

Alexandria Treatment Court (“ATC”): Program Narrative

A. Statement of the Problem

(Statistics taken from Alexandria Police Department and court management system).

The City of Alexandria has not been immune from the devastating effects of the opioid crisis. Alexandria is a suburb of Washington D.C. and has a population of just over 150,000. In 2017, the City experienced 9 fatalities from drug overdoses along with 50 non-fatal overdoses. This means that in 2017, more than twice the number of individuals died in Alexandria from a drug overdose than were the victims of homicide in this jurisdiction. In that same year, the Alexandria Police Department noted that a total of 1,019 criminal offenses in the city were drug related. Of these, 832 were specifically for drug crimes, but there were another 187 offenses where drugs were a motivating or contributing factor, such as property crimes or larcenies. Compared to 2016, this represented nearly a 37% collective increase in offenses classified as drug crimes or drug related. Additionally, during the two-year period of 2016 to 2017, 96 probation violations were filed in Alexandria that were related to the defendant violating a probation condition related to drug use and testing.

Unfortunately, the current judicial options that are available to address these issues are insufficient in the absence of a drug treatment court. While Virginia law has a method for eventual dismissal of first-offender possession cases, this is of very little utility for defendants who suffer from substance use disorder and usually have a criminal record that make them statutorily ineligible for that form of diversion. Simply incarcerating an individual who suffers from this condition does not break the cycle of addiction. Creating a drug treatment court in Alexandria is vital to addressing the interconnected nature of drug use, crime, and overdoses in our community.

Target population information

The target audience for the ATC are those individuals: a) who are charged with felony offenses in the City of Alexandria; b) who suffer from substance use disorder; and c) who are deemed “high-risk/high-need”. The Alexandria Treatment Court (“ATC”) Advisory Committee did statistical analysis to examine how many cases a year would be eligible for participation based on the broad contours of an anticipated program. We identified 76 specific cases from 2017 where the defendant would have simultaneously: a) legally benefited from participating in a drug court; and b) been eligible for participation from the perspective of the prosecution.

The committee was greatly interested in how many of these cases resulted in incarceration. This was the likely situation for 70 of the 76 cases we identified. 48 of the 76 target applicants were defendants charged with probation violations rooted in drug violations. These virtually always result in some period of incarceration. Additionally, 22 remaining criminal cases were sentenced to active incarceration, ranging from as low as 10 days to as high as 18 months.

Without federal funding, the ATC will be incapable of serving anywhere near its potential target population. The ATC Advisory Committee has determined that in the first year of operation, in the absence of specialized funding, it would only be able to serve the number of applicants who could be absorbed within existing agency budgets – approximately 5 defendants. Federal funding is critical to being able to implement the program in a way that reaches a broader group. Moreover, without federal funding the services that can be provided will not be nearly as comprehensive. If full funding is obtained, we propose being able to reach at least 20 participants in the first year of the program. Thereafter we would continue with a rotating 20-member capacity at any time, but aim to have serviced at least 50 participants by the end of the grant.

B. Program Design and Implementation

Discussions that occurred in the City of Alexandria's Opioid Work Group and in community forums, demonstrated significant interest in the creation of a treatment court. It is worth noting that the Alexandria Criminal Justice/Behavioral Health Collaborative Committee, an inter-agency organization that has focused on bridging the gap between behavioral health and the criminal justice system has identified the development of this court as the most unmet need in our community in terms of diversion. Accordingly, a group representing 11 different City agencies convened as the ATC Advisory Committee. The aim of this group was to design a pre-adjudication, adult drug treatment court for the City of Alexandria to begin operating in 2019.

We elected to utilize the City of Charlottesville and Albemarle County in Virginia as a model in designing our program. This was because of the similarity of our jurisdictions and the stability and success of their program. We are deeply grateful for the materials that their treatment court provided to help us in designing a program for Alexandria.

Screening and Eligibility

To be considered for admission to the ATC, a defendant must be charged with an eligible felony offense or probation violation and not be subject to certain disqualifications. Eligible offenses include probation violations (where the conduct at issue relates to consumption or possession of narcotics); illegal possession of controlled substances; prescription fraud/forgery; and larceny/property/fraud crimes where there is evidence that the crime was committed to finance the defendant's drug habits and the Commonwealth consents to participation. The advisory committee has also identified a limited number of distribution/possession with intent to distribute cases where the weight of the narcotics at issue represents a small quantity, where there is no evidence of the defendant profiting from the conduct, and where the conduct at issue was committed to finance the defendant's own drug use.

Some of the disqualifications for participation in drug court would include offenders who have recent convictions for violent crimes, where the defendant has a history of drug dealing convictions, where an individual is acting as a confidential informant, where there is evidence that the defendant has profited from drug dealing, or where the prosecution has other legitimate reasons for objecting to the defendant participating in the program.

An applicant for admission to the drug court may be identified by any source including, but not limited to the police, the magistrate, pretrial services, the defense attorney, the prosecution, a judge, or a probation officer. If a defendant is arrested for an offense that the magistrate believes may be eligible for admission to drug court, the defendant shall, either as a condition of bond or through the Court's normal video advisement process, appear before the General District Court for the City of Alexandria on the day following his or her arrest. If the defendant is charged with an offense that appears to be facially eligible for participation in the ATC and the program has not already reached its capacity, the Court will set a status date within fourteen days of the advisement. The defendant will be instructed to contact his or her attorney within 48 hours of the advisement.

The driving objectives in the screening process are a) quickly identifying individuals for participation in the program; and b) connecting them with services immediately. If a potential applicant is on bond, they will be required to comply with drug testing and support services through local probation while awaiting formal acceptance into the program. Similarly, if a defendant is incarcerated, he or she must participate in substance abuse services while in jail, including treatment, education and/or assessments as appropriate.

If the defendant, in consultation with his attorney, determines that he or she wishes to be considered for admission to the ATC, his attorney shall immediately notify the ATC prosecutor. The ATC prosecutor will examine the defendant's charge and background and consult with the

arresting officer/detective and any victim in the case, to determine whether the government will consent to the applicant's admission into the program. If the prosecution is denying admission, it will notify the applicant's attorney and the parties will proceed as they believe most appropriate. If the prosecution is not objecting to the defendant's potential participation in the program, the ATC prosecutor will make a good faith effort to provide as much discovery as is practicably available, including any exculpatory evidence known to the prosecution, within 72 hours. The purpose of this requirement is so that the defendant can consult with his or her attorney prior to the status date to determine whether he or she wishes to pursue admission to the drug court or wishes to litigate the case. At the same time, the prosecution will notify the ATC Therapist of the applicant's potential eligibility for the program. Within 72 hours of this notification, the defendant will be screened by the Senior Therapist to determine whether he or she is an appropriate candidate. This screening will focus on whether the defendant is diagnosed as suffering from substance use disorder, using a validated eligibility assessment tool. This step is considered vital to reaching the target population of the ATC of high-risk/high-need individuals.

Procedures for the ATC

At the status hearing, if the defendant, the prosecution and the therapist agree that the defendant should be allowed to participate in the ATC, the defendant shall waive his or her right to a preliminary hearing. At the next scheduled meeting of the ATC, the defendant will enter additional legal waivers necessary to effectuate participation in the program. The defendant will stipulate that there are facts sufficient for him or her to be found guilty of the offense or will plead guilty, depending on the agreement reached in the case. The Court will defer final action on the case and admit the defendant into the ATC.

At or prior to the time of admission, the defendant will receive a participant handbook that outlines the requirements of the program. The defendant will execute an agreement with the prosecution and the Court that identifies a) what his or her obligations are; b) the potential penalties for non-compliant behavior; and c) what the parties agree will happen in terms of the disposition of his or her case if the program is successfully completed. If the offense involves a victim, the conditions of participation in the program may include restitution and a requirement that the defendant have no contact with the victim.

The ATC will meet each Thursday at 9:00 a.m., prior to the commencement of the Court's normal criminal docket. The ATC will be supervised by a specific judge, assigned and trained on drug court operations. Other than for termination proceedings the prosecution and defense will not actively participate in the ATC proceedings. Prior to the ATC docket, the presiding judge will meet with the treatment team to discuss the progress of ATC participants whose cases will be considered that day. No person other than ATC team members or officers of the Court will be permitted to participate in this meeting unless they have signed a confidentiality form. Following the meeting with the ATC treatment team, the Court will commence. Any graduation ceremony or situation in which a participant is advancing a level will be called at the beginning of the ATC docket. The remaining cases will then be called for the ATC judge to address the participants' progress and any noncompliant behavior.

Services and Structure of the Program

Participation in the ATC involves a series of progression through four phases. Successful completion of Phase IV will result in the defendant's graduation from the ATC and receiving the legal benefit agreed to in their case. The length of the program will be dependent on how long it takes for the participant to satisfy each phase. Each phase will have benchmarks that the

participant must satisfy before advancing. There will be a minimum period that a recipient must be in each phase, such that the program cannot be completed earlier than 12 months. If a participant needs more than 24 months to complete the program, the request must be approved by the ATC. Some of the benchmarks for graduating from a phase may be specific to the applicant's treatment plan. Others will be common to all participants, such as remaining drug and alcohol free for specified and expanding period of time. Certain program expectations for participants (such as regularity of drug screens, frequency of attendance at drug court, mandatory face-to-face meetings) will decrease the higher the phase, as the participant will have demonstrated capacity to remain substance-free, etc. for longer periods of time.

All participants in the program are expected to participate in pro-social occupational and treatment activities both for their own improvement and to avoid access to environments where drug use is likely to occur. Pro-social occupational activities include treatment, lawful employment, community service, job searches, employment workshops, educational/vocational classes or any other activity identified by the treatment team in the participant's treatment plan.

Participants in the program will be subjected to random drug and alcohol testing. This will be accomplished through a requirement for a daily call-in to determine if the participant is to be screened that day. All positive drug tests are sanctioned as will be described below. However, a participant's voluntary honesty about relapse and drug use will always be considered a mitigating factor when determining a sanction.

Services

Assessment and Screening

All ATC participants will be enrolled in an Alexandria Department of Community and Human Services (DCHS) Substance Use Treatment Program. Each ATC participant will receive a

comprehensive psycho-social assessment that explores past and current substance use, mental health status, family dynamics, financial, work and educational status, medical status, legal status, housing status and social supports. The data collected through the assessment will be used to determine individual treatment needs. In addition, participants will be screened using the American Society of Addiction Medicine (ASAM) to determine the appropriate level of treatment placement.

Treatment

DCHS provides client-centered, trauma informed behavioral health treatment services to participants utilizing evidenced-based treatment in outpatient and short term residential settings through individual, group and family therapy. All services are designed to instill hope, engage clients in ongoing treatment, and link them to community services and supports to reinforce stability and recovery. Evidenced-based group therapy, predicated on the stages of change, include Considering and Maintaining Change, Matrix, Moral Reconation Therapy (MRT), Living in Balance, and Dialectical Behavioral Therapy (DBT). In addition, Cognitive-Behavioral Therapy, Solution-Focused Therapy and Medicated Assisted Treatment are also used. Supportive services such as case management and care coordination are provided to minimize barriers to treatment engagement. Services include linkages to transportation, food, health care, social services and health benefits, health care, employment services, and educational opportunities.

Each ADTC participant will be assigned to a Senior Therapist who will be responsible for managing client care and providing close coordination with probation staff. Treatment will follow the guidelines for best practices as outlined in the Adult Drug Court Best Practice Standards Volume I and II (National Association of Drug Court Professionals, 2015).

For participants with an Opioid Use Disorder, treatment in the Opioid Treatment Program (Medication-Assisted Treatment) is available. This program provides daily medication assisted

treatment, as well as intensive individual and group therapy. The ATC Advisory Committee recognizes the utility of Medication-Assisted Treatment (MAT) as a best-practice and will not deny any eligible client access to the program because of their use of FDA-approved medication for treatment of a substance use disorder. Participants will also be served, as needed, in the Alexandria Residential Treatment Center (ARTC), a short-term substance use residential treatment program for individuals in need of a 24/7 structured and monitored environment.

In addition to the specific substance use treatment services noted above, ATC participants will be eligible for all services offered by DCHS. Services are individualized and based on the person's needs. The full continuum of DCHS treatment and support services include: Psychiatry, Mental Health Outpatient Treatment, Emergency Services, Psychosocial Day Support and Supportive Housing, Job Training, housing assistance in general, education and GED services. If funding for the grant is approved, a Senior Therapist will be hired expressly to serve ATC members. The Senior Therapist will devote his/her time to ATC clients and will collaborate with the other members of the ATC team. The Senior Therapist will provide the client services both in receiving direct therapy and "wrap-around" services as well. In other words, we are mindful that substance use disorders are often interrelated with other needs including mental health treatment, finding stable housing and employment, obtaining a valid driver's license, etc.

This is where the proposed Client Services Fund, which is a portion of this grant request comes into play. Clients with a history of incarceration and substance use disorder (along with any attendant issues such as serious mental illness or co-occurring disorders), often have needs for highly specialized services or for higher levels of service that cannot be met with existing resources or cannot be met in as timely a manner as needed to support their community stability. For example, due to the nature of their crime(s) and/or their mental health symptoms, some individuals

have been banned from homeless shelters, public housing, supportive housing, and even certain neighborhoods. Even when necessary services and supports do exist in the community, and an individual is eligible to receive them, wait lists and capacity limitations often mean that the needed services are *de facto* inaccessible. Moreover, even when needed services do exist, a consumer is eligible, and space is available, because of the time needed to apply for or re-activate an individual's financial entitlements, a lack of funding can often become a barrier to accessing services.

Flexible funding is needed to ensure that individualized services and supports can be purchased and made accessible upon an individual's diversion from the criminal justice system. The funding will prevent this highly vulnerable population from falling through the cracks and perpetuating a recidivistic cycle. Services may include purchase of specialized residential treatment, medical/dental care, emergency and transitional housing, transportation, specialized support services, brain injury services, behavioral consultations, food, clothing, child care, or other essential services or supports. The ATC Advisory Committee is mindful of the limitations imposed by the grant on transportation and will adhere to them in being able to certify that transportation is for trackable devices such as bus tokens, that would only be used for treatment. The same would apply, for example, to any use of the funds for child care.

ATC will develop eligibility criteria for funds as well as parameters that will guide allocation of funds. These criteria will include, but may not be limited to: 1) consumers are Alexandrians with a substance use disorder, actively participating in ATC; 2) without the identified service or supports, the individual is likely to re-offend in the near future; 3) funds represent the funding of last resort: that is, no other funding stream or resource can meet the identified need(s); 4) services or supports to be purchased are for a time limited period. ATC will consider funding

requests via reviews of proposed plans that will specify the type, amount, and duration of service, and the cost of service. ATC will also ensure that, where applicable, there is a plan for sustainability of necessary services and support through mainstream funding resources. ATC will develop a utilization review and authorization process, as well as an administrative and operational structure to ensure that the services purchased are necessary and cost-effective to meet individual consumer needs.

Fees for all DCHS treatment services will be assessed via the DCHS Sliding Fee scale. No participant will be denied access to treatment or program participation based on an inability to pay. The treatment team will work to reasonably accommodate individual circumstances while respecting the principle that personal financial contribution to treatment increases personal commitment to the outcome.

Best Practice Standards

The ATC is designed to utilize each of the evidence-based principles and practices included in the NADCP Adult Drug Court Best Practice Standards. For example, the focus on high-risk, high-need participants is taken directly from these standards as they relate to target populations. The ATC is committed to ensuring equivalent access for historically disadvantaged groups such that if an eligibility requirement has the unintended effect of differentially restricting access for a member of the group it will be adjusted. The roles and responsibility of the judge would also meet the NADCP standards by having a consistent judge who participates in a pre-court staff meeting, with sufficient time for individual interaction with participants, etc. The incentives, sanctions and therapeutic adjustments are compliant with NADCP standards, including but not limited to equivalent consequences, phase promotion, etc. An example includes the manner in which the NADCP standard that “jail sanctions are imposed judiciously and sparingly” has been incorporated

into the proposed sanction matrix to be described below. The services that are ultimately provided to participants will depend on the funding that the ATC can procure. However, if fully funded, those services will be consistent with the NADCP standards for substance abuse treatment, complementary treatment and social services, and drug and alcohol training. Finally, as will be explained below, the ATC Advisory Committee is truly a multidisciplinary team that will be committed to monitoring the program and adjusting as necessary and serving as many eligible individuals as practicable while maintaining continuous fidelity to best practice standards. In other words, we have tried to be very conscious of these standards and several of our advisory committee members are enrolled to attend NADCP specific-training to further promote that end.

Non-compliant behavior

Participants in the program will waive due process rights for purposes of sanctions imposed by the Court for non-compliant behavior, short of termination from the ATC. ATC will adopt a sanction matrix based on best practices research. While the judge will have authority to deviate from the matrix in imposing sanctions, this matrix will guide the court's handling of non-compliant behavior. Sanctions should fundamentally be driven by what judicial response will promote treatment and recovery, while promoting participant accountability. Application of the matrix consists of five steps. In the first step, the Court will identify the risk level of the non-compliant behavior as either low, moderate, high or very high based. Examples of low risk behavior are lateness or missing a community support group. Examples of high risk behavior would include substance use, absconding, or dishonesty. The second step is for the court to cross-reference the level of risk in the behavior against the phase in the program in which the defendant is presently enrolled. This will identify a level of sanction that the Court should consider. The severity of the sanction would increase for participants who are in a more advanced phase of the program. This

is because it is assumed that there will be non-compliant behavior at the beginning of treatment. By contrast, non-compliant behavior such as drug use after a significant period of program participation is more significant and should be sanctioned more seriously. The third step is for the Court to adjust a sanction up or down based on the presence of either aggravating or mitigating factors. An example of an aggravating factor would be a lack of accountability. An example of mitigating factor would be honesty or maintaining steady employment. The fourth step is for the judge to choose a sanction based on the final level assessed. For each level there are options involving community service, attendance at court proceedings, writing a paper, reporting daily, experiencing a phase reduction, etc. The amount of sanction would be dependent on the level. For example, community service might be assessed at 5 hours for a Level One sanction, but 30 hours for a Level Five sanction. Additionally, jail is available for upper level sanctions but is disfavored when other responses are available that will produce improved behavior. Jail sentences in excess of 7-10 days will not occur unless there is a therapeutic placement in a treatment community in the jail, such as the Sober Living Unit. The fifth step is for the court to consider whether there are other programmatic responses that are needed to address behavior such as residential treatment, medication referrals, increased home visits, etc.

When jail-time needs to be imposed as a sanction, this will be effectuated by the Court's entry of an order revoking the defendant's admission to bail for the specified time period.

Termination is the most serious sanction available to the Court. If the Court is considering terminating a participant from the drug court treatment program, notice will be provided to that participant's attorney as well as the prosecution. A hearing will be held on the issue and both sides will be permitted to submit evidence and make arguments as they deem appropriate. A participant can voluntarily terminate participation in the program at any time and proceed to sentencing. If a

defendant is terminated from the ATC or voluntarily withdraws, the defendant can elect to be sentenced either by the ATC judge or may request to be sentenced by a different judge.

Incentives and Successful completion of the program

The ATC Advisory Committee will work to identify concrete incentives and funding to reward positive participant behavior and phase promotion. Some incentives could include commendation from the bench/treatment team during the ATC docket; higher placement in the docket; less frequent court appearances, tangible awards, letters of support for job searching/housing/education/welfare/etc., certificates of graduation from phases or the program.

When a participant successfully completes the fourth phase of the program, they will graduate from the ATC. A ceremony will be held for the graduating participant. While the outcome of the case will be stated in the contract signed upon entry into the program, the general understanding as to how cases would be disposed of is as follows (and subject to any case-by-case adjustment made by the parties and accepted by the Court):

- 1st probation violation: Dismissal of the charge.
- 2nd or subsequent probation violations: An entirely suspended sentence on the conditions deemed appropriate by the Court.
- Illegal possession of a controlled substance or imitation controlled substance: Dismissal of the charge.
- Distribution, Possession with Intent to Distribute a Controlled Substance (Sch I/II or marijuana), Possession with Intent to Distribute an Imitation Controlled Substance: An entirely suspended sentence on the conditions deemed appropriate by the Court.
- 1st offense prescription fraud: Dismissal of the charge.

- 2nd or subsequent prescription fraud: An entirely suspended sentence on the conditions deemed appropriate by the Court.
- Larceny/Property/Fraud charge: Case dependent and will be negotiated by the parties at the time of the participant's entry into the program.

C. Capabilities and Competencies

Team Training

As referenced earlier, the ATC Advisory Committee initially determined that the Charlottesville/Albemarle model was one that we wanted to use as a starting point for designing our program. Early in the process, three members from the team made an overnight trip to Charlottesville to observe the program in operation, including the treatment team meeting, a graduation program, as well as the drug treatment court's docket. Following that, members of the Charlottesville drug treatment court met with members of our committee to answer extended questions and provide resources. A follow-up meeting is planned on June 28th for members of the ATC Advisory Committee who were not able to attend the earlier session.

Additionally, three members of our committee are attending the National Association of Drug Court Professionals Training Conference in Houston from May 30-June 2, 2018. This conference makes extensive use of profession-specific tracks. Since our committee's attendees will include law enforcement, prosecution and treatment personnel, we anticipate being exposed to a broad cross section of information that will be vital to the successful launching of our program. We are in the final stages of completing our Drug Court application and anticipate submission of the application to the Supreme Court of Virginia by June 30, 2018. In addition, City staff have met with staff from the Drug Court Institute, which is located within Alexandria's city limits. We are grateful to the NCDI staff for their assistance and support and will work closely with them

once our State application is approved to ensure that ATC staff can receive the best training available.

Team Members and Relationships

The following individuals presently serve and will serve on the ATC Advisory Committee/team and fulfill the role described below:

- Judge: The Hon. Lisa B. Kemler, Chief Judge, Circuit Court for the City of Alexandria has been serving as the judicial representative on the ATC Advisory Committee. Either Judge Kemler or the judge she designates will serve as the ATC judge. Utilizing a single judge is aimed not only at satisfying best-practices, but to ensure consistency in handling cases, developing collaborative relationships, being trained in relating to participants, etc.
- Prosecutor/Drug Court Coordinator: Senior Assistant Commonwealth's Attorney David A. Lord, has been fulfilling this role on the ATC Advisory Committee. Either Mr. Lord, or a prosecutor designated by the Commonwealth's Attorney will continue to fulfill this function. The prosecutor/drug court coordinator will be responsible for a) prosecuting all cases that go through drug court including timely provision of discovery, etc.; b) handling the scheduling and administrative/paper work needs for the program that are not directly related to treatment; c) coordinating ongoing communication and dialogue between the ATC Advisory Committee members; d) coordinating with the ATC Advisory Committee to develop forms, manuals, etc. that will be needed by the program; e) identifying grants or other funding opportunities to ensure long-term programmatic success; f) responsibility for maintaining statistics regarding the ATC performance and fulfilling all grant reporting obligations; g) conducting training for the legal community and other partners in collaboration with others regarding the operations of the ATC.

- **Senior Therapist:** This person will be hired by the program based on the grant and will work out of Alexandria DCHS. This individual will provide therapy and services to ATC participants and will work with the prosecutor/drug treatment coordinator to handle the treatment-specific administrative needs of the program. Requirements for this position include Possession of Master's degree in Social Work, Mental Health Counseling, Psychology, Education or related field; at least two years of post-graduate work experience in providing direct clinical services to consumers having one or more substance abuse, psychiatric, and emotional disorders; and licensure or license eligible (has completed all required education and supervision as required by applicable board) as a Licensed Professional Counselor (LPC), Licensed Clinical Social Worker (LCSW), Licensed Substance Abuse Treatment Practitioner (LSATP) or Clinical Psychologist in the Commonwealth of Virginia at the time of appointment; if license eligible, the employee must obtain Virginia licensure within one year of hire.
- **Defense Attorney:** Public Defender Melinda Douglas has been serving on the ATC Advisory Committee. Ms. Douglas will appoint an assistant public defender or defenders to handle drug court cases that have been specifically trained on the process.
- **Police Officer:** Lt. Michael Kochis of the Alexandria Police Department's Vice/Narcotics Unit has been serving as the police liaison for the Advisory Committee and was instrumental in launching this initiative. If the grant is approved, we will work to identify a single officer or officers who can dedicate a specific amount of time each week to assisting the Treatment Court. For example, in quickly serving necessary paperwork.
- **Probation Officer:** Alfreda Shinns of the Office of Probation and Parole has been fulfilling this role on the ATC Advisory Committee. It is also intended that a single probation officer will

be assigned to supervise ATC cases to promote dialogue and coordination between that person and the ATC therapist and to handle traditional probation functions such as home visits.

- Liz Wixson, Director of Clinical and Emergency Services, Alexandria Department of Community and Human Services has been serving on the ATC Advisory Committee and, in coordination with Ms. Shinns, has developed the treatment components of this program.
- Debra Collins, Deputy City Manager: ATC Advisory Committee Member to ensure ongoing coordination with City government and compliance with City policies and procedures.
- Adam Willard, Chief Magistrate: Member of the ATC Advisory Committee. The Magistrate's Office will often be the first place where potential program participants are identified and his participation will be critical in ensuring that cases are scheduled in the General District Court expeditiously in order to ensure that participants are quickly put in contact with the program.
- The Hon. Edward Semonian, Clerk of Court: Member of the ATC Advisory Committee, to ensure that the created program is compatible with the docketing, staff, and administrative needs of the Circuit Court for the City of Alexandria.
- Lesa Gilbert, Director, Center for Economic Support, Alexandria Department of Community and Human Services: ATC Advisory Committee member to assist in developing the treatment component of the program.
- Jessie Bryant, ATC Advisory Committee member. Ms. Bryant works in the statistics division of the Alexandria Police Department and has provided invaluable statistical research for this proposal. She will continue to work with the prosecutor/drug court coordinator to provide statistical analysis needed for ensuring grant accountability.

- Representatives from the Alexandria Sheriff's Office (including pretrial supervision).
- D. Plan for Collecting the Data Required for This Solicitation's Performance Measures**

The City of Alexandria is firmly dedicated to evidence-based decision making and is aware that this relies upon accurately collecting and assessing statistical data. Our local police department relies on statistics driven response and has a funded statistics division which has provided incredible resources during the creation of this project and will continue to do so. Data collection will occur at two levels – the arrest/judicial level and the treatment level. At the judicial level, the data will be maintained by the drug court prosecutor who will be responsible for maintaining in-depth statistics regarding eligible participants, compliance with established timelines, case outcomes, etc. Treatment statistics will also be maintained by senior therapist, who will work with the drug prosecutor to comply with the requirement that we report aggregated client-level performance and outcome data. The Treatment Court prosecutor, working with the therapist, will be responsible for doing a quarterly review of the actual number of participants served with grant funds as compared to the projected number of participants to be served as identified in this proposal.

It is our intention for the ATC Advisory Committee to remain in place and meet on a quarterly basis to review data from the program and use it to improve performance. This would be above and beyond the meetings of the treatment team itself before court. We are mindful that no matter how well-developed the program is, it will need to evolve with experience. Additionally, we want to be positioned to assess long-term success of the program and its impact on recidivism. The Treatment Court prosecutor/coordinator will specifically examine these questions based on arrest and court data. However, graduates will also be encouraged to report back to the Senior Therapist at certain points and ongoing contact will be maintained to assess the program's success outside of the criminal justice system.

The ATC Advisory Committee believes that discharge planning must begin at the starting point of treatment, rather than at the end. Alexandria has had a robust Reentry Council that has developed a robust array of Reentry services. The Council is led by the Office of Probation and Parole, with active participation from DCHS, other community service providers, and peers. As such, ATC is well-suited to use this system to access needed services and supports for ATC clients. The goal is that when a participant is ready to graduate from ATC, the reentry needs will have been addressed throughout the individual's participation. This is part of the reason that the grant proposal has been structured in the way it is.

Sustainability has also been at the front of the ATC Advisory Committee's discussions. As can be seen from the broad cross-section of City agencies that are participating in the ATC Advisory Committee, this initiative has received wide support from our community. However, before asking for new local dollars to be committed, it is imperative that we be able to demonstrate that we have created a successful program that is accomplishing its desired end. Growing an already successful program is often easier to accomplish than creating the program in the first place. When success can already be demonstrated, it is easier to bring additional resources to the table. That is why obtaining this grant is so vital. By securing funding for two years that allows the program to have both sufficient reach and provide adequate services, the likelihood of success is substantially higher. One of the chief responsibilities for the drug court prosecutor/coordinator will be focusing on long-term sustainability and enhancement of the program. There are a variety of options for long-term sustainability. Some will involve identifying other grants through agencies like SAMHSA or the Commonwealth of Virginia. Additionally, once we have a successful program in place, the ATC Advisory Committee, working with its community partners will strive to identify and secure financial commitments from all available sources.