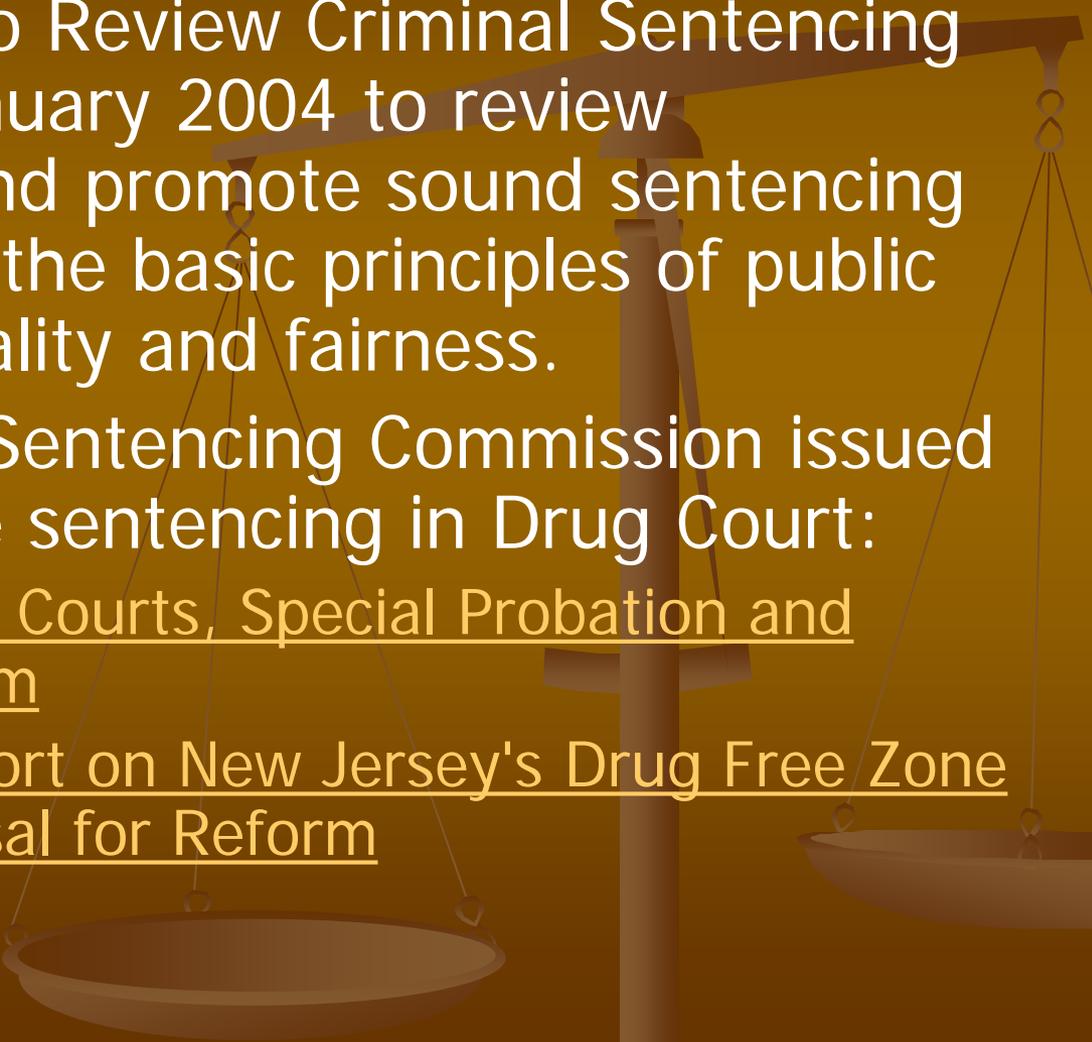




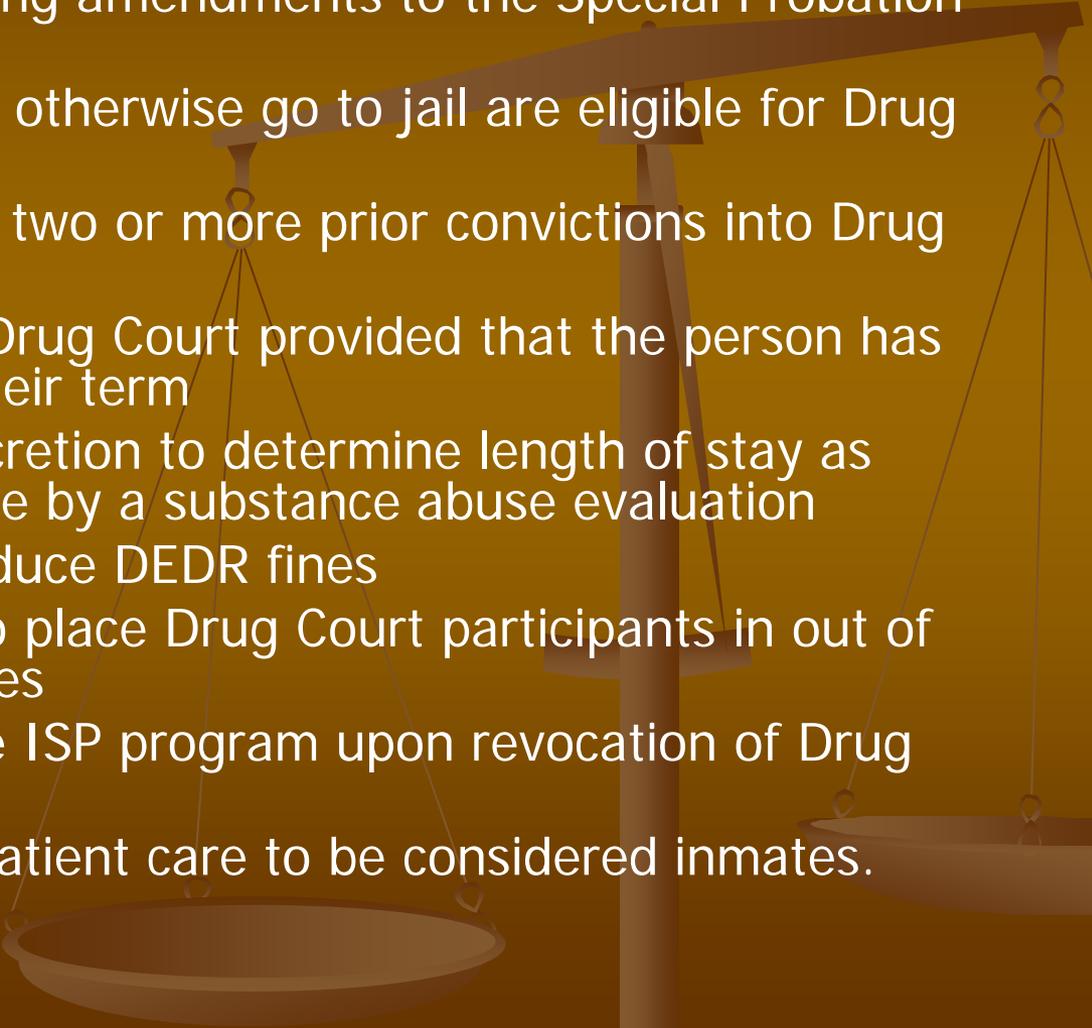
**DRUG COURT EXPANSION  
THROUGH  
GOVERNMENT EFFICIENCY  
AND REFORM (GEAR)**

# History



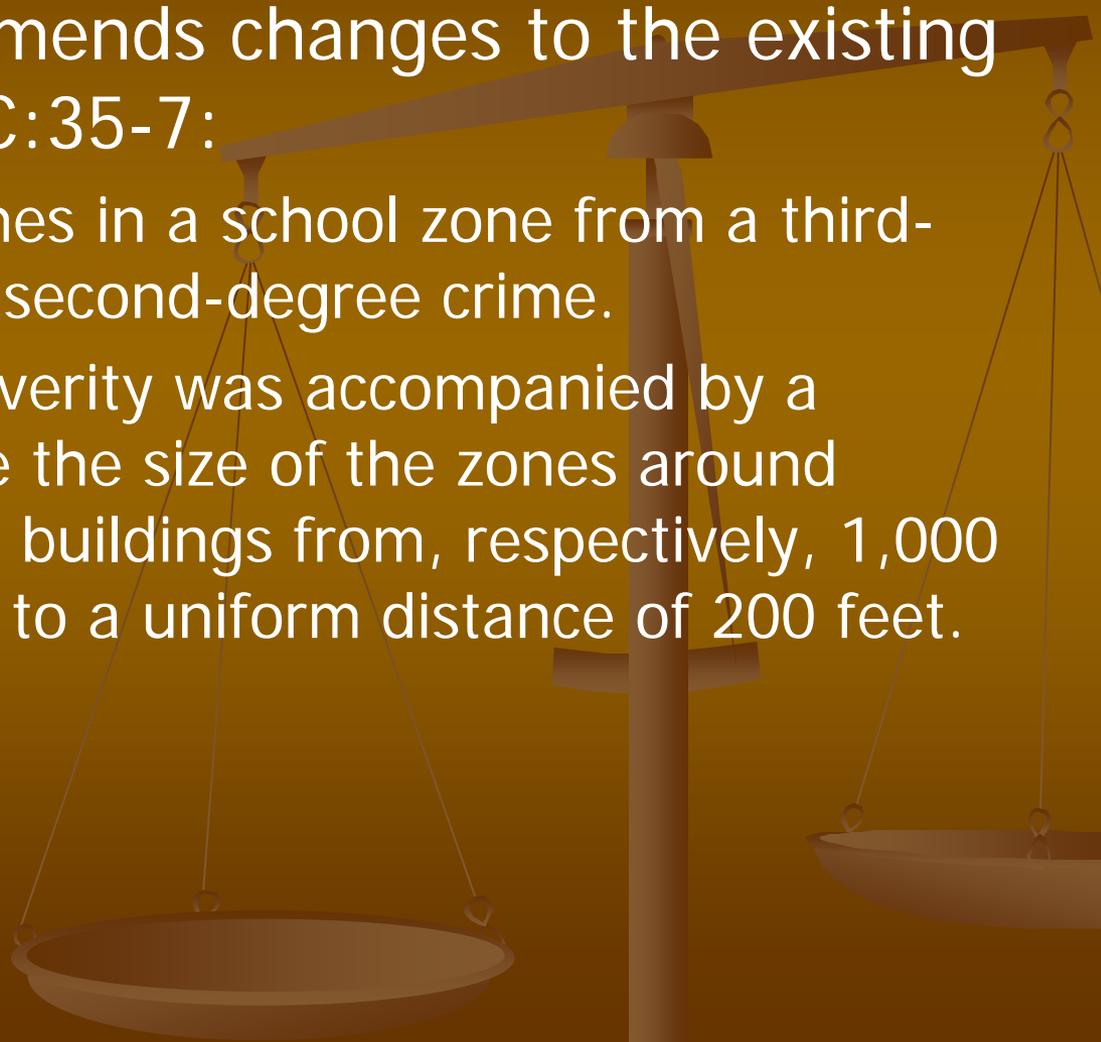
- The Commission to Review Criminal Sentencing was created in January 2004 to review sentencing laws and promote sound sentencing policy founded on the basic principles of public safety, proportionality and fairness.
- In May 2007, the Sentencing Commission issued two reports on the sentencing in Drug Court:
  1. [New Jersey's Drug Courts, Special Probation and Proposal for Reform](#)
  2. [Supplemental Report on New Jersey's Drug Free Zone Crimes and Proposal for Reform](#)

# New Jersey's Drug Courts, Special Probation and Proposal for Reform

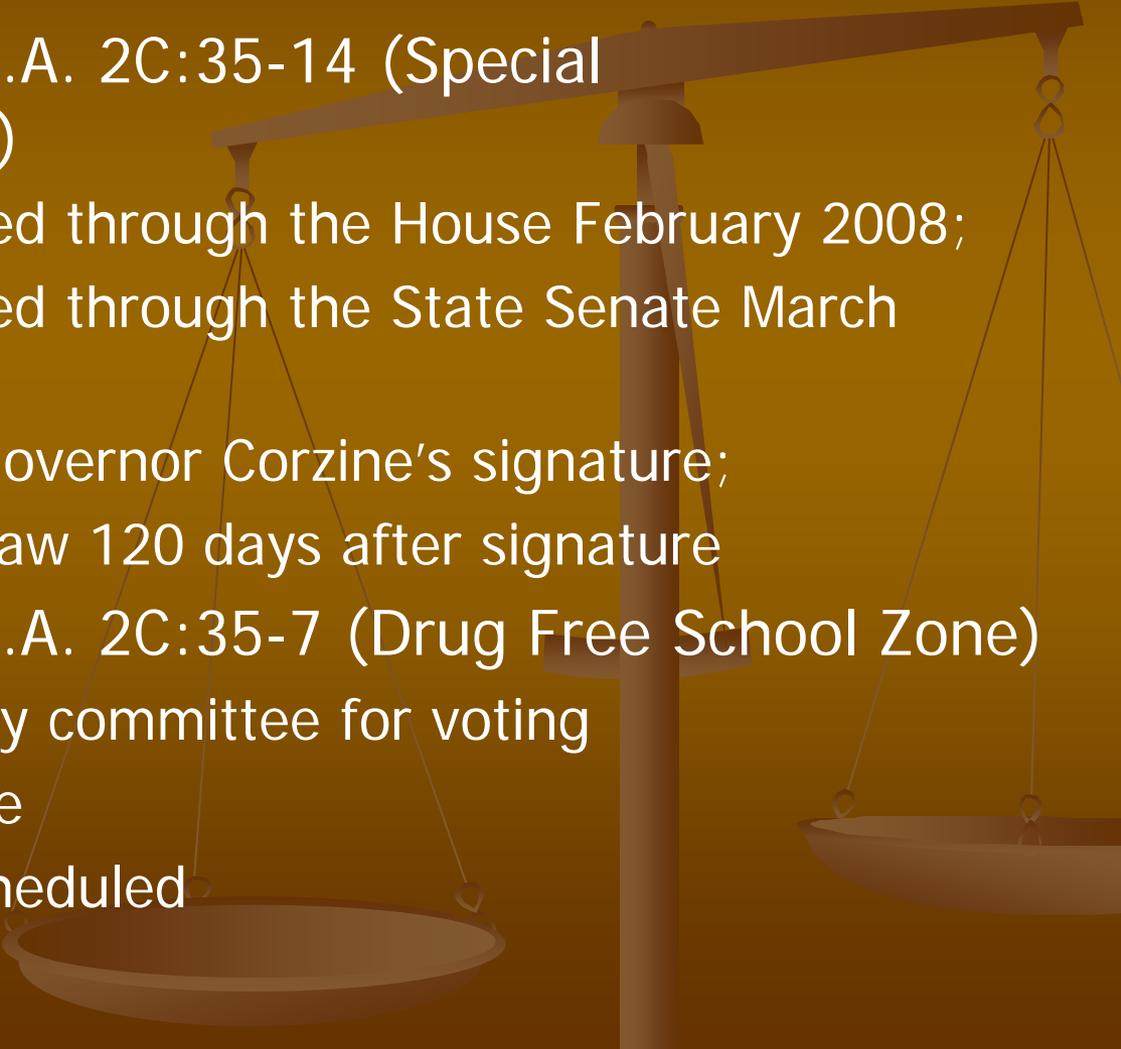
- Recommended the following amendments to the Special Probation Statute NJSA 2C:35-14a:
    - Only those who would otherwise go to jail are eligible for Drug Court
    - Allow defendants with two or more prior convictions into Drug Court
    - Allow early D/C from Drug Court provided that the person has served two years of their term
    - Permit Judges the discretion to determine length of stay as determined appropriate by a substance abuse evaluation
    - Permit the court to reduce DEDR fines
    - Do not allow judges to place Drug Court participants in out of state treatment facilities
    - Allow admission to the ISP program upon revocation of Drug Court
    - Disallow those in outpatient care to be considered inmates.
- 



# Supplemental Report on New Jersey's Drug Free Zone Crimes and Proposal for Reform

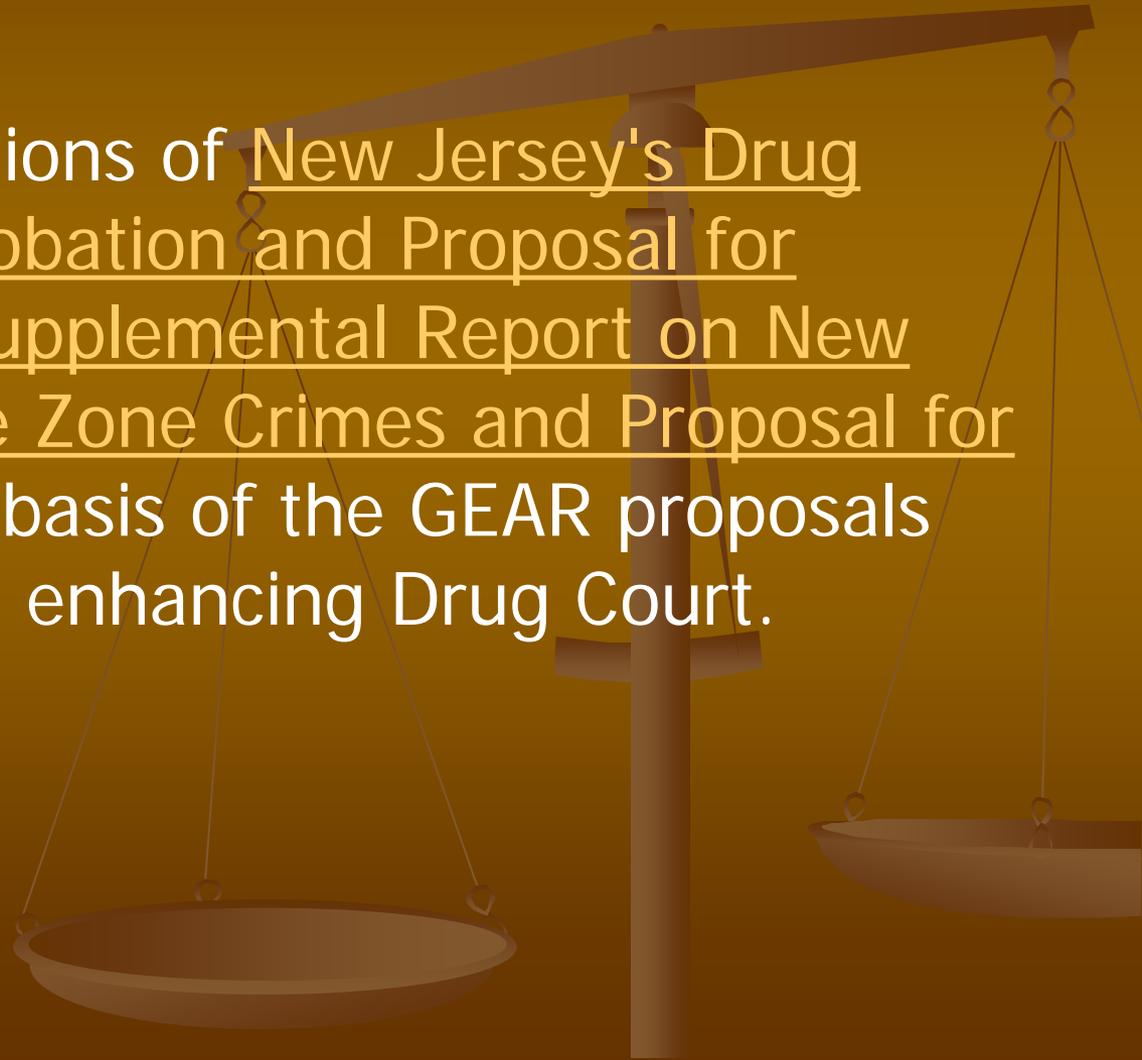
- This report recommends changes to the existing statute, N.J.S.A. 2C:35-7:
    - Upgrade drug crimes in a school zone from a third-degree crime to a second-degree crime.
    - The increase in severity was accompanied by a proposal to reduce the size of the zones around schools and public buildings from, respectively, 1,000 feet and 500 feet, to a uniform distance of 200 feet.
- 

# Where are Legislation/Recommendations now?

- Amendments to N.J.S.A. 2C:35-14 (Special Probation/Drug Court)
    - The legislation passed through the House February 2008;
    - The legislation passed through the State Senate March 2008;
    - Currently awaiting Governor Corzine's signature;
    - Will be passed into law 120 days after signature
  - Amendments to N.J.S.A. 2C:35-7 (Drug Free School Zone)
    - Referred to Assembly committee for voting
    - Introduced to Senate
    - No vote taken or scheduled
- 

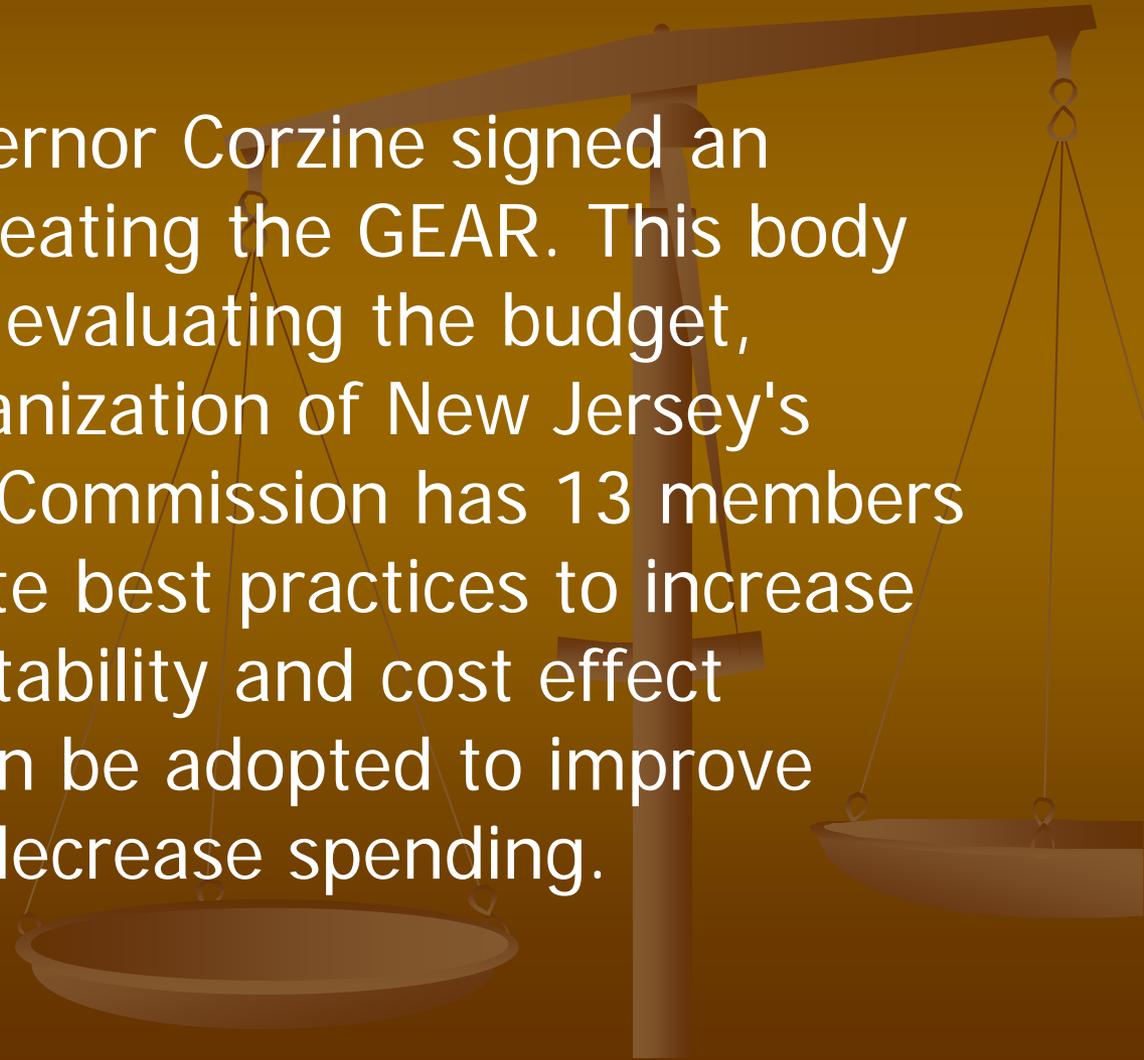
# How do these recommendations impact Drug Court treatment?

- The recommendations of New Jersey's Drug Courts, Special Probation and Proposal for Reform and the Supplemental Report on New Jersey's Drug Free Zone Crimes and Proposal for Reform, were the basis of the GEAR proposals for expanding and enhancing Drug Court.



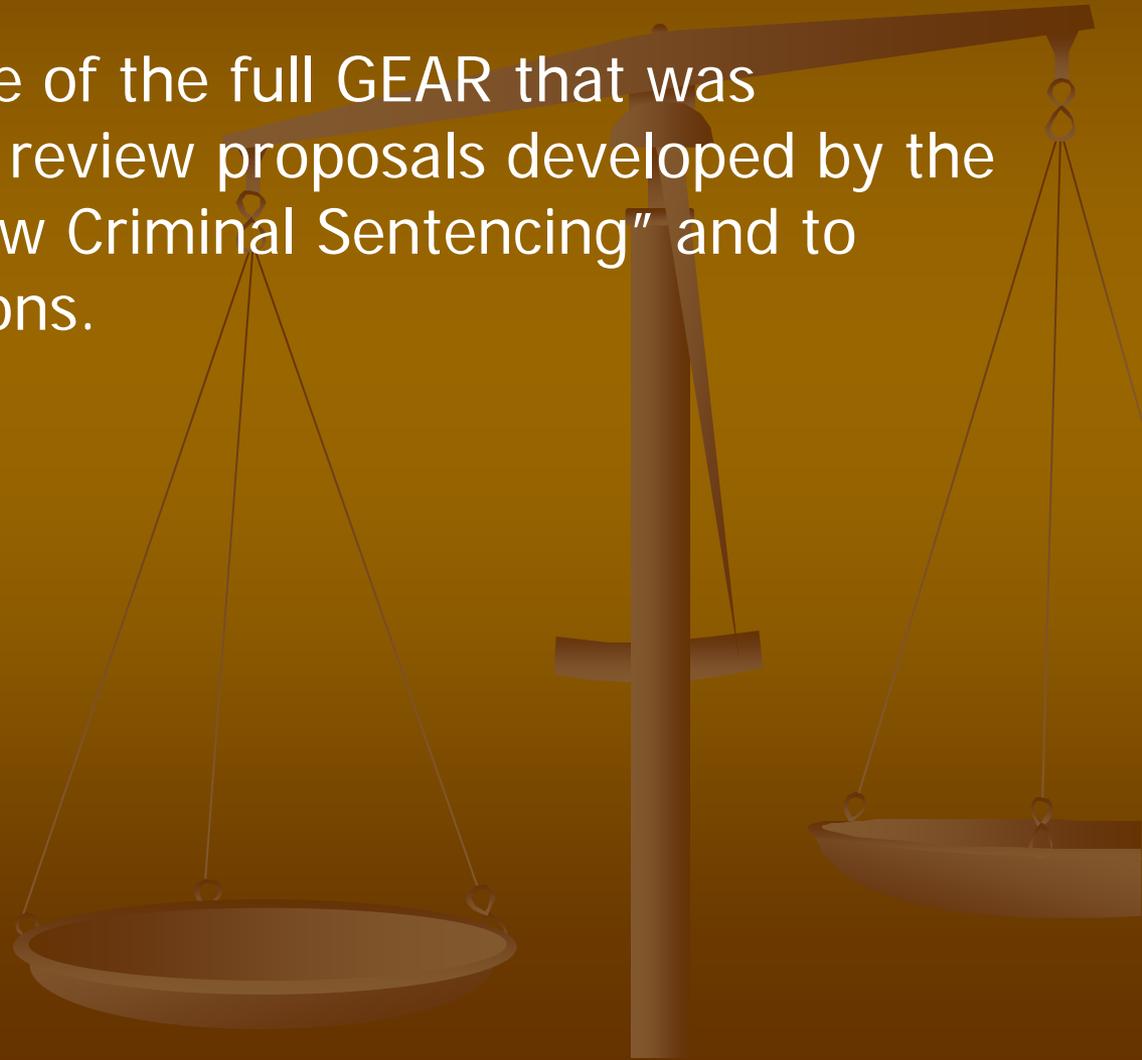
# What is the GOVERNMENT EFFICIENCY AND REFORM (GEAR)?

- In April 2006 Governor Corzine signed an executive order creating the GEAR. This body was charged with evaluating the budget, structure and organization of New Jersey's government. The Commission has 13 members who will investigate best practices to increase efficiency, accountability and cost effect measures, that can be adopted to improve government and decrease spending.

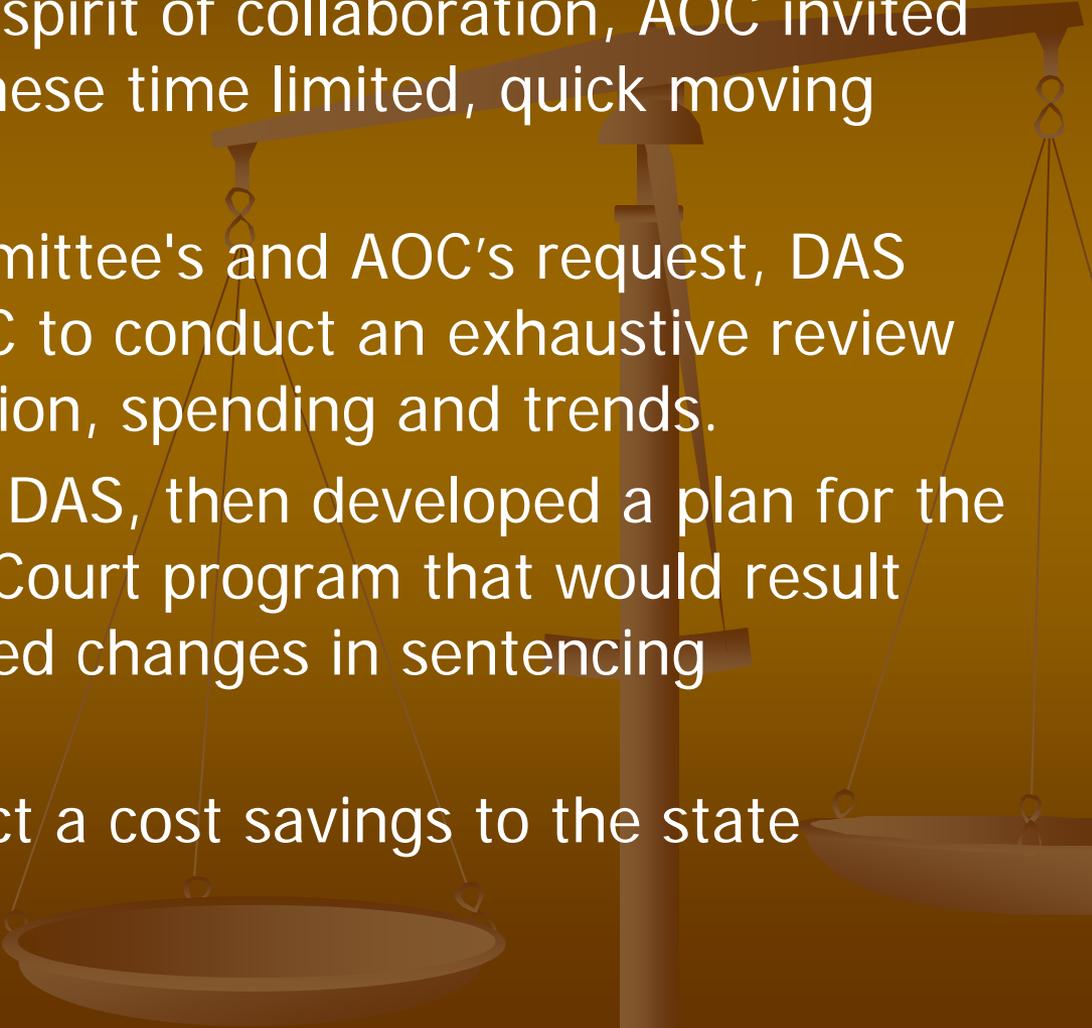


# What is the GEAR Subcommittee for Corrections and Sentencing?

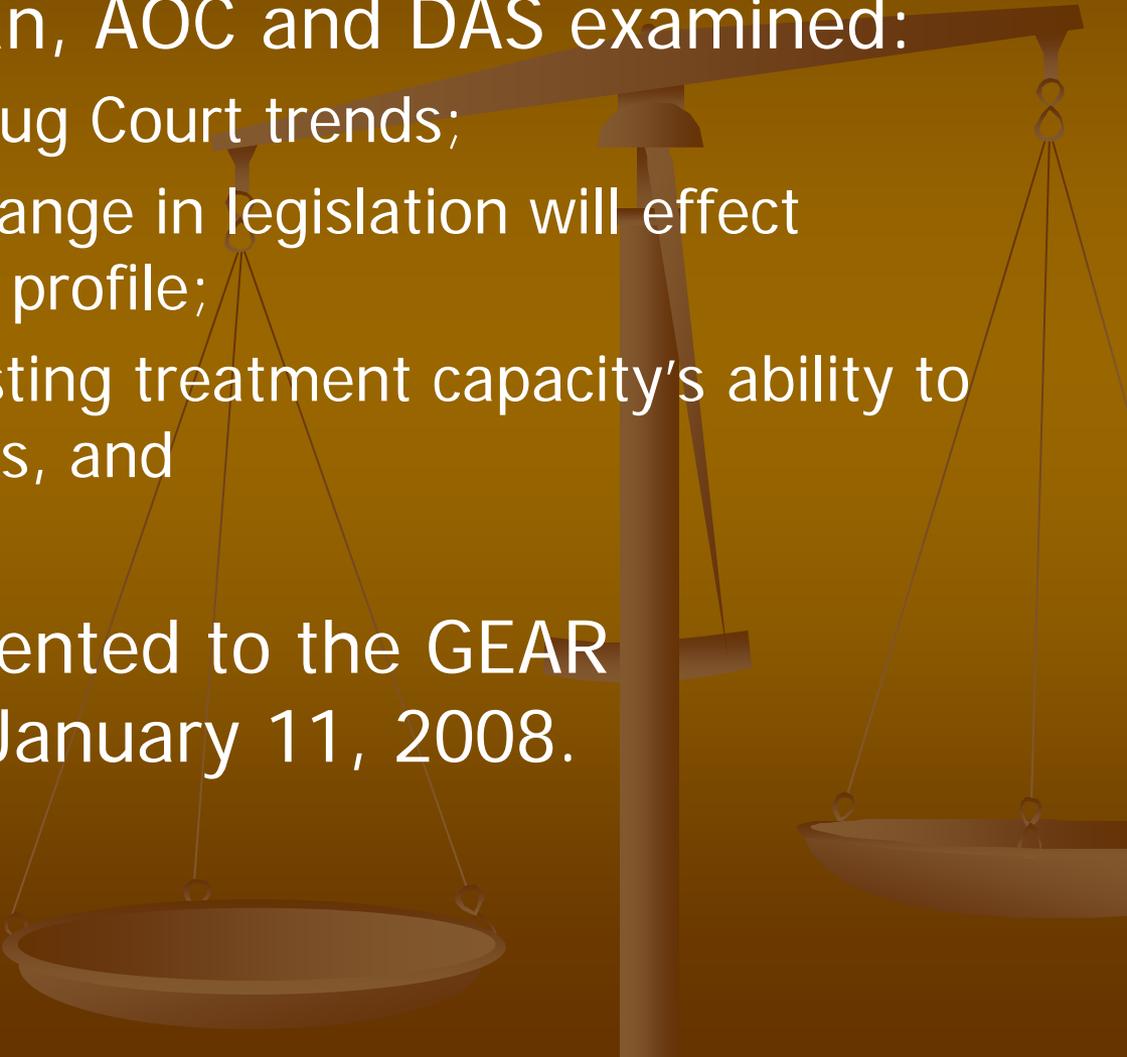
- An Ad Hoc Committee of the full GEAR that was developed in part, to review proposals developed by the “Commission to review Criminal Sentencing” and to make recommendations.



# DAS Invited to Get Involved

- In an unprecedented spirit of collaboration, AOC invited DAS to weigh in on these time limited, quick moving negotiations
  - At the GEAR Subcommittee's and AOC's request, DAS collaborated with AOC to conduct an exhaustive review of the data on utilization, spending and trends.
  - AOC, with input from DAS, then developed a plan for the changes to the Drug Court program that would result from the recommended changes in sentencing legislation.
  - The plan had to reflect a cost savings to the state budget
- 

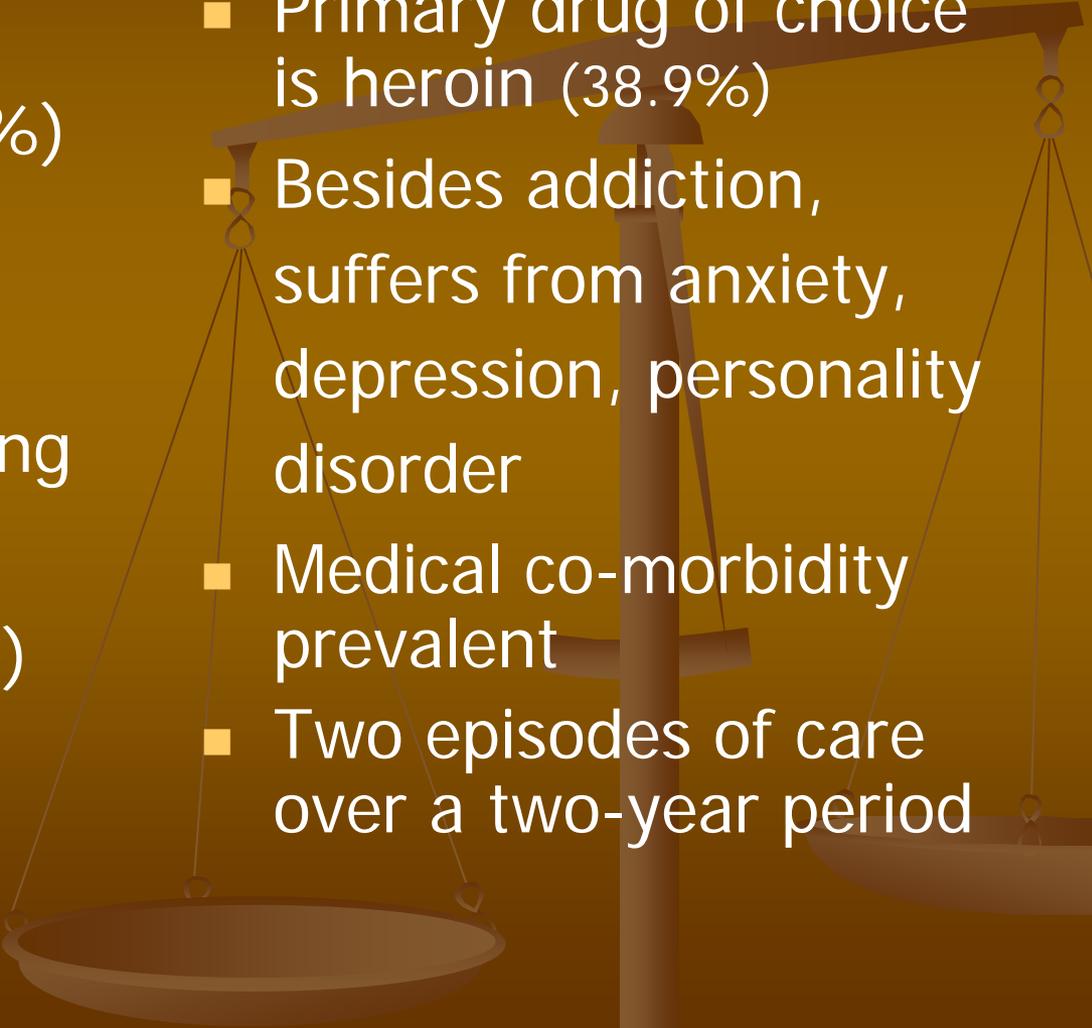
# DAS Invited to Get Involved (cont.)

- To develop the plan, AOC and DAS examined:
    - data on current Drug Court trends;
    - analysis of how change in legislation will effect current drug court profile;
    - assessment of existing treatment capacity's ability to absorb more clients, and
    - costs to the state.
  - The plan was presented to the GEAR subcommittee on January 11, 2008.
- 

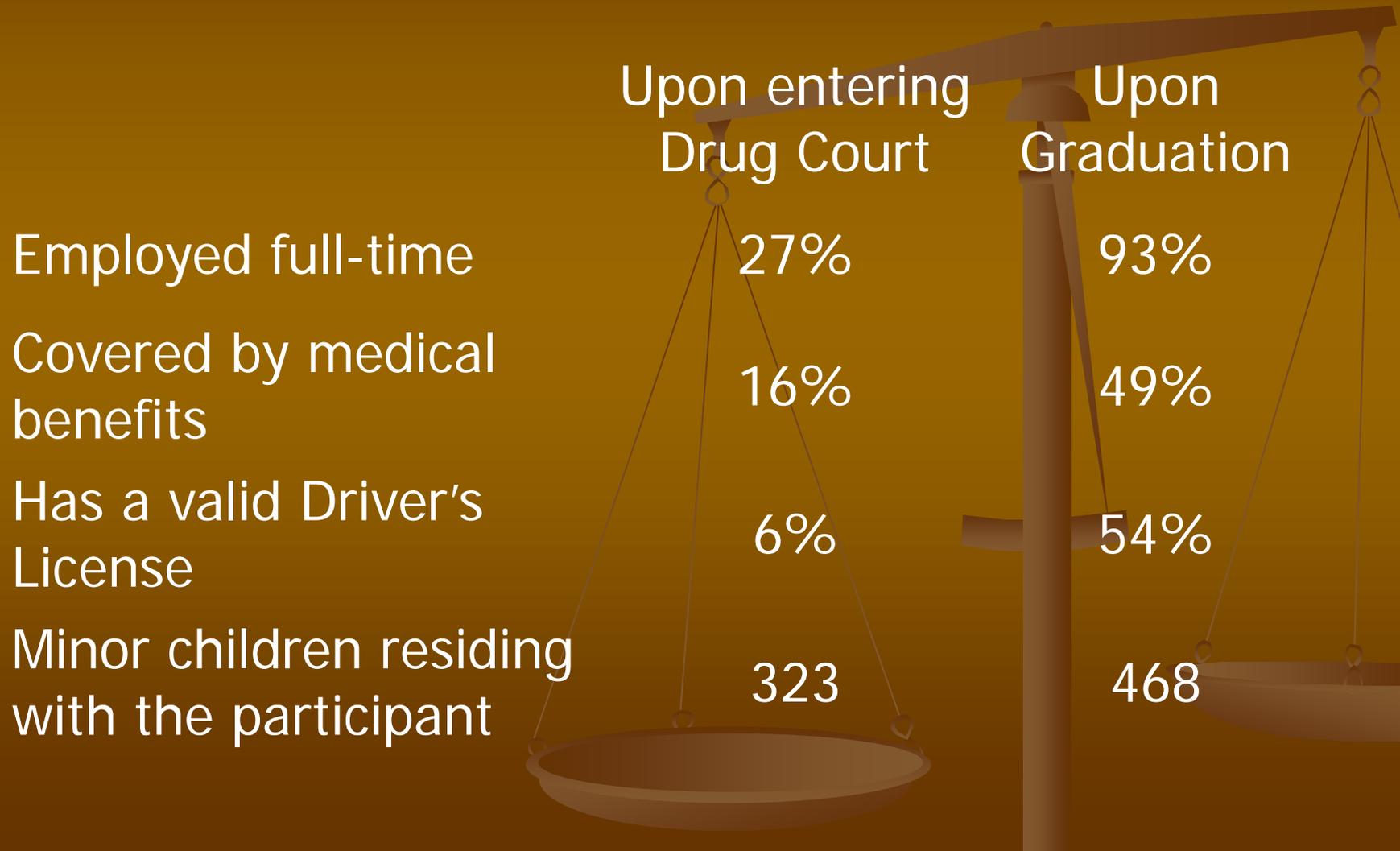
# The Data Used to Develop the Plan - -



# Drug Court Client Profile

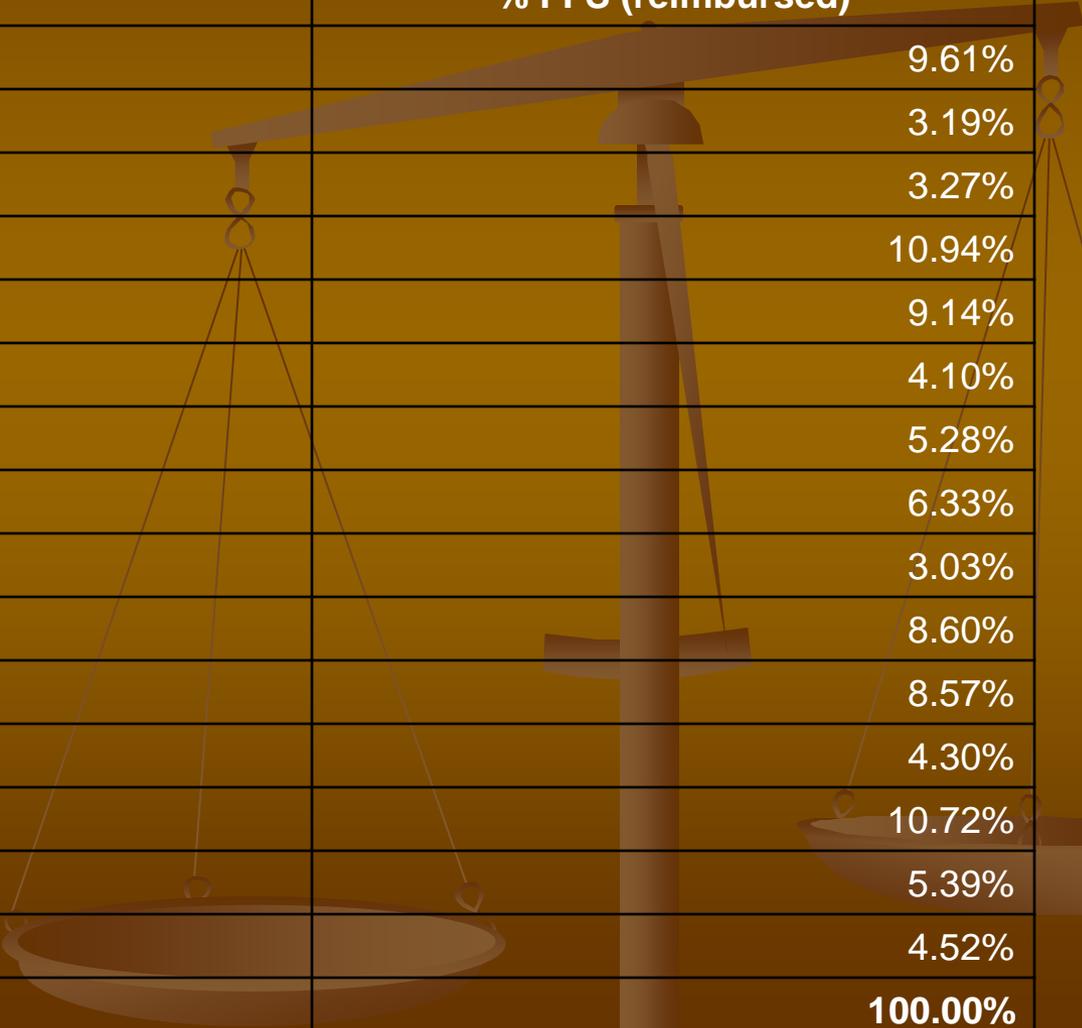
- Non-violent criminal
  - Majority male (76.4%)
  - Employed full-time (19.5%)
  - Has independent living (61%)
  - Never married (77%)
  - Aged 26-40 (45.7%)
  - Primary drug of choice is heroin (38.9%)
  - Besides addiction, suffers from anxiety, depression, personality disorder
  - Medical co-morbidity prevalent
  - Two episodes of care over a two-year period
- 

# Drug Court Outcomes



# Expenditure Report by Vicinage

July 2006 to June 2007 (Total: \$10,084,307.00)



Vicinage	% FFS (reimbursed)
Atlantic/Cape May	9.61%
Bergen	3.19%
Burlington	3.27%
Camden	10.94%
Cumberland/Gloucester/Salem	9.14%
Essex	4.10%
Hudson	5.28%
Hunterdon/Somerset/Warren	6.33%
Mercer	3.03%
Middlesex	8.60%
Monmouth	8.57%
Morris/Sussex	4.30%
Ocean	10.72%
Passaic	5.39%
Union	4.52%
<b>Total</b>	<b>100.00%</b>

# Average Length of Stay per Modality (Using FFS data only)\*



■ Long Term Residential	157	days
■ Short Term Residential	33	days
■ Halfway House	104	days
■ Partial Care	13	weeks
■ Intensive Outpatient	7	weeks
■ Outpatient	14.5	weeks

\*FY 2007

# Current Drug Court Treatment Resource Distribution

## Contracted Services

291 Long Term Residential Beds

37 Halfway House Beds

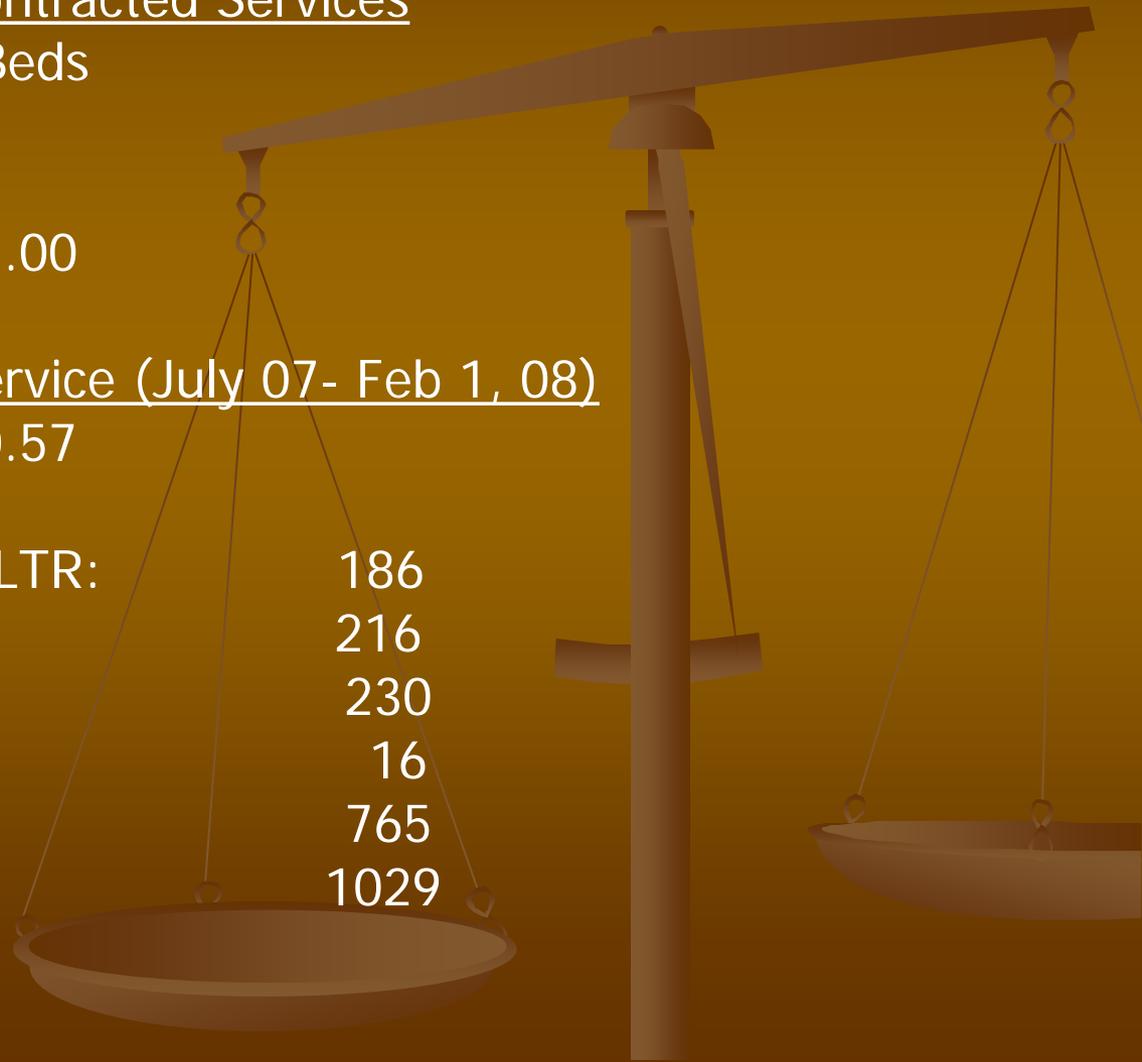
5 Outpatient Chairs

Total dollars: \$7,991,361.00

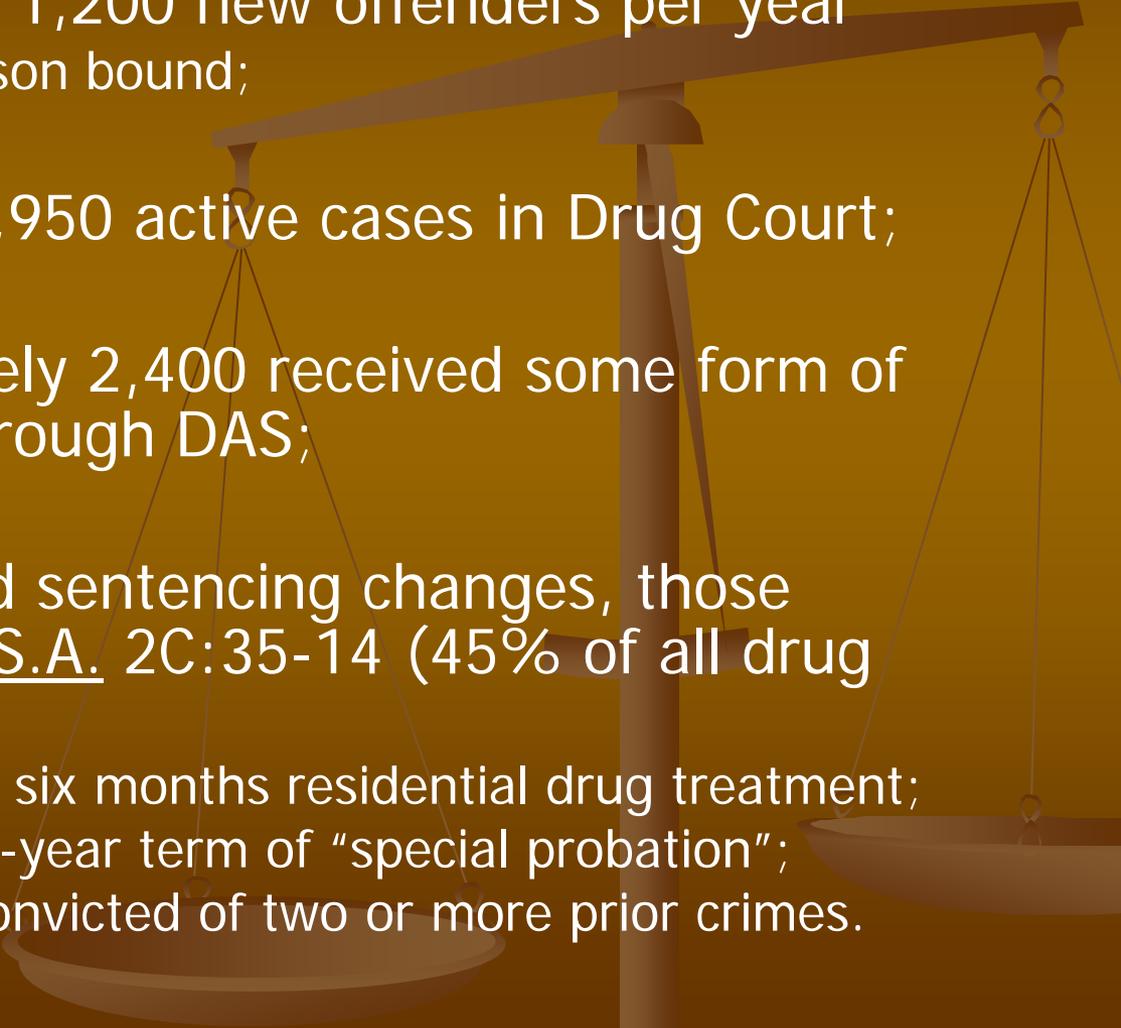
## Fee For Service (July 07- Feb 1, 08)

Total dollars: \$5,141,630.57

Number of clients served in LTR:	186
Number of clients in STR:	216
Number of clients in HWH:	230
Number of clients in PC:	16
Number of clients in IOP:	765
Number of clients in OP:	1029



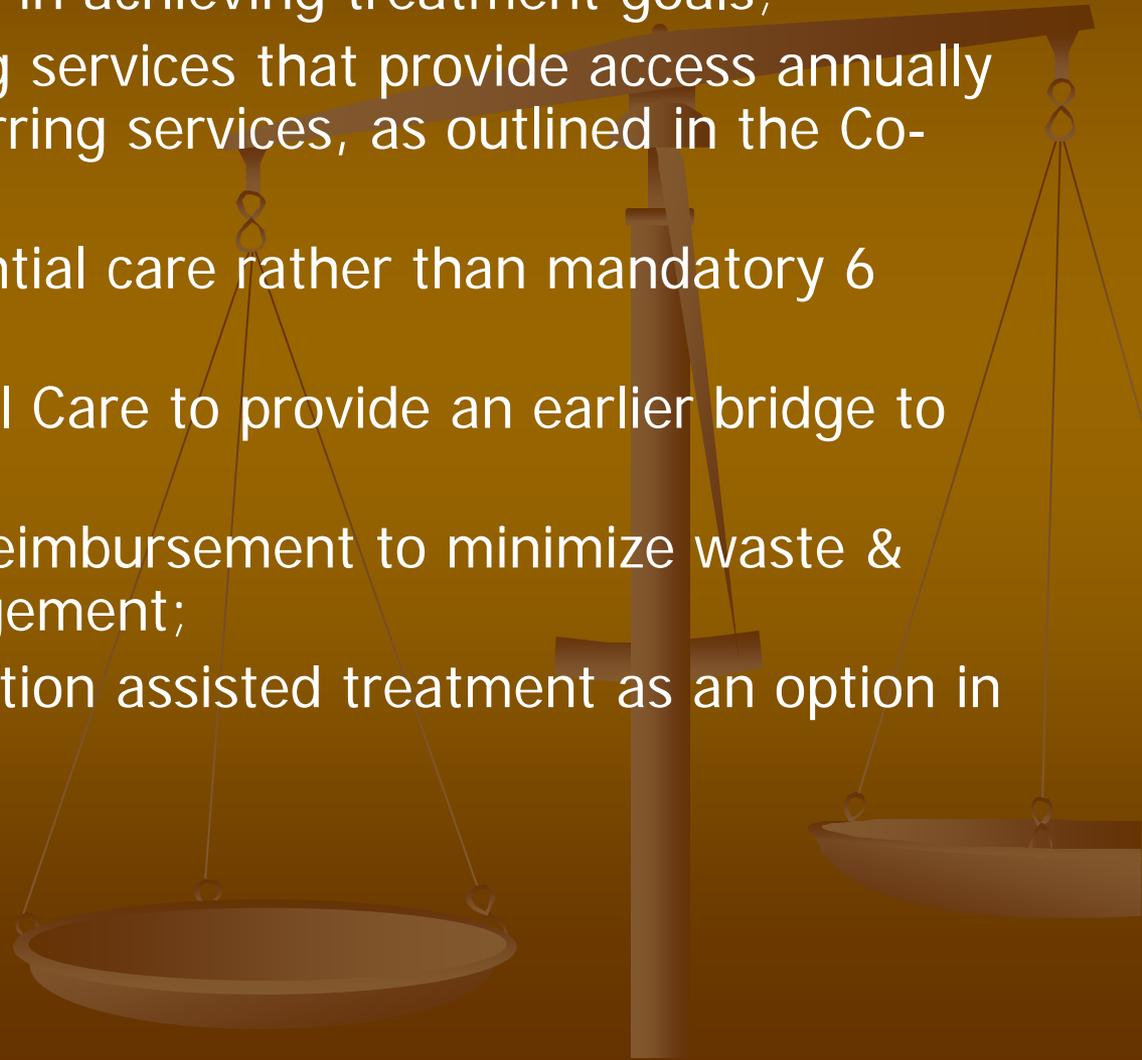
# The Current Drug Court Program



- Serves approximately 1,200 new offenders per year
  - Of whom 93% are prison bound;
- There are currently 2,950 active cases in Drug Court;
- Last year approximately 2,400 received some form of treatment services through DAS;
- Prior to the suggested sentencing changes, those sentenced under N.J.S.A. 2C:35-14 (45% of all drug court cases) must:
  - Receive a minimum of six months residential drug treatment;
  - Be sentenced to a five-year term of "special probation";
  - Must not have been convicted of two or more prior crimes.

# Proposed New System of Care

- Treatment placements & lengths of stay that match severity of illness, and progress in achieving treatment goals;
- Integrated co-occurring services that provide access annually to full array of co-occurring services, as outlined in the Co-Occurring network;
- Clinically-driven residential care rather than mandatory 6 months residential;
- Increased use of Partial Care to provide an earlier bridge to outpatient care;
- Increased use of FFS reimbursement to minimize waste & encourage client engagement;
- Increase use of Medication assisted treatment as an option in Drug Court.



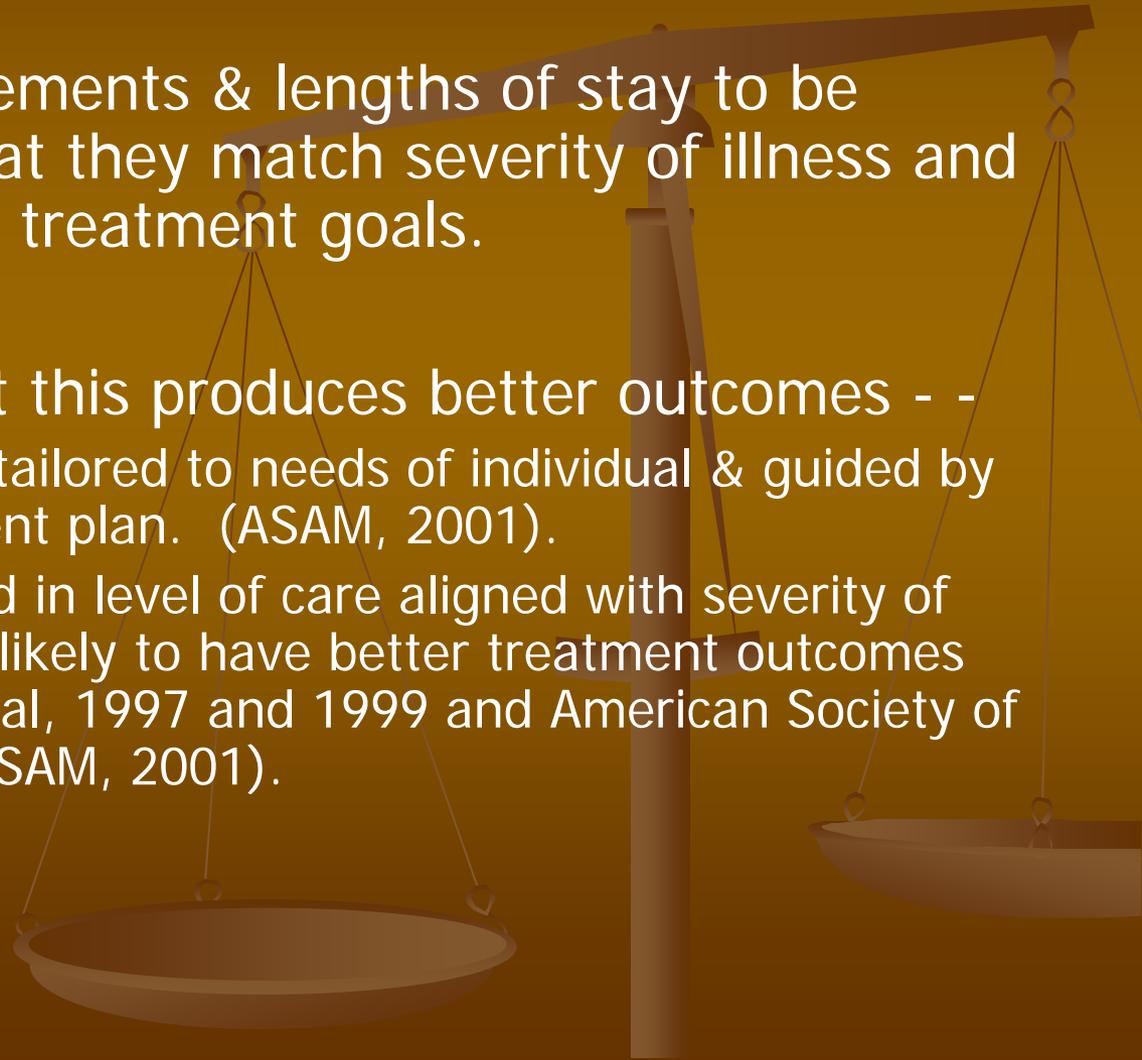
# The DAS/AOC Drug Court Expansion Proposal Would:

- Include enhanced services for offenders with co-occurring disorders (substance abuse and mental illness) in recognition of the increasing number of clients who present with both problems;
- Increase the number of new clients served annually by 400\*
- Increase the funding available for treatment of DC clients;
- Increase FFS contracting for DC treatment services.

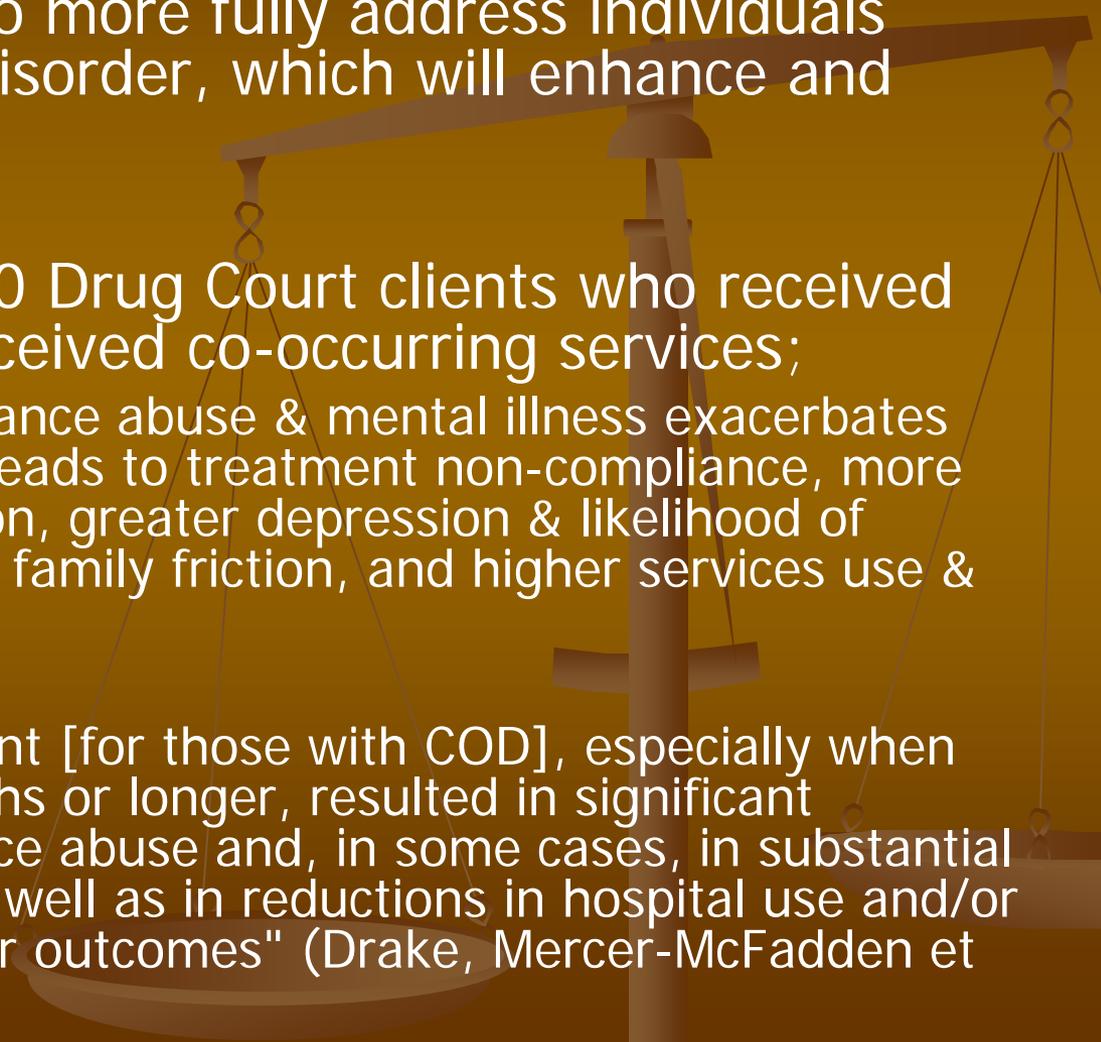
\* This number is based on an estimated 400 to 650 eligible under the expanded eligibility criteria

# We Believe that These Changes are Important Because They:

- Allow treatment placements & lengths of stay to be clinically driven so that they match severity of illness and progress in achieving treatment goals.
- Research tells us that this produces better outcomes - -
  - Treatment should be tailored to needs of individual & guided by individualized treatment plan. (ASAM, 2001).
  - Clients who get placed in level of care aligned with severity of their illness are more likely to have better treatment outcomes (Source: McLellan, et al, 1997 and 1999 and American Society of Addiction Medicine (ASAM, 2001).

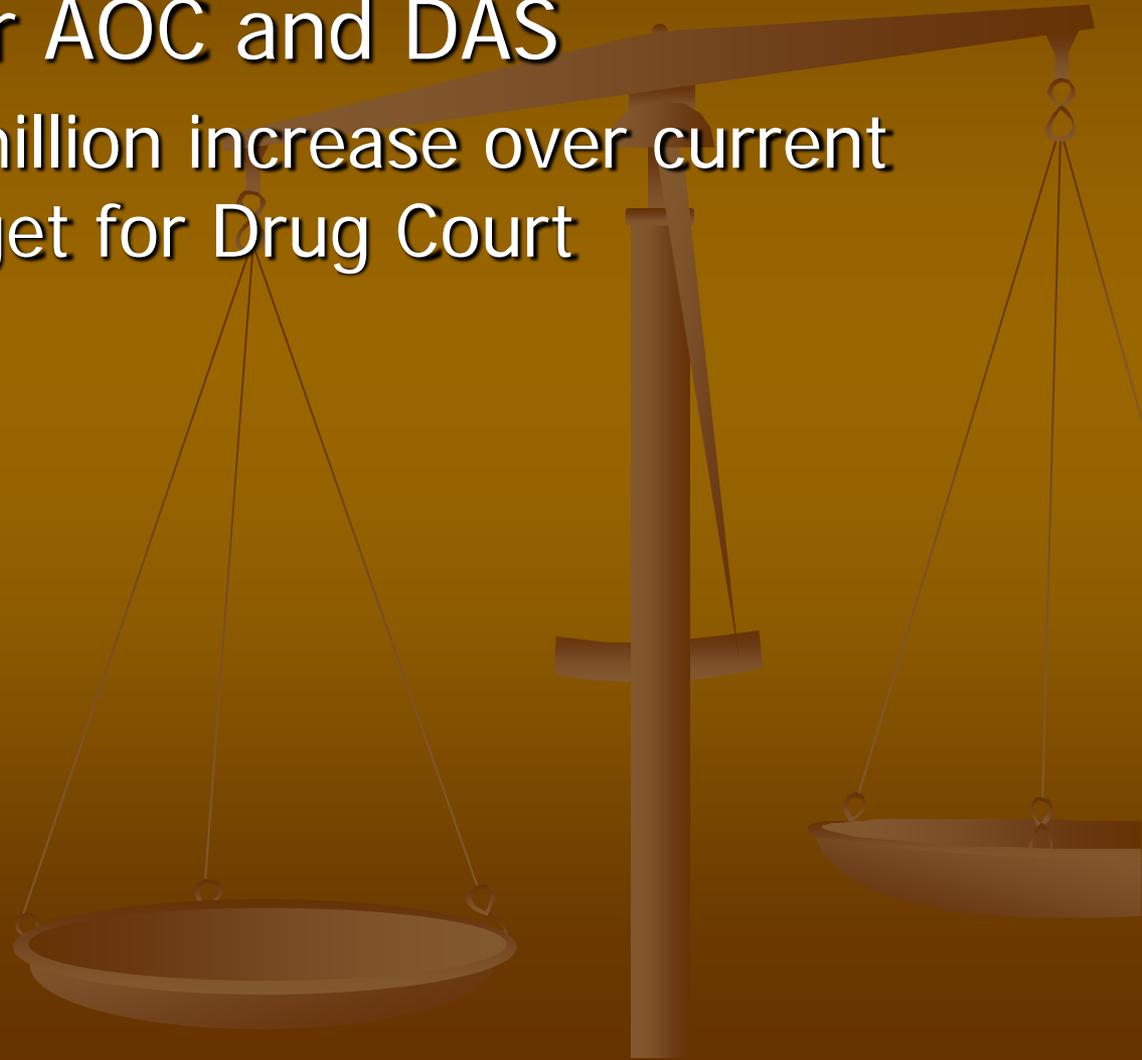


# We Believe that These Changes are Important Because They: (cont.)

- They allow services to more fully address individuals with a co-occurring disorder, which will enhance and improve outcomes:
  - Only 13% of the 2400 Drug Court clients who received services in SFY 07 received co-occurring services;
    - Co-morbidity of substance abuse & mental illness exacerbates symptoms and often leads to treatment non-compliance, more frequent hospitalization, greater depression & likelihood of suicide, incarceration, family friction, and higher services use & cost (DHHS, 1999).
    - "...integrated treatment [for those with COD], especially when delivered for 18 months or longer, resulted in significant reductions of substance abuse and, in some cases, in substantial rates of remission, as well as in reductions in hospital use and/or improvements in other outcomes" (Drake, Mercer-McFadden et al., 1998)
- 

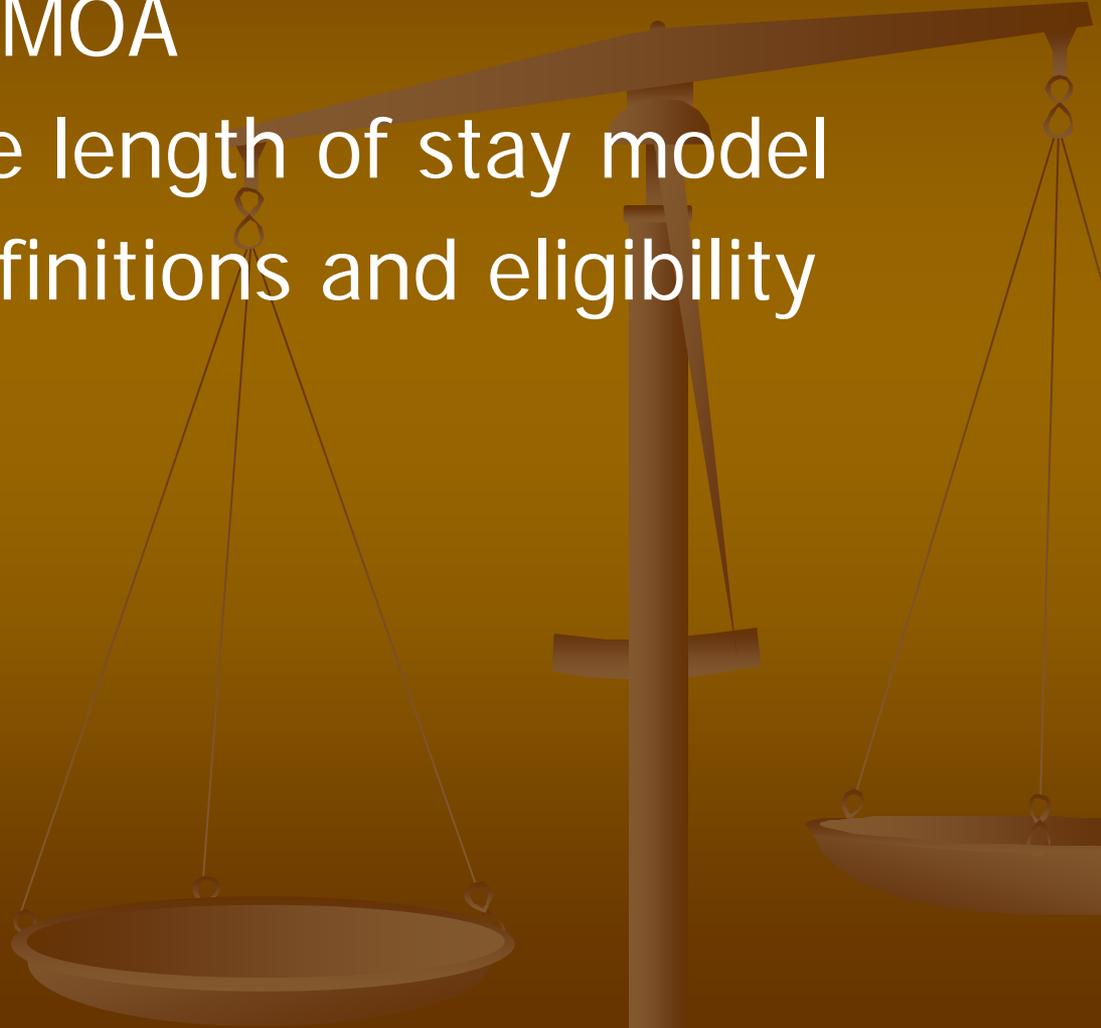
# Budget

- \$26.4 million for AOC and DAS
  - This is a \$5.8 million increase over current fiscal year budget for Drug Court





# Next Steps

- Judges training MOA
  - Develop variable length of stay model
  - Co-occurring definitions and eligibility
- 

# DAS DRUG COURT CONTACTS

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