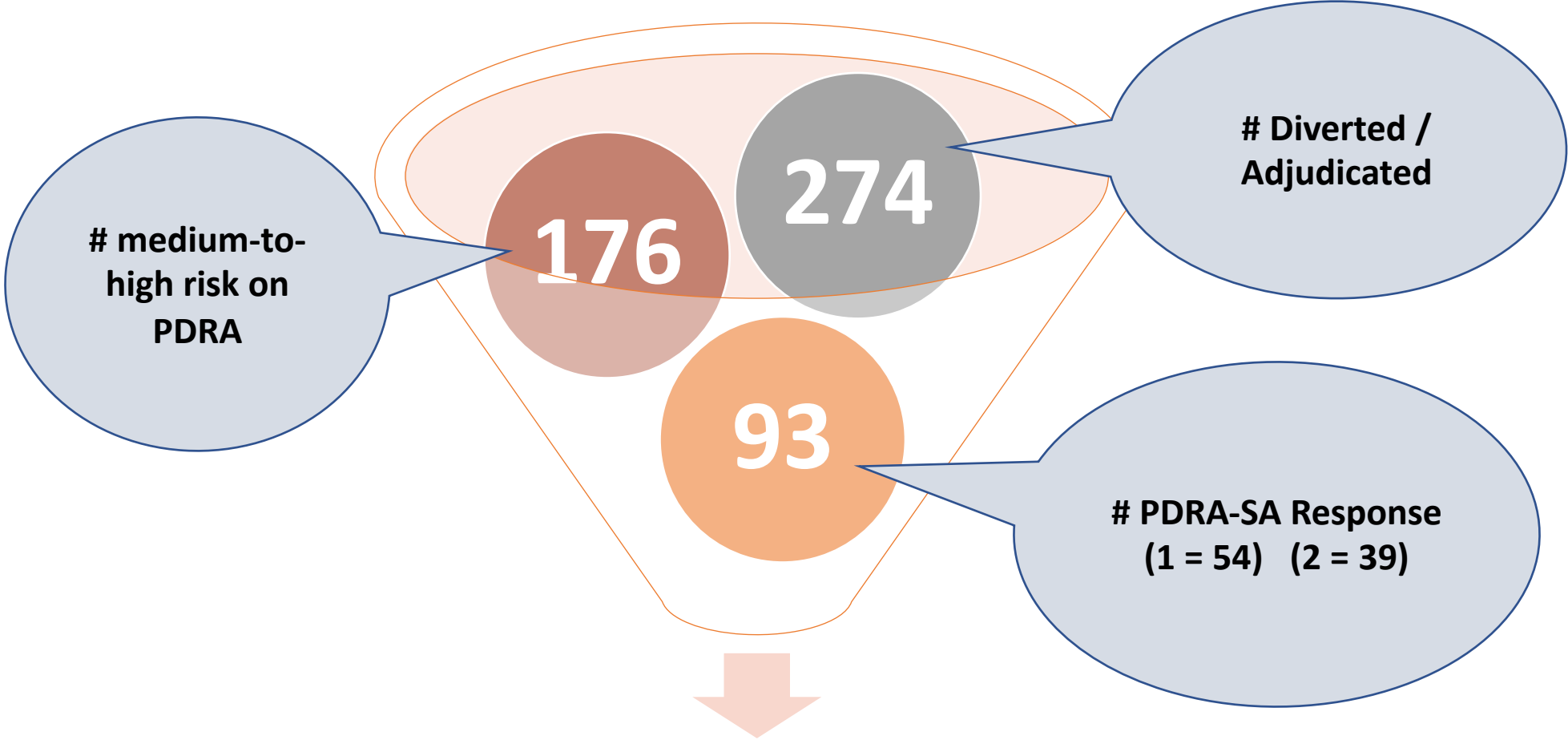
Substance Use:

Flag on screener or risk assessment tool

2,897 Youth Served in Probation, Diversion or Intake during FY2019-20 (14 – 17.5 years old)



Juvenile Court Delinquency Dispositions (Youth Disposed Mar 2019 – Feb 2021)





Qualitative
Data

Consider additional criteria based on local legal considerations and prior practices

Additional Criteria	Barriers	Solutions	Mark for Deletion
Youth/parents or client must voluntarily accept			<input type="checkbox"/>
Serious felony charges			<input type="checkbox"/>
Pre / Post disposition			<input type="checkbox"/>
Violent charges			<input type="checkbox"/>
Other excluded charges			<input type="checkbox"/>

External factors that can impact engagement/referral

External Factor (internal to the TC team)

Adjustment

Parent or guardian must attend court

COVID protocols

Employment

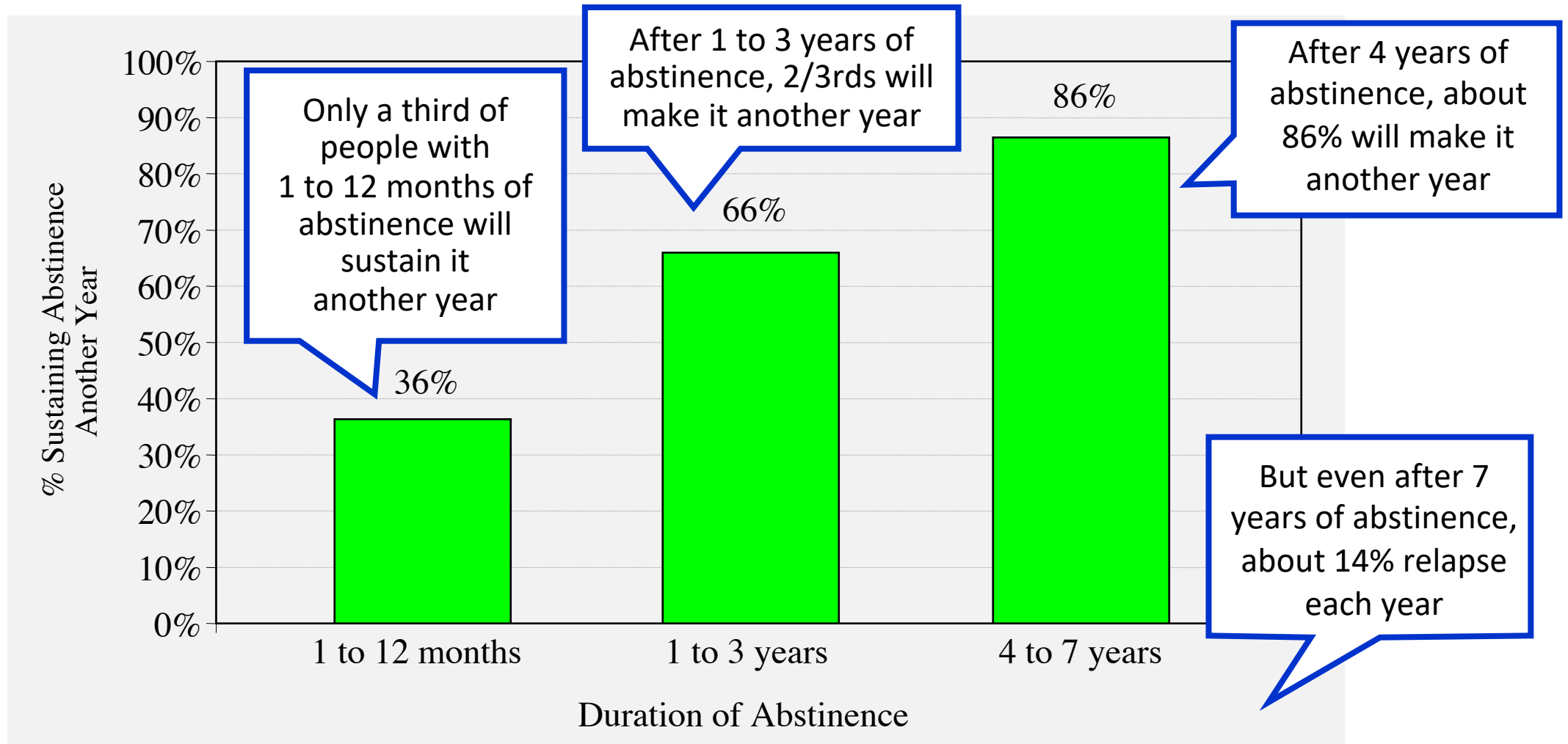
Transportation

Drug Testing (neg)

Housing

Desire

Likelihood of Sustaining Abstinence Grows Over Time



Source: Dennis, Foss & Scott (2007)

Average Progression of Recovery

Duration of Abstinence

1–12 Months

- ✓ More clean and sober friends
- ✓ Less illegal activity and incarceration
- ✓ Less homelessness, violence, and victimization
- ✓ Less use by others at home, work, and by social peers

1–3 Years

- ✓ Virtual elimination of illegal activity and illegal income
- ✓ Better housing and living situations
- ✓ Increasing employment and income

4–7 Years

- ✓ More social and spiritual support
- ✓ Better mental health
- ✓ Housing and living situations continue to improve
- ✓ Dramatic rise in employment and income
- ✓ Dramatic drop in people living below the poverty line

Dennis, M.L., Foss, M.A., & Scott, C.K (2007). An eight-year perspective on the relationship between the duration of abstinence and other aspects of recovery. *Evaluation Review*, 31(6), 585-612.



Summarize Findings





- Present findings to full team
 - Review current procedures
 - Use simple bar charts/graphics
 - Discuss artificial barriers impacting participation
 - Discuss next steps
 - What practice modifications are in your control
 - Outside stakeholder changes
 - Timeline for changes
 - Education/training plan

Name _____

Date _____

Start, Stop, Continue, Change Activity

Choose one thing you want to *Start*, *Stop*, *Continue*, and *Change* in your program and answer the questions for each section to identify your role at improving the program.

 <p>What do you want to start doing in your program?</p>	<p>Barriers to starting this? What do you have control over?</p>	<p>Action What are you able to do?</p>
 <p>What do you want to stop doing in your program?</p>	<p>Opportunities to stop this? What do you have control over?</p>	<p>Action What are you able to do?</p>
 <p>What's working in your program and you want to continue?</p>	<p>Opportunities to continue this? What do you have control over?</p>	<p>Action What are you able to do?</p>
 <p>What do you want to change in your program?</p>	<p>Barriers to change this? What do you have control over?</p>	<p>Action What are you able to do?</p>

Step Three

Training and Securing Support



Training Platforms

Methods:

- Live: In-Person
- Live Virtual
- Remote Modules
- Reading/Homework Packets

Considerations:

- Mandatory vs. Voluntary
- CEU/CLE
- Cross-Agency Collaboration
- Frequency

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Questions?

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