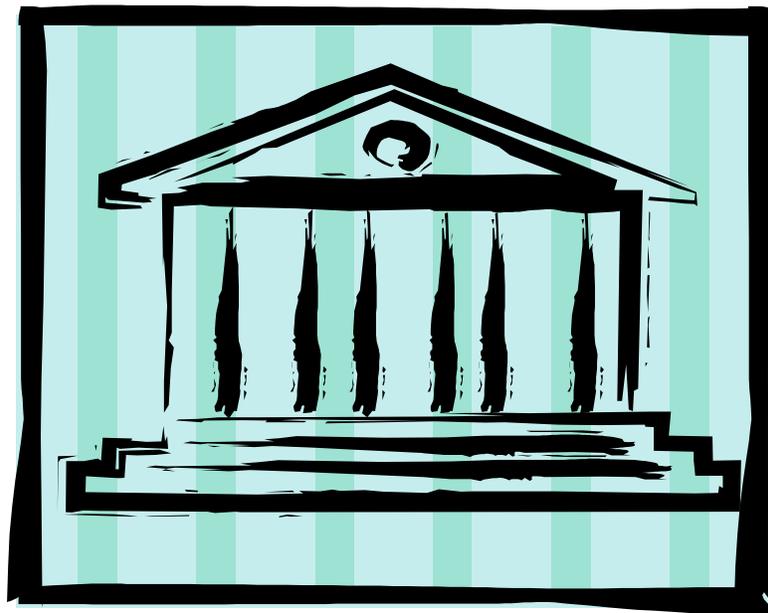

REPORT ON FLORIDA'S DRUG COURTS



**Prepared by:
Supreme Court Task Force on Treatment-Based Drug Courts
July 2004**

**Office of the State Courts Administrator/Office of Court Improvement
Supreme Court Building, 500 South Duval Street
Tallahassee, Florida 32399**

Task Force on Treatment-Based Drug Courts 2002-2004 Membership

The Honorable Melanie May, Chair
Appellate Judge
Fourth District Court of Appeal

Mr. Frank Alarcon
Deputy Secretary
Department of Juvenile Justice

Mr. Chet Bell
Executive Vice President
Stewart-Marchman Center

The Honorable Jeri B. Cohen
Circuit Judge
Eleventh Judicial Circuit

The Honorable Nancy Daniels
Public Defender
Second Judicial Circuit

Mr. Kenneth DeCerchio
Assistant Secretary
Department of Children and Families

Mr. Jerry Demings
Director of Public Safety
Orange County Administration

Ms. Pamela Denmark
Assistant Bureau Chief
Substance Abuse Programs
Department of Corrections

The Honorable Jack Espinosa
Circuit Judge
Thirteenth Judicial Circuit

Mr. James R. McDonough
Drug Control Policy Director
Executive Office of the Governor

The Honorable John T. Parnham
Circuit Judge
First Judicial Circuit

Dr. Roger Peters
Associate Professor
University of South Florida
Department of Mental Health, Law, and
Policy

The Honorable John Tanner
State Attorney
Seventh Judicial Circuit

Ms. Jennifer Dyer Wells
Trial Court Administrator
Fourteenth Judicial Circuit

The Honorable Reginald Whitehead
Circuit Judge
Ninth Judicial Circuit

Staff Support:

Ms. Jennifer Grandal
Senior Court Analyst II
Office of the State Courts Administrator

Mr. John Couch
Court Analyst
Office of the State Courts Administrator

Mr. Aaron Gerson
Court Analyst
Office of the State Courts Administrator

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I. INTRODUCTION

Drug Court is a process by which substance abusers entering the court system are placed into treatment and proactively monitored by the judge and a team of justice-system and treatment professionals; it employs effective drug-testing and graduated sanctions and incentives.

The term “drug court” – what was it, what is it, what does its future hold? When the justice system encountered insurmountable numbers of drug cases in the late 1980s, it began an experiment that it called “drug court.” That experiment evolved into an effective, efficient process for handling substance abusers involved in the justice system.

What it is not is a “specialty court,” although many circuits assigned a single division of the court to handle these cases. It took the work of the Governor’s Office, the Florida Legislature, and the Florida Courts System to transform drug court from an experiment into a successful “process” that has been replicated throughout the country. This report will explore the evolution of drug court and its contribution not only to the justice system, but to Florida as a whole. It will also recommend how the process can be expanded to contribute to a better Florida. Specifically, this report set out to accomplish the following objectives:

- identify the problems caused by substance abuse within the justice system;
- trace the history and current status of drug courts in Florida;
- reference legislation relating to drug courts;
- describe how the creation and development of the drug court has improved the justice system and society as a whole through lower recidivism and cost savings in jail and prison beds;
- explain the current funding structure and identify future needs; and
- provide recommendations on the steps to be taken to integrate drug court into mainstream judicial processing.

**Florida Drug Courts:
A Proven Process for Accountability and Success**

II. HISTORY OF DRUG COURTS

Substance abuse has existed since the beginning of time. Human beings have always found ways to alter their conscious state. Today, mind-altering substances are diverse, readily accessible, and all-too-frequently used and abused. In response, modern society criminalized not only the behavior that often results from substance abuse and addiction, but also the possession and purchase of the substances that lead to crime. Drug crimes, in general, and drug possession charges, in particular, are the most prevalent criminal charges filed in Florida. In 2002, 37,667 criminal charges were filed for drug possession alone.¹ Yet for decades, while the justice system acknowledged the adverse impact of substance abuse on our communities and the courts, the traditional adversary approach did little to effectively address the problem.

Statistics in Florida show that over 60% of all persons arrested are either under the influence of, or have committed the crime to gain access to, drugs and alcohol.² Estimates are similar for persons involved in the child protection system and domestic violence cases. For example, in 1999, the National Center on Addiction and Substance Abuse (CASA) published a report detailing its two-year analysis of the connection between substance abuse and child maltreatment. The report revealed that substance abuse causes or contributes to seven out of ten cases of child maltreatment and accounts for nearly ten billion dollars in federal, state, and local spending exclusive of costs relating to healthcare, operating judicial systems, law enforcement, special education, lost productivity, and privately incurred costs.³ Additionally, researchers have found that one fourth to one half of all men who commit acts of domestic violence also have substance abuse problems.⁴

Substance abuse causes or contributes to seven out of ten cases of child maltreatment

--National Center on Addiction and Substance Abuse

Clearly, drugs (including alcohol) drive the majority of criminal activity in Florida and in the United States. Nonetheless, a significant portion of the crimes committed by substance abusers are nonviolent in nature. Despite arrest, conviction, and incarceration, if the underlying substance abuse or addiction goes untreated,

¹ Florida Department of Law Enforcement. Computerized Criminal History Data. February 2004.

² National Institute of Justice, U.S. Department of Justice. April 2003. *2000 Arrestee Drug Abuse Monitoring: Annual Report*.

³ The National Center on Addiction and Substance Abuse at Columbia University (CASA). January 1999. *No Safe Haven: Children of Substance Abusing Parents*.

⁴ Coleman, D.H., & Straus, M.A. (1983). "Alcohol abuse and family violence." In E. Gottheil, K.A. Druley, T.E., Skoloda, & H.M. Waxman (Eds.) *Alcohol, drug abuse and aggression* (pp.104-124). Springfield IL: C. Thomas; Gondolf, E.W. (1995). Alcohol abuse, wife assault, and power needs. *Social Service Review*, 69, 275-283; Hamilton, C.J., & Collins, J.J. (1981). The role of alcohol in wife beating and child abuse: A review of the literature. In J.J. Collins (Ed.), *Drinking and crime: Perspectives on the relationship between alcohol consumption and criminal behavior* [253-287]. New York: Guilford; Kantor, G., & Straus, M.A. (1989). Substance abuse as a precipitant of wife abuse victimizations. *American Journal of Drug and Alcohol Abuse*, 15, 173-189; Leonard, K.E. & Jacob, T. (1987) Alcohol, alcoholism, and family violence, in VanHasselt, Morrison, Bellack, & Hersen (Eds.) *Handbook of Family Violence*, 383-406. NY: Plenum; Pernanen, K. (1991). *Alcohol in human violence*. NY: Guilford.

offenders are likely to repeat the cycle once released from jail, prison or community supervision. Drug courts provide an end to the cycle by creating increased offender accountability and strong incentives for offenders to address their underlying substance abuse and addiction, thereby decreasing recidivism.

As with most innovations, necessity was the mother of the invention of drug court. In the late 1980s, Dade County experienced the introduction of crack cocaine into its community. Looking for an alternative to prevent jail overcrowding and avoid federal-court-imposed sanctions, county officials and local court leadership turned desperation into opportunity. The courts were overrun with thousands of offenders charged with possession and purchase of controlled substances. How could the justice system handle these offenders more effectively and efficiently?

Drug courts provide an end to the cycle by creating increased offender accountability and strong incentives for offenders to address their underlying substance abuse and addiction.

The criminal courts began by sentencing drug offenders to jail for short periods of time in an attempt to manage an otherwise unmanageable caseload. The quick turn-around eased jail overcrowding and the consequent fines imposed by the federal courts, but did little to “solve” the problem. Justice became a fast moving, ineffective revolving door for these offenders. Simply put, the courts, overwhelmed with a problem, had no effective tool to address it.

As a result, Circuit Court Judge Herbert Klein (Miami-Dade County) believed that the community could be better served by an alternative approach to incarcerating these offenders. With the approval of the Supreme Court of Florida, Chief Judge Gerald Wetherington assigned Judge Klein to the task of developing a process to better handle the large volume of drug cases. Judge Klein enlisted the aid of then State Attorney Janet Reno, Public Defender Bennett Brummer, and other community leaders. The efforts of these pioneers resulted in the establishment of the Miami-Dade County Drug Court in 1989.

The entire drug court team had a unified goal -- the offender’s recovery and the consequent reduction in criminal behavior.

The process that emerged from this experiment, now known as “drug court,” employs a team approach aimed at habilitation/rehabilitation through proactive court monitoring of offenders while in treatment. The drug court team, comprised of the judge, prosecutor, defense counsel, treatment, probation, and law enforcement began to work together in a non-adversarial setting. The court became proactive in its supervision of the offenders by requiring frequent court appearances. Sanctions and incentives were developed by the team to motivate the offender to maintain his or her sobriety. To provide accountability, the team employed an effective random drug testing program.

This process differed from the traditional approach where offenders were sentenced to short periods of incarceration or probation without treatment. Typically, they were only required to report to a probation officer once a month, at which point they might be drug tested at a scheduled time. The predictability of this process enabled substance abusing offenders to control their substance intake, thereby avoiding detection while continuing drug use.

Additionally, the offender would see the judge only when he or she failed to comply with the requirements of the sentence. The court’s reaction to this failure (which often took the form of a positive urinalysis test) was strictly punitive in nature: treatment was not routinely ordered or monitored by the court, because continued substance use was simply considered disobedience to court orders.

Under the new process in drug court, the judge monitored offenders through frequent court appearances to encourage good behavior and sanctioned non-compliance in a more informal, stream-lined, and structured process. Treatment became the focus of supervision. Noncompliance in the form of a positive urinalysis was recognized initially as relapse, part of recovery, but with immediate consequences imposed. Consequently, the court’s response to this behavior was tailored to encourage sobriety rather than simply punish. The entire drug court team had a unified goal, the offender’s recovery and the consequent reduction in criminal behavior.

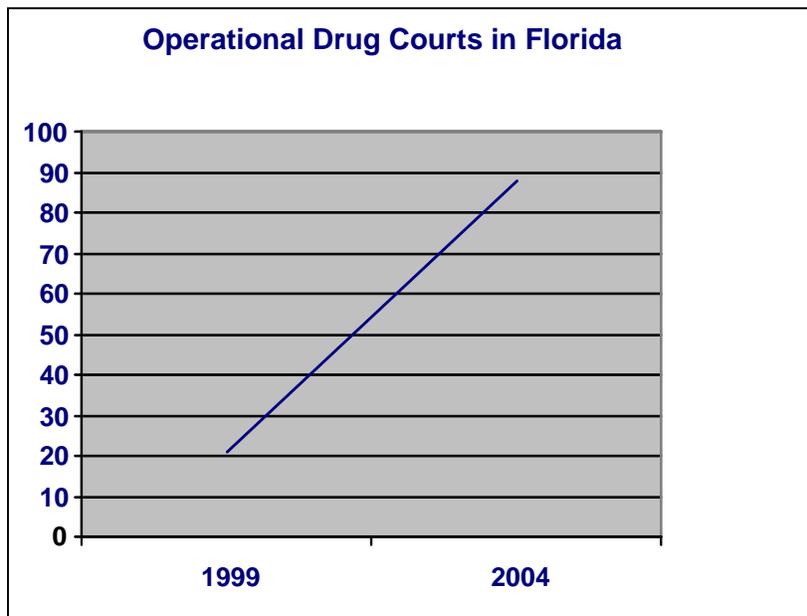
Prior to establishing its drug court in 1991, Broward County attempted to handle drug cases by referring offenders to treatment immediately upon arrest under the assumption that immediate referral to treatment would help solve the problem of offenders continuing to commit crimes as a result of their substance use. However, it soon became apparent that referrals alone were ineffective. Many offenders never made it to the treatment program, and those who did stayed for short periods of time. That failed experiment proved that simply ordering offenders to treatment did not have the intended outcome. As a result, Broward County became the next Florida jurisdiction to implement drug court. Other jurisdictions then began to replicate the drug court model.

Established in 1989, the Miami-Dade County Drug Court was the first of its kind in the nation.

Broward County soon followed, and Florida became a pioneering state in the treatment and court monitoring of drug offenders.

III. CURRENT STATUS

Florida has been, and continues to be, a leader in the creation and development of drug court. Currently, 88 drug courts operate in 43 counties within the state, and more are planned. Florida's experiment has spawned 1,183 drug courts in either planning or operational stages throughout the country. They have been established in all fifty (50) states, England, Australia, Canada, Bermuda, Puerto Rico, Guam, and South America. Drug court is a process that Florida created and of which it can be proud.



In 2002, approximately 91,700 persons were enrolled in drug courts across the country.⁵ Florida had more than 10,200 admissions to drug court in that same year,⁶ illustrating that Florida accounts for more than a tenth of the persons enrolled in drug courts across the country, which is a higher per capita involvement among arrestees than any other state's. Nevertheless, this figure addresses only 25% of persons charged with possession of a controlled substance who would potentially be eligible for drug court.⁷

Before 1999, only two drug court coordinator positions existed within the state. The coordinators' case management was proving to be critical to the successful implementation and operation of drug courts in Florida. As a result of legislation drafted by the Supreme Court Task Force on Treatment-Based Drug Courts,⁸ additional drug court coordinators

⁵ Approximate figures provided by American University.

⁶ Florida Office of the State Courts Administrator. February 2003. *Drug Court Demographics*.

⁷ Based on FDLE drug possession filings. See Note 1.

⁸ The Steering Committee was renamed in 2002 as the Task Force on Treatment-Based Drug Courts.

were authorized and funded as part of the court's case management system through general revenue. Currently, there is a minimum of one coordinator position in each circuit. The Trial Court Budget Commission has recognized the vital role coordinators play and included them as core elements of case management for implementation of Article V, Revision 7 to Florida's Constitution.

Due in part to the 2001 legislative mandate for a drug court in each circuit, Florida experienced unprecedented growth in the number of drug courts and persons participating in the process. From 1999 to 2002, the Office of State Courts Administrator (OSCA) reports that the number of adult drug courts increased from 20 to 37, while juvenile delinquency drug courts increased from 11 to 20 and dependency drug courts increased from 3 to 11 programs.

One of drug court's strengths is due to the uniformity in its administration and operations throughout the state. In 1999, the Supreme Court Steering Committee on Treatment-Based Drug Courts adopted the nationally recognized key components of drug courts. These key components, found on page 10 of this report, guide trial courts in the development of their respective drug courts. In 1994, with funds available through the State Justice Institute, the OSCA prepared a comprehensive manual for judges, court support staff, and key stakeholders on procedures for establishing drug courts. This publication, utilized by trial courts, ensures a similar approach in the establishment of drug courts while enabling the necessary flexibility to adapt to the availability of local resources.

One of drug court's strengths is its flexibility to adapt to the local community culture.

The general flow of events that occur in most treatment-based drug courts can be described in the following manner: defendants are screened in jail; provided the opportunity to be admitted to the program; oriented to the program; involved in the graduated treatment program, monitored by the court; and provided aftercare. This process holds true for pre-trial diversionary drug court programs, post-adjudicatory programs, and others that target only drug offenses. Despite variance in eligibility requirements to participate, there is continuity in case processing, team collaboration, record-keeping and judicial oversight.

A number of localities have exported the drug court model to the delinquency and dependency divisions. Work is currently underway to establish DUI and misdemeanor drug courts. Following on the success of drug courts, other problem-solving courts have been developed to address specific issues - for example, community, truancy, domestic violence, and mental health courts. Drug court and the case management processes it employs can also be effective when applied in unified family court.

Some judicial circuits have begun to experiment with expanding the process. The Eleventh and Seventeenth Circuits have dedicated a single division of their felony court to handle large numbers of drug court cases. As a result, single drug court teams are able to handle in excess of 2,000 cases, which enables the other felony divisions to handle more complex cases. The Thirteenth Circuit created a drug division that handles all drug charges

in both the traditional adversarial and the new drug court processes. The Eleventh Circuit has established a judicial monitoring program whereby all felony division judges set aside a dedicated drug court docket to monitor selected cases sentenced by that judge.

In August 2000, the Conference of Chief Justices and the Conference of State Court Administrators passed a Resolution endorsing drug court management concepts as representing best practices of therapeutic jurisprudence principles, which reads in part:

There are principles and methods grounded in therapeutic jurisprudence with judicial case processing, ongoing judicial intervention, close monitoring and immediate response to behavior, multi-disciplinary involvement, and collaboration with community-based and government organizations.

These principles and methods are now being employed in these newly arising courts and calendars, and they advance the application of the trial court performance standards, and the public trust and confidence initiative.

Well functioning drug courts represent the best practice of these principles and methods.

Today, the Conferences are planning a two-day symposium to develop nationwide systems to integrate the processes employed by problem-solving courts into mainstream justice by capitalizing on the success of drug courts.

Courts have changed over time to meet the challenges of modern society. They have evolved to become everyday problem-solvers. Changes in our society, legislation, and a shift in funding streams demand the integration of drug court processes throughout the entire justice system.

IV. LEGISLATION

In 1994, the Florida Legislature enacted section 948.08(6), Florida Statutes, to provide for dismissal of charges for purchase and possession of a controlled substance upon successful completion of a drug court program for offenders with no prior felony convictions. This provided a statewide sentencing scheme for these offenses, and a “carrot” to encourage offenders to opt into drug court, where they would be held accountable for their actions through intensive monitoring by the court.

In 2001, the Supreme Court Task Force on Treatment-Based Drug Courts proposed legislation that was adopted and enacted as section 397.334, Florida Statutes, which acknowledges the need for, and significant impact of, drug courts in handling substance-abusing offenders. This statute required each judicial circuit to establish a treatment-based drug court program, and it still requires the programs to adhere to the 10 key components of a drug court, recognized by the U.S. Department of Justice and adopted by the steering committee in 1999. These components are listed below:

- Drug courts integrate alcohol and other drug treatment services with justice system case processing;
- prosecution and defense counsel use a non-adversarial approach that enables them to promote public safety while protecting participants' due process rights;
- eligible participants are identified early and promptly placed in the drug court program;
- drug courts provide access to a continuum of alcohol, drug, and related treatment and rehabilitation services;
- abstinence is monitored by frequent, random alcohol and other drug testing;
- a coordinated strategy governs drug court responses to participants' compliance;
- ongoing judicial interaction with each drug court participant is essential;
- monitoring and evaluation measure the achievement of program goals and gauge effectiveness;
- continuing interdisciplinary education promotes effective drug court planning, implementation, and operations; and

- forging partnerships among drug courts, public agencies, and community-based organizations generates local support and enhances drug court program effectiveness.

Additionally, the legislation expanded eligible offenses to include obtaining a prescription by fraud, solicitation to purchase, and tampering with evidence for adult pre-trial intervention programs. Eligible offenses were also expanded for juvenile delinquency pre-trial intervention programs, and a mechanism for transferring cases between jurisdictions was created, pursuant to section 910.035, Florida Statutes.

House Bill 113A, which relates to implementation of Article V, Revision 7 of the Florida Constitution, passed in 2003. It removed the mandate for each judicial circuit to establish a treatment-based drug court program, pursuant to section 397.334, Florida Statutes, effective July 1, 2004. In addition, this bill eliminated the pronouncement of legislative intent for establishing treatment-based drug courts.

In 2002 and 2003, the Supreme Court Task Force on Treatment-Based Drug Courts proposed additional substantive legislation to further expand eligibility to nonviolent third-degree felonies, infuse the process into dependency law, and continue the institutionalization of drug courts.⁹ This legislation failed to pass both chambers of the legislature. This same legislation was proposed during the 2004 legislative session as Senate Bill 316, sponsored by Senator Evelyn Lynn and its companion, House Bill 281, sponsored by Representative Sandy Adams. The Senate bill passed, but the House bill died in Appropriations.

⁹ In 2003, the Florida Association of Drug Court Professionals (FADCP) drafted additional legislation to secure a dedicated funding stream for drug courts by assessing a \$6.00 fee on all criminal dispositions. The legislation did not pass.

V. CAPITALIZING ON THE SUCCESS OF DRUG COURTS

Drug Court's success has been measured by capturing data in many areas. The three most prominent factors are: *Recidivism*; *Cost Effectiveness*; and *Retention*.

Statewide recidivism data for drug courts in Florida is captured by the local drug court programs and submitted to the OSCA. However, generalizations regarding recidivism cannot be compiled on a statewide basis due to individual programs' differences in information collection. Many programs draw down federal funds that require different recidivism data to be collected. For example, the definitions can vary based on time frames for re-arrest, whether a person is actually convicted of the alleged crime, and the nature of the offense. It is interesting to note, too, that there is no single nationally recognized definition of recidivism. The Task Force recommends that minimum performance measures and data elements be collected by all operational drug courts and reported to the OSCA on an annual basis. These performance measures and data elements for adult, juvenile delinquency and dependency drug courts are provided in Appendix A. The OSCA should develop a data collection instrument incorporating the data elements identified for statewide reporting by the drug courts.

Improved Recidivism Rates

A recent national recidivism study on drug courts, conducted by the National Institute of Justice, revealed a 16.4% recidivism rate for graduates after one year¹⁰ compared to 43.5% of similar cases handled in a traditional method.¹¹ The recidivism rate increased to 27.5% after two years¹² compared to 58.6% for offenders handled traditionally.¹³ The study did not distinguish among the differing target populations; i.e., courts handling only first time possession cases versus courts handling deep-end offenders.¹⁴

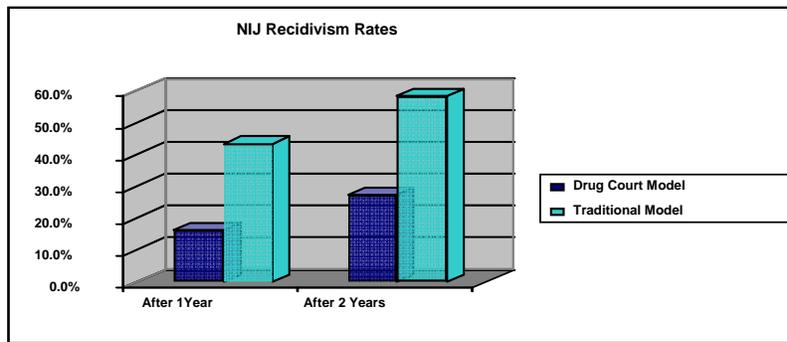
¹⁰ Roman, J., Townsend, W., & Bhati, A. July 2003. *National Estimates of Drug Court Recidivism Rates*, Washington, DC: National Institute of Justice, U.S. Department of Justice.

¹¹ The White House, Office of National Drug Control Policy. February 2003. *National Drug Control Strategy*. (p. 23)

¹² See Note 10.

¹³ See Note 11.

¹⁴ Brewster, M.P. 2001. An evaluation of the Chester (PA) Drug Court Program. *Journal of drug issues*. 31(1), 177-206.



....studies continue to show that drug court graduates have significantly reduced recidivism rates, thereby enhancing public safety.

In 2003, the Center for Court Innovation analyzed drug courts in the State of New York.¹⁵ The study found that of the 18,000 drug court graduates tracked, the recidivism rate was 29% lower over three years than for those offenders who chose incarceration without treatment. A study conducted in Chester County, Pennsylvania, revealed a recidivism rate of 5.4% compared to a 21.5% recidivism rate by a control group.

In Florida, drug courts have demonstrated recidivism rates within the national range. For example, in the most recent data provided to the OSCA, Broward County revealed a 19% recidivism rate for drug court graduates. Palm Beach County reported a 6% recidivism rate for graduates, and Escambia County reported a 12% recidivism rate. The bottom line is that studies continue to show that drug court graduates have significantly reduced recidivism rates, thereby enhancing public safety.

Cost Effectiveness

According to the National Association of Drug Court Professionals, incarceration of drug offenders costs between \$20,000 and \$50,000 a year per person.¹⁶ In contrast, participation in drug court costs between \$2,500 and \$4,000 annually per person.

The State of Washington reports that “a county’s investment in drug courts pays off through lower crime rates among participants and graduates.”¹⁷ The study revealed that

¹⁵ Rempel, M., Fox-Kralstein, D., Cissner, A., Cohen, R., Labriola, M., Farole, D., Bader, A., & Magnani, M. 2003. *Executive summary: The New York State Adult Drug Court Evaluation: Policies, Participants and Impacts*. New York, NY: Center for Court Innovation.

¹⁶ National Association of Drug Court Professionals. *The Facts on Drug Courts* brochure.

¹⁷ Washington State Institute for Public Policy. March 2003. *Washington State’s drug courts for adult defendants: Outcome evaluation and cost-benefit analysis*, Olympia, WA: Author.

each drug court participant produces \$6,779 in benefits from reduced recidivism alone with \$3,759 in avoided criminal justice costs and \$3,020 in avoided costs to victims.¹⁸

According to the Center for Court Innovation’s study of drug courts in New York, \$254 million dollars were saved in prison expenses by the participation of 18,000 offenders in drug court.¹⁹ In California, two studies have concluded that a minimum of \$18 million dollars is saved each year because of drug courts.²⁰ In Multnomah County, Oregon, a study of drug courts revealed that every dollar spent on a drug court saved taxpayers ten dollars.²¹

Cost-benefit analyses are important for developing meaningful social policies, in part because they examine the value of a program from a societal perspective rather than an agency viewpoint. Well-conducted cost-benefit analyses can provide relevant information on cost savings to a court system or correctional institution, but they can also demonstrate costs and benefits to larger social institutions, such as a labor market. The studies cited above suggest that drug courts do save money, and there is anecdotal evidence of similar savings in Florida due to participation in drug courts. The Task Force on Treatment-Based Drug Courts recognizes the need for a more comprehensive approach to assess the costs and benefits of drug courts in Florida. This assessment should identify the broader social and economic impacts that participation in drug courts and reduced recidivism bring to the state of Florida.

Retention Rates

Another measurable outcome is the offender’s increased retention in treatment. For decades it was thought that offenders had to “want” treatment for it to be effective. Drug court and its ability to coerce offenders into, and keep them in, treatment have dispelled that myth. It is now widely accepted that coerced treatment works. Not only does it work, but it works at higher rates of success than strictly voluntary treatment, as measured by rates of completion and relapse.

**It is now
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The length of time a person participates in treatment is a recognized indicator of that person’s ability to remain clean and sober. Once an offender completes 90 days of treatment, his or her treatment prognosis improves in direct proportion to the amount of time spent in treatment.²² Drug courts typically require offenders to spend one year or longer in treatment, well beyond the 90-day effectiveness threshold.

¹⁸ See Note 17.

¹⁹ See Note 15.

²⁰ Judicial Council of California, & the California Department of Alcohol and Drug Programs. March 2002. *Drug court partnership: Final report*, San Francisco, CA: Authors; NPC Research, Inc., & Administrative Office of the Courts, Judicial Council of California. October 2002. *California drug courts: A methodology for determining costs and avoided costs: Phase I: Building the Methodology: Final Report*.

²¹ Finigan, M. 1998. *An Outcome Program Evaluation of the Multnomah County S.T.O.P. Drug Diversion Program*. [Report to the Multnomah County Department of Community Corrections.]

²² Simpson, D.D., & Curry, S.J. (Eds.). Special issue: Drug abuse treatment outcome study. *Psychology of addictive behaviors, 11*; Simpson, D.D., & Sells, S.B. 1983. Effectiveness of treatment for drug abuse: An overview of the DARP research program. *Advances in alcohol and substance abuse, 2*, 7-29; Hubbard, R.L., Marsden, M.E., Rachal, J.V., Harwood, J.H., Cavanaugh, E.R., & Ginsburg, H.M. 1989. *Drug abuse treatment: A national study of effectiveness*.

Nationally, drug courts report treatment retention rates of 67–71%.²³ Non-drug court participants in treatment drop out prior to the 90-day threshold at a rate of between 40 to 80%.²⁴ Thus, the high retention rate of drug court participants is significant as compared to those voluntarily entering into substance abuse treatment.

Chapel Hill, NC: University of North Carolina Press; Center for Substance Abuse Treatment. September 1996. *National treatment improvement evaluation study, preliminary report: Persistent effects of substance abuse treatment – one year later*. Rockville, MD: Author, Substance Abuse and Mental Health Services Administration, U.S. Department of Health & Human Services.

²³ American University Drug Court Clearinghouse and Technical Assistance Project. 2000. *Adult drug court treatment provider survey, January-March 2000*. Washington, DC: Author, pp.28-29.

²⁴ Stark, M.J. 1992. Dropping out of substance abuse treatment: A clinically oriented review. *Clinical psychological review*, 12, 93; Marlowe, D.B., DeMatteo, D.S., & Festinger, D.S. October 2003. A sober assessment of drug courts. *Federal sentencing reporter*, (16)1, 113-128.

VI. FUNDING

At a time when the economy is fragile and dollars are limited, it is important to ensure that resources are used efficiently. Drug courts, and the process they employ, are a wise use of Florida's resources. The President's 2004 budget called for an increase in drug court funding from \$55 to \$68 million. Additionally, Governor Bush's proposed budget has called for an \$18 million increase for substance abuse treatment services for 2004/2005, some of which would likely be available to drug courts.

Many Florida drug courts became operational through grants from the Drug Court Program Office, now part of the Bureau of Justice Assistance, U.S. Department of Justice. In those jurisdictions where federal grants expired, most communities found innovative ways of replacing funds by collaborating with existing partners locally, and statewide. Not all jurisdictions, however, have been successful in this transition.

**Drug courts, and the process they employ, are a wise
use of Florida's resources.**

Drug courts obtain funding from a wide variety of sources and differ in their funding formula from jurisdiction to jurisdiction. In Florida, some are funded by local county funds and local law enforcement block grants. A number of programs receive state funds through Edward Byrne Grants and collaborate with the Departments of Children and Families, Juvenile Justice, and Corrections. Many drug courts continue to receive federal grant funds through sources such as the Bureau of Justice Assistance, the Substance Abuse and Mental Health Services Administration, and other federal agencies.

In some jurisdictions, participant fees are collected to offset treatment and other operational costs. Pursuant to key component #10, codified in section 397.334, Florida Statutes, drug courts use a collaborative approach, partnering with other existing agencies to provide access to services already in existence, but often not easily accessible by the populations that drug courts serve.

Ultimately, drug courts should operate with sufficient dedicated funding streams to ensure a continuity in administration. Additional treatment funding should come from a reallocation of resources saved by the drug courts through saved jail and prison-bed costs, juvenile commitment programs, and foster care. Thus, it is critical to document the monies saved by drug courts and redirect those funds for treatment through the appropriate executive agencies.

The chart illustrated below is a statewide summary of funding sources that support Florida's Drug Courts.

Judicial Branch	
Drug Court Coordinators * With a salary range from \$34,712 to \$43,544	33 FTE positions
Executive Branch	
Department of Corrections	\$3,879,292
Juvenile Justice	\$414,661
Department of Children and Families	\$4,172,760
Total	\$8,466,713
Community Resources	
Local Law Enforcement Block Grants	\$4,871,964
County Funds	\$6,499,712
Court Fees and Fines	\$656,120
Drug Abuse Trust Funds	\$477,754
Teen Court	\$125,000
Private Providers	\$228,000
Total	\$12,858,550
Grants	
Byrne	353,188
BJA	4,649,716
OJJDP	99,704
SAMSHA	1,952,175
Total	\$7,054,783
Grand Total (excluding Judicial Branch funds)	\$28,380,046

VII. THE FUTURE

Florida's three branches of government are:

- Executive Offices of the Governor;
- Florida Legislature; and
- Florida Courts.

The three branches of government each recognize the need for, and have exhibited the willingness to, dedicate resources for the continued growth of drug courts. The *Governor's Drug Control Strategy* has identified drug court as the “**crown jewel**” of the strategy's treatment component. The *Strategy* calls for the expansion of drug courts statewide to offer alternatives to incarceration for nonviolent third-degree felonies and drug offenders. Significant work is required to realize this aspect of the *Strategy*. While Florida has in absolute numbers the second largest drug court system in the country (and the largest on a per capita basis), its drug courts still only reach a small fraction of persons who are in the judicial system because of their substance use.

In 2003, the Florida Legislature eliminated the statewide mandate for a drug court in each circuit and made drug courts a local option for each county. It is hoped that this legislation will not slow the positive and steady growth of drug courts and, correspondingly, the number of Florida citizens restored to productivity. Just as drug courts have taught us that coerced treatment works, we should recognize that coerced drug courts have encouraged growth in the numbers of courts and persons affected by them.

There are still significant challenges to be faced. Drug courts are not reaching thousands of substance abusers within the justice system. As previously mentioned, the Florida Department of Law Enforcement (FDLE) data shows close to 40,000 drug possession charges were filed statewide in 2002. In addition, FDLE estimates that close to 91,000 nonviolent third-degree offenses were committed during the same time frame. With just over 10,000 drug court admissions each year, drug courts are just beginning to address the large number of cases with potential substance abuse issues entering the courts each year.

The three branches of government each recognize the need for,
and have exhibited the willingness to, dedicate resources for the
continued growth of drug courts.

The number of youths committed to the Florida Department of Juvenile Justice (DJJ) for drug-related offenses increased 203% over the last six years. A recent survey of DJJ commitment programs indicates that approximately 35% of committed youths have substance-related disorders as specified in the Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition, and an additional 30% demonstrate behaviors which suggest a substance abuse problem. This equates to approximately 6,613 of Florida's committed youth having a substance abuse problem or disorder.

The lessons learned in drug courts have great value.

The Florida Department of Children and Families reports that approximately half of all protective supervision cases have one or more adult caretakers in need of substance abuse services.²⁵ Of this number approximately one half participate in treatment services. This figure includes only protective supervision cases and does not include all child welfare cases that enter the courts. Therefore, this figure represents a conservative estimate as to the incidence of substance abuse within the child welfare/dependency system.

The lessons learned in drug courts have great value. Most divisions of the court handle cases involving substance abuse. These divisions must learn to use the processes employed by drug courts to more effectively handle these types of cases.

Perhaps the greatest challenge lies in education and training. Those who toil in the justice system - judges, prosecutors, defense counsel - are trained in the law and the adversarial process, but the issues facing today's modern justice system are very different than the issues for which the system was originally designed. Society has changed. In order to effectively adjudicate these cases, the justice system must adapt to this change by more effectively addressing the complex issues that substance abuse presents. Change is a difficult process and is often subject to resistance, but necessity- always a catalyst for change - now drives the need for the drug court system to continue to evolve, if it is to remain viable.

²⁵ Information provided by Kenneth DeCerchio and Darran Duchene, Substance Abuse Program Office, Department of Children and Families, to Jennifer Grandal, Office of the State Courts Administrator, March 2004.

IX. CONCLUSION AND RECOMMENDATIONS

Drug courts provide the most comprehensive and effective control of substance abusers' criminality and drug usage while under the court's supervision. They provide closer, more comprehensive supervision and much more effective drug testing and monitoring than other forms of community supervision. The process employed by drug courts represents the strongest opportunity for long-term reduction in addiction and related chronic criminal activity, while offering significant savings in justice and societal costs. Former Director of the Office of National Drug Control Policy, Barry McCaffrey, stated that "The establishment of drug courts, coupled with their judicial leadership, constitutes one of the most monumental changes in social justice in this country since World War II." They could also be the most monumental change in the justice system as they transition from their current "alternative" status into mainstream judicial processing.

Drug courts grew from grassroots programs developed locally without standardization or minimum requirements. Due to the demonstrated success of drug courts, it is time for the Supreme Court of Florida to take a more prominent leadership role in their future. Florida invented drug courts; accordingly, it should continue to lead the way in institutionalizing effective processing of substance abusers in the justice system.

To that end, the Task Force on Treatment-Based Drug Courts recommends the following:

- A. The Supreme Court of Florida should formally recognize these points:
 1. The importance of drug courts in effective judicial processing of cases involving substance abusers, and identifying drug courts as a core structure of justice system processing;
 2. The need for continued education and training for drug court team members (judges, prosecutors, public defenders, law enforcement officers, treatment professionals, and corrections officers) and other justice system personnel about substance abuse, mental health, and the process known as drug court;
 3. The importance of a statewide evaluation to capture data on recidivism, retention, and cost effectiveness of drug courts;
 4. The need to create a stable revenue stream for drug court case management;
 5. A review process by appropriate rules committees to address issues arising from drug courts and their transition into mainstream judicial processing;

6. The importance of local drug court advisory committees, drug court coordinators, and local administrative orders within each circuit to promote the sustainability, growth, and institutionalization of drug courts; and
 7. The need to insure staff support in a centralized location for the development of education and training, data collection, and coordination of services for the statewide drug court system.
- B. The Task Force on Treatment-Based Drug Courts should be reconstituted to work on these tasks:
1. Developing a data reporting system for the Supreme Court, the legislature, and the governor's office;
 2. Creating a training curriculum for judges on substance abuse and drug courts;
 3. Setting minimum standards for dependency and delinquency drug courts;
 4. Making recommendations for a state-wide policy concerning the extent to which drug courts can continue to provide a meaningful solution to substance abusers within the justice system;
 5. Addressing legal, procedural, and policy issues concerning drug courts;
 6. Educating government leaders on the need to adequately fund treatment services for use by drug courts;
 7. Establishing guidelines for confidentiality and ethics pertaining to drug courts; and
 8. Expanding the mission of the Task Force to other forms of problem-solving courts through the following actions:
 - a. exploring the relationship of domestic violence to underlying substance abuse and addiction;
 - b. reviewing treatment protocols as they relate to Florida's corrections system to see that benefits accrue by enhanced linkage to drug courts;

- c. promoting DUI and misdemeanor drug courts;
- d. recommending advancements to drug testing procedures to improve cost effectiveness; and
- e. collaborating with Unified Family Courts through the Supreme Court Committee on Families and Children in the Court to ensure substance abuse issues are addressed within these case types.

APPENDIX A

Critical Performance Measures and Data Elements for Adult Drug Courts in Florida

Critical Performance Measures

Recidivism: Definition Adopted by Task Force¹

NIJ Study Definition:

Any re-arrest *for a serious offense resulting in the filing of a charge* for drug court participants during involvement in the drug court program and after successful completion of the program for the following time frames: 0-12 months after program completion; 1-2 years after program completion; and 2+ years after program completion. Case disposition should also be captured. (Serious crimes were defined as any arrest and charge with a crime that carries a sentence of at least one year upon conviction.)

AND

Recommitment to probation or prison within the Department of Corrections while under supervision or not. Includes recommitments for drug court participants during involvement in the drug court program and after completion of the program for the following time frames: 0-12 months after program completion; 1-2 years after program completion; and 2+ years after program completion. The types of arrests (e.g., drug possession, other nonviolent offense, violent offense) and case disposition should be captured.

Retention: Number of persons who are admitted to the drug court program; and the number of persons who successfully complete the drug court program.

Critical Data Elements

1. Number of persons screened for program eligibility.
2. Number of eligible persons who were not admitted to the program. (Note: If at all possible, the reasons for nonadmission should be obtained and demographic, case, and criminal history information should be collected for these persons, for comparison purposes.)

¹ Original definition prior to the Task Force amendment was: Any re-arrest for drug court participants during involvement in the drug court program and after successful completion of the program for the following time frames: 0-12 months after program completion; 1-2 years after program completion; and 2+ years after program completion. The types of arrests (e.g., drug possession, other nonviolent offense, violent offense) and case disposition should be captured.

3. Characteristics of persons admitted to the program, including the following:
 - Age
 - Gender
 - Race/Ethnicity
 - Criminal Justice History
 - Case disposition type
 - Drug(s) of choice

4. Costs of drug court operations, and the source(s) of funding for each operational component.

*Approved by the Treatment-Based Drug Court Steering Committee, 12/14/99.
Revised by the Task Force on Treatment-Based Drug Courts, 12/5/04

Critical Performance Measures and Data Elements for Juvenile Drug Courts in Florida

Critical Performance Measures

Recidivism: Definition Adopted by Task Force²

NIJ Study Definition:

Any rearrest *for a serious offense resulting in the filing of a charge* for drug court participants during involvement in the drug court program and after successful completion of the program for the following time frames: 0-12 months after program completion; 1-2 years after program completion; and 2+ years after program completion. Case disposition should also be captured. (Serious crimes were defined as any arrest and charge with a crime that carries a sentence of at least one year upon conviction.)

AND

Recommitment to supervision under the Department of Juvenile Justice for program participants during involvement in the drug court program and after program completion for the following time frames: 0-12 months after program completion; 1-2 years after program completion; and 2+ years after program completion. The types of arrests (e.g., drug possession, other nonviolent offense, violent offense) and case dispositions should be captured.

Retention: Number of juveniles who are admitted to the drug court program; and the number of juveniles who successfully complete the drug court program.

Critical Data Elements

5. Number of juveniles screened for program eligibility.
6. Number of eligible juveniles who were screened but not admitted to the program. (Note: If at all possible, the reasons for nonadmission should be obtained and demographic (i.e. age, sex, race/ethnicity), case, and criminal history information should be collected for these persons, for comparison purposes.)

² Original definition prior to the Task Force amendment was: Rearrests for program participants during involvement in the drug court program and after program completion for the following time frames: 0-12 months after program completion; 1-2 years after program completion; and 2+ years after program completion. The types of arrests (e.g., drug possession, other nonviolent offense, violent offense) and case dispositions should be captured.

7. Characteristics of juveniles admitted to the program, including the following:
 - Age
 - Gender
 - Race/Ethnicity
 - Criminal Justice History
 - Case disposition type
 - Drug(s) of choice

8. Costs of drug court operations, and the source(s) of funding for each operational component.

Approved by the Task Force on Treatment-Based Drug Courts, 12/5/03.

Critical Performance Measures and Data Elements for Dependency Drug Courts in Florida

Critical Performance Measures

Recidivism: Number and percent of children and parents or primary caregivers within in-home reports with documented findings of “verified” or “some indicators” of at least one maltreatment with a type of abuse, neglect, or threatened harm AND a report received date (or incident date) through the Department of Children and Families for drug court participants while in the program and graduates for the following timeframes: 0-12 months after program completion; 1-2 years after program completion; and 2+ years after program completion.

The above measure:

- 1) Includes only maltreatments where the parents or caregivers who were included as a subject in the original report, or were named in the original report that was the cause of the dependency drug court participation, are also caregivers in the subsequent report.
- 2) Includes only those intact homes, where the child remained with, or was returned to, the parent involved in drug court.
- 3) Excludes reports occurring in out-of-home care so as not to count if the child was maltreated after being removed from the parent and in placement.

Retention: Number of persons who are admitted to the drug court program; and the number of persons who successfully complete the drug court program.

Critical Data Elements

9. Number of persons screened for program eligibility.
10. Number of eligible persons who were screened but not admitted to the program. (Note: If at all possible, the reasons for nonadmission should be obtained and demographic (i.e. age, sex, race/ethnicity), case, and criminal history information should be collected for these persons, for comparison purposes.)

11. Characteristics of persons admitted to the program, including the following:
 - Age
 - Gender
 - Race/Ethnicity
 - Criminal Justice History
 - Case disposition type
 - Drug(s) of choice
 - Number of dependent children
4. Number of reunifications, including the number of children involved for each participant.
5. Time to permanency.
6. Number of drug-free babies born annually.
7. Costs of drug court operations, and the source(s) of funding for each operational component.

APPENDIX B

2003 Drug Court Profiles				
Eligibility and Treatment Program Information				
CIRCUIT	COUNTY	PROGRAM TYPE/CAPACITY	PROGRAM ELIGIBILITY	TREATMENT REQUIREMENTS
1	Escambia	Adult Pretrial and Deferred Sentence Capacity: 50	No significant criminal history. Charged with purchase, possession, or manufacturing of a controlled substance, prescription forgery, introduction of contraband into jail, thefts, forgeries, uttering forgeries, worthless checks, burglaries, dealing in stolen property. Must enter a plea of nolo contendere or guilty and sentence will be deferred. If defendant has a more significant criminal history then defendant will be placed on probation with drug court a condition of probation. VOP's are accepted. Must attend 2 AA/NA meetings per week. Participant Fee: No	12 Months Minimum 3 Phases: Phase I (8 weeks), Phase II (4 months), Phase III (6 months) Participant Fee: Yes, \$300.00 Participant Fee: Yes, \$300.00
		Juvenile Delinquency Capacity: 30	Offenders charged with a non-violent offense who has a substance abuse charge. No prior felony convictions.	12 Months 3 Phases: Phase I (2 months), Phase II (4 months), Phase III (6 months) Participant Fee: No
		Juvenile Dependency Capacity: Unknown	Screening conducted by the Department of Children and Families An Order to Show Cause is filed on an individual who has violated their case plan due to testing positive for substance use.	9-12 Months 3 Phases (Outpatient or Residential): Phase I (4-6 weeks); Phase II (9-16 weeks); Phase III (up to 39 weeks) Participant Fee: Yes, \$300
1	Okaloosa	Adult Pretrial and Deferred Sentence Capacity: 50	No significant criminal history	12 Months Minimum 3 Phases: Phase I (8 weeks), Phase II (4 months), Phase III (6 months) Participant Fee: Yes, \$300.00

CIRCUIT	COUNTY	PROGRAM TYPE/CAPACITY	PROGRAM ELIGIBILITY	TREATMENT REQUIREMENTS
			<p>Charged with purchase, possession, or manufacturing of a controlled substance, prescription forgery, introduction of contraband into jail, thefts, forgeries, uttering forgeries, worthless checks, burglaries, dealing in stolen property</p> <p>Must enter a plea of nolo contendere or guilty and sentence will be deferred</p> <p>If defendant has a significant criminal history, they will be placed on probation with drug court a condition of probation</p>	
		Juvenile Dependency Capacity: 50(includes Okaloosa Adult Drug Court Program Clients)	Must have an open case plan and a significant substance abuse problem.	<p>12 Months Minimum</p> <p>3 Phases: Phase I (8 weeks), Phase II (4 months), Phase III (6 months)</p> <p>Participant Fee: Yes, \$300.00</p>
2	Gadsden	Juvenile Delinquency Capacity: Unknown	<p>Defendant has at least one arrest</p> <p>Substance use</p> <p>Defendant must agree to the requirements of the program</p>	<p>4-12 Months</p> <p>3 Phases: Phase I (4 week minimum); Phase II (8 week minimum); Phase III (4 week minimum)</p> <p>Participant Fee: No</p>
2	Leon	Adult Pretrial Capacity: 75	<p>No prior or pending felony convictions or under Florida Department of Corrections supervision.</p> <p>Charged with a second or third degree purchase or possession under Chapter 893, Florida Statutes in accordance with the criteria of Section 948.08(6), Florida Statutes, prescription fraud, cultivation of marijuana, and tampering offenses.</p>	<p>12 Months Minimum</p> <p>3 Phases: Phase I (8 weeks), Phase II (4 months), and Phase III (6 months)</p> <p>Participant Fee: Yes, \$300</p>
		Juvenile Delinquency Capacity: Unknown	<p>Defendant has at least one arrest</p> <p>Substance use</p> <p>Defendant must agree to the requirements of the program</p>	<p>4-12 Months</p> <p>3 Phases: Phase I (4 week minimum); Phase II (8 week minimum); Phase III (4 week minimum)</p> <p>Participant Fee: No</p>
2	Wakulla	Juvenile Delinquency Capacity: Unknown	Defendant has at least one arrest	4-12 Months

CIRCUIT	COUNTY	PROGRAM TYPE/CAPACITY	PROGRAM ELIGIBILITY	TREATMENT REQUIREMENTS
			<p>Substance use</p> <p>Defendant must agree to the requirements of the program</p>	<p>3 Phases: Phase I (4 week minimum); Phase II (8 week minimum); Phase III (4 week minimum)</p> <p>Participant Fee: No</p>
4	Clay	Adult Pretrial Capacity: 50	<p>No more than two prior felony convictions, no history of violent arrests, and must not have any out-of-county detainers.</p> <p>Charged with a third degree non-violent felony offense.</p>	<p>4 Phases: Phase I and II (10 weeks minimum), Phase III (18 weeks minimum), and Phase IV (8-16 weeks minimum)</p> <p>Participant Fee: Yes, Urinalysis Fee (based on a sliding scale fee up to \$300/year)</p>
4	Duval	Adult Pretrial Capacity: 50	<p>No more than two prior felony convictions, no history of violent arrests, and must not have any out-of-county detainers.</p> <p>Charged with a third degree non-violent felony offense.</p>	<p>12 Months Minimum</p> <p>4 Phases: Phase I and II (8 weeks minimum): Intake, Assessment, and Treatment; Phase III (18 weeks minimum): Ongoing Treatment/Relapse Prevention; and Phase IV (8-16 weeks minimum): Achievement/Graduation/Mentoring</p> <p>Participant Fee: Yes, \$44.80/month (may be waived)</p>
		Juvenile Delinquency Capacity: 50	Non-violent drug related offenders deemed appropriate for treatment.	<p>10-12 Months Minimum</p> <p>Track 1: 5 Phases: Phase I (up to 10 weeks): Intensive Residential Treatment; Phase II (8-10 weeks): Intensive Outpatient Treatment; Phase III (8-12 weeks): Multi-Family Group in Outpatient Setting; Phase IV (8-12 weeks): Final Phase with Less Intensive Outpatient Treatment; Phase V: Monitoring by Case Manager</p> <p>Track 2 (Fast Track Program with 2 Phases lasting up to 6 Months Maximum): Phase I (8-12 weeks): Intensive Outpatient Treatment; Phase II (8-12 weeks): Less Intensive Outpatient Treatment.</p> <p>Participant Fee: No</p>

CIRCUIT	COUNTY	PROGRAM TYPE/CAPACITY	PROGRAM ELIGIBILITY	TREATMENT REQUIREMENTS
		Juvenile Dependency Capacity: 100	Failure of the parent to comply with specific court orders subsequent to a determination by the court or consent by the parent to an adjudication of dependency. Non-compliance of a court order results in a contempt proceeding initiated against the offending parent.	12 Months 3 Phases: (4 Months each) Participant Fee: Yes, \$300 with a sliding scale fee
5	Citrus	Adult Post-Adjudication Capacity: Unlimited	No history of drug sales or violent offenses. All drug related offenses excluding trafficking and violent offenses. Some sales offenses are eligible with documentation and evaluation. VOP's are eligible.	18 Months Minimum 4 Phases: Phase I (8 weeks minimum), Phase II (22 weeks minimum), Phase III (22 weeks minimum), and Phase IV (22 weeks minimum) Participant Fee: Yes, \$25 per court session and cost for treatment determined by treatment provider.
		Juvenile Dependency Capacity: Unlimited	Participant has dependent children in the system and a chemical dependency problem.	54 weeks 4 Phases: Phase I (10 weeks), Phase II (10 weeks), Phase III (10 weeks), Phase IV (24 weeks) Participation Fee: Yes, \$300
5	Hernando	Adult Post-Adjudication Capacity: 40-50	No prior violent felonies. Charged with possession or purchase of drugs (non-trafficking amount); obtaining prescription by fraud, or other non-violent drug-related felonies. VOP's considered on a case-by-case basis, with approval of the State Attorney.	12 Months Minimum 3 Phases: Phase I (8 weeks minimum), Phase II and III (22 weeks minimum), Aftercare (up to 26 weeks) Participant Fee: Yes (Program Fee--\$300; Treatment Fee based on income)
		Juvenile Dependency Capacity: 2 per month	Parent/Guardian must have no prior violent felony convictions and no pending violent offense charges. Parent/Guardian must be an active client of DCF with a petition for dependency filed with the Court.	12 Months Minimum 4 Phases: Phase I, II, and III (10 weeks each minimum); Phase IV (24 weeks)

CIRCUIT	COUNTY	PROGRAM TYPE/CAPACITY	PROGRAM ELIGIBILITY	TREATMENT REQUIREMENTS
			Parent/Guardian has a current pattern or history of alcohol and/or drug abuse or addiction and be willing and mentally able to actively participate and benefit from a structured, intensive, out-patient treatment program.	Participant Fee: Yes, \$300
5	Marion	Adult Pretrial Capacity: 150	No prior violent convictions. Non-violent drug offenses, some drug sale and domestic violence offenses eligible, no burglary of a dwelling or violent offenses, and no VOP's.	12-18 Months 4 Phases: Phase 1 (16 weeks), Phase 2 (16 weeks), Phase 3 (16 weeks), Phase 4 (24 weeks) Participant Fee: Yes, \$350; Groups-\$20/group (2 per week required), Individual Sessions-\$25 per ½ hour; Initial Assessment- \$45, Drug Tests-\$10; Confirmation Tests-\$25; Hair Tests-\$75
		Juvenile Delinquency Capacity: 200	No violent crimes VOP's eligible Some drug sales eligible when it can be proven that client has an addictive history No offenders who would score out to prison Some domestic violence cases with victim and State Attorney approval	12- 18 Months 3 Phases: Phase I (4 months), Phase II (4 months), Phase III (4 months) Participant Fee: Yes, \$100 and \$20/hour for group sessions (\$40/week); \$10 drug screens; \$75 hair samples (if necessary); \$37.50 Substance Abuse Patch (if necessary); \$10 each DNA Sampling (if necessary).
6	Pinellas	Adult Pretrial Capacity: Unknown Currently, there are 1,687 active defendants. Approx 300 cases are pending.	No prior violent felonies. Charged with drug possession or purchase under chapter 893, Florida Statutes, some drug sales by no trafficking; property crimes (with victims approval), other 3rd degree drug related felonies, and VOP's on any of the above if new charge qualifies.	12 Months Minimum. 2 Tracks: Outpatient (2 phases) and Residential (3 levels) Tracks (Residential track includes in jail treatment for females only). Participant Fee: Yes (treatment only), Sliding scale based on income.

CIRCUIT	COUNTY	PROGRAM TYPE/CAPACITY	PROGRAM ELIGIBILITY	TREATMENT REQUIREMENTS
		Juvenile Capacity: N/A	<p>Those who were 17 or under when the offense occurred</p> <p>Charged with misdemeanors and/or third degree felonies</p> <p>Offenders are referred by either local law enforcement, state attorney's office, or a Judge via court order.</p>	<p>To follow through with the treatment recommended from their drug assessment.</p> <p>The program is 3 to 9 months, and can last up to a year. Treatment varies depending on each individual recommendation and progress. Treatment is usually NOT in phases, unless they are in Residential treatment.</p> <p>There is NO participation fee, but the juvenile and his/her parent/guardian are responsible for counseling and drug screens.</p> <p>There is a free assessment, drug screens available, referral options for a sliding scale, and free counseling through agencies with grant funding.</p>
7	Putnam	Adult Post Conviction Capacity: 70	<p>Non-violent criminal history as described by federal grant guidelines.</p> <p>Adult offenders, including first time offenders with felony charges where the primary reasons for being in the criminal justice system is related to significant substance abuse, specifically: Those charged with possession, purchase, or attempted purchase of controlled substances, uttering false or forged instruments, worthless checks, theft, prescription forgery, driving while licensed suspended (DWLS) or revoked, violations of probation or community control, and other substance abuse related offenses recommended by the State Attorney's Office.</p> <p>Sentenced to DOC probation with a special condition to successfully complete the drug court program.</p> <p>Individual must agree to participate in the drug court program.</p>	<p>12 Months Minimum</p> <p>4 Phases: Phase I (1 month min), Phase II (4 months minimum), Phase III (5 months min), Phase IV (2 months minimum)</p> <p>Participation Fee: Yes, \$1,000 fine plus other Court Ordered fees.</p>
7	St. Johns	Adult Post Conviction Capacity: 105	Non-violent criminal history as described by federal grant guidelines.	12 Months Minimum

CIRCUIT	COUNTY	PROGRAM TYPE/CAPACITY	PROGRAM ELIGIBILITY	TREATMENT REQUIREMENTS
			<p>Adult offenders, including first time offenders with felony charges where the primary reasons for being in the criminal justice system is related to significant substance abuse, specifically: Those charged with possession, purchase, or attempted purchase of controlled substances, uttering false or forged instruments, worthless checks, theft, prescription forgery, driving while licensed suspended (DWLS) or revoked, violations of probation or community control, and other substance abuse related offenses recommended by the State Attorney's Office.</p> <p>Sentenced to DOC probation with a special condition to successfully complete the drug court program.</p> <p>Individual must agree to participate in the drug court program.</p>	<p>4 Phases: Phase I (1 month min), Phase II (4 months minimum), Phase III (5 months min), Phase IV (2 months minimum)</p> <p>Participation Fee: Yes, \$15/week treatment fee plus Court Ordered fees.</p>
7	Volusia	Adult Pretrial Capacity: 120	<p>No prior violent felonies.</p> <p>Charged with one of the following: possession, purchase, or manufacture of a controlled substance, prescription forgery, introduction of contraband into correctional facility, felony worthless checks, grand theft, uttering or forging instruments, select felony DUI and drug related DWLS, burglary in which the victim is a family member who advocates treatment for the offender, and any non-violent offense that is related to drug addiction.</p> <p>VOP's are eligible.</p>	<p>Minimum 11 months, but may be extended up to 32 months</p> <p>4 Phases: Phase I (1 month approx), Phase II (3 months approx), Phase III (5 months approx), Phase IV (1 month approx).</p> <p>Participant Fee: Yes, \$480 total.</p>
		Dependency Capacity: 50	Chronic Substance Abuse.	The Program is designed to last 12-15 months. However, it could be more or less time depending on the participant's progress and starting point in the program.

CIRCUIT	COUNTY	PROGRAM TYPE/CAPACITY	PROGRAM ELIGIBILITY	TREATMENT REQUIREMENTS
			<p>Prior substance abuse treatment failure or prior refusal to participate.</p> <p>Motivated toward reunification.</p> <p>Voluntary agreement to participate.</p> <p>Multiple children in dependency system.</p> <p>Non-compliant with case plan, found in contempt, given dependency drug court as final option to incarceration.</p>	<p>There are 7 phases: Phase 1 (detox), 3-7 days; Phase 2 (in-patient) Maximum of 60 days; Phase 3 (in-patient) Maximum of 60 days; Phase 4 (out-patient) Minimum of 60 days; Phase 5 (out-patient) Minimum of 90 days; Phase 6 (out-patient) Minimum of 90 days; Phase 7 (out-patient) Minimum of 90 days.</p> <p>Participant fee: \$2.00 a week in Phase 5, \$3.00 a week in Phase 6 and \$5.00 a week in Phase 7. We are currently not collecting fees due to not having a proper collection method. However, we are working on the issue.</p>
		<p>Juvenile Delinquency (Post Adjudication) Capacity: 60</p>	<p>Age: Between 12 and 17 years of age (Participant may turn 18 during participation).</p> <p>Referred to drug court after an unsuccessful involvement recommends ADOP, but examination provides evidence that youth should start out in an extensive, structured situation; OR as referred by the Department of Juvenile Justice on the Pre-Disposition Report (PDR) or as a referral due to a violation of probation; OR as referred by one of the Team or collaborative agencies.</p> <p>A documented history of non-violent felony/misdemeanor offenses that are drug/alcohol related or there is reason to believe that drugs/alcohol played a role in the commission of a non-drug offense.</p>	<p>220 Days Minimum - (100) Day "Fastrak" option is available)</p> <p>4 Phases: Phase I (40 days), Phase II (60 Days), Phase III (60 days), Phase IV (60 days).</p> <p>No Participation Fee.</p>

CIRCUIT	COUNTY	PROGRAM TYPE/CAPACITY	PROGRAM ELIGIBILITY	TREATMENT REQUIREMENTS
			Family must be willing to contribute. There may be special circumstances where the drug court team and the court decide to allow a participant into the program without family participation. This will be decided on a case-by-case basis.	
8	Alachua	Adult Pretrial Capacity: 120	No prior violent felonies. Charges with a non-violent felony offense and not currently on state probation or VOP status for any offense.	11 Months Minimum. 3 Phases: Phase I (1 month min), Phase II (6 months min), Phase III (4 months min) Participant Fee: Yes, \$20/week (can be paid by 2 hours/week community service). \$45/week for transfers from another jurisdiction.
		Dependency Capacity: 18	Dependency petition must have been filed in Alachua County and the parents have a history of substance abuse.	12 months 4 Phases: Phase I- 2 months;. Phase II- 3 months; Phase III- 3 months; Phase IV- 4 months. Group and individual counseling, attendance at twelve step meeting, and random drug screens. No Fees.
		Juvenile Capacity: 15	Juveniles with a history of drug use who meet commitment criteria.	6-12 months. 4 Phases: Phase I- 2 months; Phase II- 3 months; Phase III- 3 months; Phase IV- 4 months. Group and individual counseling, attendance at twelve step meetings, random drug screens, and participation in pro-social activities. No Fees.
9	Orange	Adult Post Conviction Capacity: N/A	No violent felony convictions Current charge is a non-violent drug related offense, VOP's are eligible.	9-12 Months Minimum 3 Phases + Aftercare: Each phase is 2-3 months minimum Participant Fee: Yes, \$550 flat fee and \$3 co-pay for each treatment session
		Adult Pretrial Capacity: N/A	No violent felony convictions Current charge is a non-violent drug related offense	9-12 Months Minimum 3 Phases + Aftercare: Each phase is 2-3 months minimum

CIRCUIT	COUNTY	PROGRAM TYPE/CAPACITY	PROGRAM ELIGIBILITY	TREATMENT REQUIREMENTS
			VOP's are eligible	Participant Fee: Yes, \$550 flat fee and \$3 co-pay for each treatment session
		Dependency Capacity: 20	Client must have an active case with the Department of Children and Families, as well as a need for substance abuse treatment.	<p>Outpatient- 6 months minimum. Residential- up to 1 year.</p> <p>4 Phases: Phase 1- 60 days; Phase 2- 45 days; Phase 3- 30 days; Phase 4- 4 consecutive weeks. Client must attend the designated level of treatment determined by the team at the initial time of assessment.</p> <p>Client must complete all treatment work as well as remain drug free in order graduate. Client must also attend regular court hearings with the Judge. No Fees.</p>
		Juvenile Capacity: 50	<p>Client must be between the ages of 13-18 and on probation through the Department of Juvenile Justice or on Diversion status as determined by the State Attorney.</p> <p>The client must also be a resident of Orange County and be in need of substance abuse treatment.</p> <p>Family participation is required.</p>	<p>6 month minimum.</p> <p>4 Phases: Phase 1- 60 days; Phase 2- 45 days; Phase 3- 30 days; Phase 4- 4 consecutive weeks.</p> <p>The client must perform all treatment work required, as well as follow curfew, rules, and conditions of drug court.</p> <p>The client must remain drug free in order to move through the phases and eventually graduate. The family is required to participate in either family group or individual family treatment sessions. The client must attend regularly scheduled court hearings with the judge. No Fees.</p>
		Juvenile Re-entry Capacity: 45	<p>Client must be between the ages of 14 and 19 unless SHOCAP eligible (up to 21) and have been released from a Department of Juvenile Justice Commitment program (Level 4, 6,8) on conditional release status or post commitment probation.</p> <p>Must live in Orange County.</p>	<p>6 months minimum.</p> <p>4 Phases: Phase 1- 60 days; Phase 2- 45 days; Phase 3- 30 days; Phase 4- 4 consecutive weeks.</p>

CIRCUIT	COUNTY	PROGRAM TYPE/CAPACITY	PROGRAM ELIGIBILITY	TREATMENT REQUIREMENTS
				<p>Client must stay current with all treatment work required as well as abide by curfew and other supervision requirements for probation.</p> <p>Client must remain drug free to move through the phases and eventually graduate and attend weekly court hearings with the Judge.</p> <p>Client must be enrolled in school or working if high school/GED is completed.</p> <p>Client must maintain consistent and safe living situation.</p> <p>No Fees.</p>
9	Osceola	<p>Adult Post Conviction Capacity: 160(100 for pretrial; 60 for post adjudication; original grant was for 125)</p>	<p>2 Tracks:</p> <p>No prior violent felonies.</p> <p>Must have a serious drug/alcohol problem Charged with felony: possession of controlled substance, prescription drug fraud, theft/property crimes (drug related), introduction to controlled substance into correctional facility, unlawful purchase of a controlled substance.</p> <p>Track III- Can be charged with Selling (to support habit), felony battery.</p>	<p>12 months minimum- 18 months maximum.</p> <p>3 Phases: Phase 1 (30 days min), Phase II (90 days min), Phase III (180 days min), and Relapse Prevention (120 days min).</p> <p>Drug testing is random and the color system is utilized</p> <p>Participant Fee: Yes, \$125 month</p>
		<p>Adult Pretrial Capacity: 160(100 for pretrial; 60 for post adjudication; original grant was for 125 clients)</p>	<p>No prior violent felonies</p> <p>Charged with a non-violent drug related felony offense including possession or purchase of a controlled substance, obtaining a controlled substance by fraud (forged prescription), and introduction of contraband into correctional facility.</p>	<p>9 Months Minimum- 18 Months Maximum</p> <p>3 Tracks: Track 1- Basic Education (120 days min) and Relapse Prevention (120 days min); Phase II (90 days min), Phase III (180 days min), and Relapse Prevention (120 days min).</p> <p>Drug testing is random and the color system is utilized</p> <p>Participant Fee: Yes, \$125 month</p>

CIRCUIT	COUNTY	PROGRAM TYPE/CAPACITY	PROGRAM ELIGIBILITY	TREATMENT REQUIREMENTS
		Juvenile Capacity: 24	Non-violent offenses Under age 17 at time of offense No mental health issues that would inhibit client from successfully completing program.	Track 1- 3 months treatment, 6 months aftercare; Track 2- 9 months treatment, 3 months of aftercare. Length of program. Track 1- 1 Phase; Track 2 - 3 Phases plus aftercare. Orientation Phase- 3 months, Commitment Phase- 3 months; Maintenance Phase- 3 months, Aftercare- 3 months. Outpatient Program. Participation fees: No
10	Polk	Adult Pretrial Capacity: 300	No prior felonies Charged with a non-violent 2 nd or 3 rd degree felony for purchase or possession of a controlled substance under chapter 893, Florida Statutes	18 Months Must attend a minimum of four Narcotics Anonymous (NA) or Alcoholics Anonymous meetings for a two week time period prior to being accepted into program 5 Phases: Phase 1 - Assessment (4-6 weeks), Phase 2 - Intervention (12-14 weeks), Phase 3 - Treatment (14 weeks), Phase 4 - Aftercare (14 weeks), and Phase 5 - Graduation (4 weeks) Participant Fee: \$85 per month for 18 months, \$15 for each drug test
		Juvenile Capacity: 200	Must have a drug related offense No prior felony convictions Non-violent backgrounds Not be a known drug dealer	A significant commitment from the client and the parent / parents or guardian Completion of a 12 month substance abuse program. Phase I Orientation and Evaluation (1 week), Phase II Intensive Outpatient (17 weeks), Phase III Outpatient Phase (17 weeks) Compliance with all court sanctions Constant communication between parent / guardian and the program counselor / case manager Participant Fee: Yes, \$20 drug testing fee only
11	Dade	Adult Pretrial Capacity: No one who qualifies is turned away; currently 1450 clients	No history of violent crimes No more than two prior felony convictions	12 months minimum 3 Phases: Phase 1 (Appr. 3 weeks), Phase 2 (Appr.14-16 weeks), and Phase 3 (Appr.8-9 months)

CIRCUIT	COUNTY	PROGRAM TYPE/CAPACITY	PROGRAM ELIGIBILITY	TREATMENT REQUIREMENTS
			Charged with possession or purchase of a controlled substance, obtaining a prescription by fraud, tampering with evidence	Participant Fee based on sliding scale (\$5/week to \$50/week, judge may substitute fees for community service)
		Dependency Capacity: 48, may move to 60 if new position opens (5 specialists with 12 on caseload)	Allegations of substance abuse and / or neglect with substance abuse issues Voluntary acceptance of Drug Court procedures	12-18 months 5 Phases - I/P 6 months: Phase I (1- 2 months), Phase II (2 months), Phase III (2 months), Phase IV (2 months), Phase V (up to 4 months) Participant Fee: No
		Juvenile Capacity: 50	Adolescents between the ages of 13-17 who are Miami Dade County residents and have some alcohol and/or drug use. Criminal history must be free of any violent offenses.	12 months 4 levels and each level is 3 months. Participant Fee: No
12	Sarasota	Adult Pretrial - Post Conviction Capacity: 120	No prior violent felony convictions Non-violent drug offenses excluding sales	12 months minimum 3 Phases and Pre-graduation: Phase I (30 days min), Phase II (150 days min), Phase II (120 days min), Pre-graduation (30 days min) Random UA's, call in system Participant Fee: \$10/ week
13	Hillsborough	Adult Post Conviction Capacity: Presently there is no limit	Charged with a third degree drug felony Must desire & be willing to participate in treatment Must not have an accompanying forcible felony charge or have never been previously adjudicated guilty of a forcible felony Must not have any offense pending that is dealing or selling of controlled substances Qualifies for either community sanctions under the Criminal Punishment Code or sentencing under the Florida Youthful Offender ACT	12 month minimum Initial in-court evaluation using ASAM placement criteria Followed by evaluation by one of several agencies to determine entry point into continuum of care Aftercare required Specific phases and costs vary by program and by agencies
		Adult Pretrial Capacity: 250 in core program	No prior felony conviction or a delinquent act that would be a felony if committed by an adult	Sign 18 month contract with 12 months minimum

CIRCUIT	COUNTY	PROGRAM TYPE/CAPACITY	PROGRAM ELIGIBILITY	TREATMENT REQUIREMENTS
			<p>Charged with a third degree non-violent felony including but not limited to possession of illegal drugs</p> <p>Must be willing to waive the right to a speedy trial Must be physically and mentally stable and able to actively participate in treatment Must be willing to sign a treatment contract</p>	<p>Levels - Level I and II (12 weeks), Level II (24 weeks), Level IV (16 weeks)</p> <p>Participant Fee: minimum \$10/week /\$43 per month</p>
		<p>Juvenile Capacity: 300</p>	<p>Charged with a non-violent felony or Misdemeanor drug possession or alcohol related charge or a non-violent crime and determined to have been motivated by drug dependency</p> <p>Must be physically and mentally stable and able to participate in treatment Must be the first or second felony, but may have prior misdemeanors</p> <p>Must have a support unit, a responsible adult, to attend counseling with the juvenile Agrees to participate in required treatment and court appearances Must be willing to waive the right to a speedy trial</p>	<p>Attend Orientation</p> <p>12 months: Phase I - 12 weeks, Phase II - 12 weeks, Phase III - 12 weeks, Phase IV - 10-12 weeks Participant Fee: Yes, \$400 for Intervention Program and \$520 for Regular Drug Court Track (No one is denied services because they cannot pay.)</p>
14	Bay	<p>Adult Pretrial & Post Conviction Capacity: 60</p>	<p>No current or prior violent felony convictions</p> <p>No trafficking in controlled substance allowed</p>	<p>12 Months Minimum</p> <p>3 Phases: Phase I (4-6 weeks), Phase II (4-5 months), Phase III (6-8 months)</p> <p>Participant Fee: \$300</p>
		<p>Dependency Capacity: 10</p>	<p>Dependency cases in Drug Court can be civil matters or a result of indirect criminal contempt of court for continued use of drugs while under supervision or Protective Services with the Department of Children and Families. Dependency participants have to sign a "Waiver of Right to a Rule to Show Cause" enabling the Court to impose sanctions for non-compliance with program requirements.</p>	<p>12 Months Minimum</p> <p>3 Phases: Phase I (4-6 weeks), Phase II (4-5 months), Phase III (6-8 months)</p> <p>Participant Fee: \$300</p>

CIRCUIT	COUNTY	PROGRAM TYPE/CAPACITY	PROGRAM ELIGIBILITY	TREATMENT REQUIREMENTS
		Juvenile Capacity: 12	No current or past convictions of violent felonies Parent / Guardian must be willing to participate in the program Juveniles can be ordered into the Drug Court Program involuntarily as part of their Probation sentence.	6 -12 months depending on progress 3 Phases: Phase I (4-6 weeks), Phase II (10 weeks), Phase III (10 weeks) Participation Fee: \$150
14	Jackson	Adult Post Conviction Capacity: 40	No current or prior violent felony convictions No trafficking in controlled substances Sale charges have to be approved by team	18 Month Program First 20 days in Jackson County Correctional Facility for inpatient treatment followed by outpatient: Phase I (4 weeks), Phase II (16 weeks), Phase III (24 weeks), Phase IV(12 weeks), and Aftercare (12 weeks) Participation Fee: \$300
15	Palm Beach	Adult Pretrial Capacity: 200	No prior violent convictions Non violent drug offenses including some sales	12 Months Minimum 4 Phases: Phase I (3 months min.), Phase II (4 months min.), Phase III (3 months min.) and Phase IV (2 months min.) Participant Fee: \$20 / week
16	Monroe	Adult Pretrial & Post Conviction Capacity: 35	No prior violent history First time felony drug charge/drug related charge	12-18 Months 3 Phases: Phase I (2-3 months), Phase II (3-4 months), Phase III (6 months) Participant Fee based on a sliding scale
		Dependency Capacity: 25	Based on Judge's order No specified criteria	12 month minimum 3 Phases: Phase I - 2 months, Phase II - 4 months, and Phase III - 6 months Must be drug free for last 4 months Participant Fee: No
		Juvenile Capacity: 40	Youth has a drug charge or drug related charge Youth has been screened and assessed to have a drug problem or to be at risk for a drug problem	12 months (9 months if participant is doing exceptionally well) 3 Phases: Phase I - 4 months, Phase II - 4 months, and Phase III - 4 months Must be drug free for last 3 months Participant Fee: No

CIRCUIT	COUNTY	PROGRAM TYPE/CAPACITY	PROGRAM ELIGIBILITY	TREATMENT REQUIREMENTS
17	Broward	Adult Pretrial & Post Conviction Capacity: 2,800 (currently have 2,649 participants)	No prior felony PTI or conviction. If disqualified, defendant may participate in drug court as a special condition to probation. Charged with an offense under section 948.08 (6), Florida Statutes which includes purchase or possession of a controlled substance, tampering with evidence, obtaining a prescription by fraud, and solicitation for purchase. Potential clients will be asked to sign a Deferred Prosecution Agreement including a waiver of speedy trial and a limited waiver of confidentiality.	12 Months Minimum 4 Phases- Before Arraignment Phase (Approximately 6 weeks) (BP), Phase 1 (30 days) min.), Phase II (4 months min.), Phase III (6 months min.) Participant Fee: Yes, based on a sliding income scale.
		Dependency		How long is the program (in months)? How many treatment phases, and how long is each phase? Is there a participant fee? If yes, how much?
		Juvenile	Substance abuse issues and as established in Florida Statutes 985.306	How long is the program (in months)? How many treatment phases, and how long is each phase? Is there a participant fee? If yes, how much?
		Adult Re-entry Capacity: 24	3rd degree non violent felony drug charge with documented history of drug abuse. No history of violence.	Client to be evaluated and completed recommended treatment. Participant Fee: Yes, based on a sliding income scale.
18	Brevard	Adult Pretrial Capacity: 110	Defendant must meet criteria set forth in section 948.08, Florida Statutes. State Attorney may selectively offer drug court diversion to defendants charged with a non-drug felony offense linked to substance abuse. Defendant charged with an accompanying non-drug felony and misdemeanor offense must meet requirements of 948.08(2) for victim consent, state attorney and judge approval.	12 Months Minimum 5 Phases: Basic Phase 12 weeks (educational), Phase I (Intensive out patient-12 weeks min). Phase II (12 weeks min), Phase III (12 weeks min or remainder of contract), Residential (in patient). Must attend 2 AA/NA meetings per week.

CIRCUIT	COUNTY	PROGRAM TYPE/CAPACITY	PROGRAM ELIGIBILITY	TREATMENT REQUIREMENTS
			<p>\$600 Cost of supervision fee may be reduced or waived. Restitution will not be reduced or waived. \$10 per drug test.</p> <p>Must successfully complete a qualifying phase of a minimum of 30 days.</p>	<p>Psychosocial Evaluation: \$45</p> <p>Drug Education Classes: \$15 per class</p> <p>Therapy Groups: \$15 per class during Qualifying Phase then \$10</p> <p>Individual Sessions: \$15 per session during Qualifying Phase then \$10</p>
18	Seminole	Adult Pretrial Capacity: 75	<p>No prior felony convictions.</p> <p>Mentally capable of participating.</p> <p>Seminole County resident.</p> <p>Non-violent drug offenses, prescription fraud, worthless checks, grand theft, uttering or forging certain instruments and any drug related offense.</p> <p>VOP's are eligible.</p> <p>Willing to abstain from prescription (non-emergency) drugs, even if valid.</p>	<p>12 Months Minimum</p> <p>4 Phases: Phase I (Educational- 1 month min), Phase II (Intensive- 3 months min), Phase III (Relapse Prevention- 6 months min), Phase IV (Transition- 1 month min)</p> <p>Participant Fee: Yes, \$600 and restitution, if applicable.</p>
		Juvenile Capacity: 55	<p>Must have drug/alcohol problem needing treatment.</p> <p>Second offense drug/alcohol case with prior drug/alcohol case sent to PAY or any prior charge sent to PAY within one year of the second offense. Unsuccessful PAY drug/alcohol case.</p> <p>First offense drug/alcohol case, if DJJ, Prosecution Alternatives for Youths (PAY), or the SAO discovers that the defendant has a substance abuse issue that would make it unlikely that the defendant would successfully complete PAY.</p>	<p>10-12 Months</p> <p>4 Phases: Phase I (Minimum 60 days), Phase II (Minimum 60 days), Phase III (Minimum 90 days), Phase IV: Aftercare (Minimum 5 months).</p>
19	Indian River	Adult Pretrial Capacity: No capacity	<p>No prior felony convictions</p> <p>Charged with a third degree non-violent drug related offense</p>	<p>12-24 Months</p> <p>3 Phases: Phase I (10 weeks), Phase II (10 weeks), Phase III (duration of program)</p> <p>Participant Fee: Yes, \$157.50 (Alcohol and Drug Abuse Trust Fund), Treatment Costs (sliding scale for some).</p>

CIRCUIT	COUNTY	PROGRAM TYPE/CAPACITY	PROGRAM ELIGIBILITY	TREATMENT REQUIREMENTS
19	Martin	Adult Pretrial Capacity: No capacity	No prior felony convictions Charged with a third degree non-violent drug related offense	12-24 Months 3 Phases I (10 weeks), Phase II (10 weeks), Phase III (remainder of program) Participant Fee: Yes, \$600 flat fee
		Juvenile Capacity: 100 Current participants: 39	First drug or alcohol offense No sale or delivery offenses No prior felonies	Group and Individual each week for 12 weeks followed by aftercare up to 1 year
19	St. Lucie	Adult Pretrial Capacity: No capacity	No prior felony convictions Charged with a third degree non-violent drug related offense	12-24 Months 3 Phases I (10 weeks), Phase II (10 weeks), Phase III (remainder of program) Participant Fee: Yes, \$250 (Drug and Alcohol Trust Fund), \$100 court costs, and treatment costs determined by provider (some on sliding scale).
		Juvenile Capacity: No Capacity	Charged with a misdemeanor or felony	6-12 Months 3 Phases I (10 weeks), Phase II (10 weeks), Phase III (remainder of program) Participant Fee: Yes, \$100 court costs, and treatment costs determined by provider (some on sliding scale). \$24 to SAO
20	Charlotte	Adult Post Conviction Capacity: 8	No prior felonies Charged with any non-violent drug related felony Defendant must enter a plea of guilty or no contest	No prior felonies Charged with any non-violent drug related felony Defendant must enter a plea of guilty or no contest No prior felonies Charged with any non-violent drug related felony Defendant must enter a plea of guilty or no contest/month
		Dependency Capacity: 1	Based on need for substance abuse program. Drug Court will closely monitor compliance with the Children and Families Case Plan including the specialized plan for substance abuse intervention.	12 month minimum, commencing with parent's agreement to participate. 4 Phases: 3 months each phase
20	Collier	Adult Post Conviction Capacity: 10	No prior felonies Charged with any non-violent drug related felony	12 Months Minimum 4 Phases: Phase I and II (8 weeks min), Phase III (18 weeks min), and Phase IV (8-16 weeks min)

CIRCUIT	COUNTY	PROGRAM TYPE/CAPACITY	PROGRAM ELIGIBILITY	TREATMENT REQUIREMENTS
			Defendant must enter a plea of guilty or no contest	Participant Fee: Yes, \$200
		Dependency	Not Operational	
		Juvenile Capacity: 17	Youth ages 13-17 who normally would be committed to a Department of Juvenile Justice Program.	12 month minimum 4 Phases: (Each phase a minimum of 3 months) Participant fee: \$60.00/per month.
20	Glades	Adult Post Conviction Capacity: 9	No prior felonies Charged with any non-violent drug related felony Defendant must enter a plea of guilty or no contest	12 Months Minimum 3 Phases: Phase I (3 months min), Phase II (3 months min), and Phase III (6 months min) Participant Fee: No
20	Hendry	Adult Post Conviction Capacity: 8	No prior felonies Charged with any non-violent drug related felony Defendant must enter a plea of guilty or no contest	12 Months Minimum 3 Phases: Phase I (3 months min), Phase II (3 months min), and Phase III (6 months min) Participant Fee: No
20	Lee	Adult Post Conviction Capacity: 30	No prior felonies Charged with any non-violent drug related felony Defendant must enter a plea of guilty or no contest	12 Months Minimum 4 Phases: Phase I and II (8 weeks min), Phase III (18 weeks min), and Phase IV (8-16 weeks min) Participant Fee: Yes, \$50
		Dependency Capacity: 9	Based on need for substance abuse treatment. Drug Court will closely monitor compliance with the Children and Families Case Plan including the specialized plan for substance abuse intervention.	12 Months Minimum 4 Phases: 3 months each phase Participant Fee: No
		Juvenile Capacity: 15	Youth ages 13-17 who normally would be committed to a Department of Juvenile Justice Program.	12 Months Minimum 4 Phases: Phase 1 (2 months), Phase 2 (3 months), Phase 3 (3 months), Phase 4 (4 months). Participant fee: \$60 /per month.

APPENDIX C

2003 Drug Court Profiles										
Statewide Admissions and Graduates										
Circuit	County	Program Type	2000		2001		2002		2003	
			Admissions	Graduates	Admissions	Graduates	Admissions	Graduates	Admissions	Graduates
1	Escambia	Pretrial and Deferred Sentence	73	39	82	40	52	37	46	27
1	Escambia	Juvenile Delinquency	35	14	30	17	30	10	10	4
1	Escambia	Juvenile Dependency	30	12	22	16	6	8	8	4
1	Okaloosa	Adult Pretrial and Deferred Sentence	34	16	49	22	47	26	57	31
1	Okaloosa	Juvenile Dependency	0	0	17	7	10	3	57	31
2	Gadsden	Juvenile Delinquency	N/A	N/A	N/A	N/A	N/A	N/A	5	0
2	Leon	Adult Pretrial	86	Unknown	59	29	89	12	56	28
2	Leon	Juvenile Delinquency	N/A	N/A	104	46	357	34	86	20
2	Wakulla	Juvenile Delinquency	N/A	N/A	N/A	N/A	N/A	N/A	19	3
4	Clay	Adult Pretrial	N/A	N/A	31	0	26	11	24	13
4	Duval	Adult Pretrial	60	82	81	46	117	41	104	56
4	Duval	Juvenile Delinquency	65	53	50	21	67	43	66	45
4	Duval	Juvenile Dependency	N/A	N/A	N/A	N/A	N/A	N/A	31	0
5	Citrus	Adult Post-Adjudication	33	0	51	12	32	8	29	16

Circuit	County	Program Type	2000		2001		2002		2003	
			Admissions	Graduates	Admissions	Graduates	Admissions	Graduates	Admissions	Graduates
5	Citrus	Juvenile Dependency	N/A	N/A	N/A	N/A	N/A	N/A	7	0
5	Hernando	Adult Post-Adjudication	N/A	N/A	4	0	8	0	15	3
5	Hernando	Juvenile Dependency	N/A	N/A	N/A	N/A	N/A	N/A	2	0
5	Marion	Adult Pretrial	115	65	100	50	78	53	89	59
5	Marion	Juvenile Delinquency	115	65	78	48	45	17	79	49
6	Pinellas	Adult Pretrial	N/A	N/A	800	0	1038	221	935	396
6	Pinellas	Juvenile	N/A	N/A	419	247	380	214	412	230
7	Putnam	Adult Post Conviction	N/A	N/A	N/A	N/A	32	0	32	9
7	St. Johns	Adult Post Conviction	N/A	N/A	N/A	N/A	16	0	36	2
7	Volusia	Adult Pretrial and Post Conviction	149	68	110	57	94	36	144	32
7	Volusia	Dependency	N/A	N/A	N/A	N/A	5	0	9	1
7	Volusia	Juvenile	N/A	N/A	50	1	50	3	59 (75% retention)	9
8	Alachua	Adult Pretrial	180	N/A	154	36	123	49	143	57
8	Alachua	Dependency	N/A	N/A	16	0	17	8	20	7
8	Alachua	Juvenile	N/A	N/A	27	1	22	16	5 (This program was suspended for 6 months during this year (May-October) to	9
9	Orange	Adult Post Conviction	N/A	N/A	N/A	N/A	12	0	15	8
9	Orange	Adult Pretrial	51	N/A	131	87	181	96	175	105

Circuit	County	Program Type	2000		2001		2002		2003	
			Admissions	Graduates	Admissions	Graduates	Admissions	Graduates	Admissions	Graduates
9	Orange	Dependency	10	0	12	12	19	9	10	21
9	Orange	Juvenile	N/A	N/A	71	26	138	37	67	49
9	Orange	Adult Re-entry	N/A	N/A	5	0	39	6	54	31
9	Osceola	Adult Post Conviction	N/A	N/A	250	64	125	51	120	79
9	Osceola	Adult Pretrial	136	N/A	112	64	125	51	N/A	N/A
9	Osceola	Juvenile	N/A	N/A	N/A	N/A	6	0	36	5
10	Polk	Adult Pretrial	190	50	179	54	109	46	242	76
10	Polk	Juvenile	175	68	187	76	109	46	150	57
11	Dade	Adult Pretrial	495	381	733	620	1204	663	1459	616
11	Dade	Dependency	23	12	36	20	39	24	33	16
11	Dade	Juvenile	N/A	N/A	40	0	37	10	39	N/A
12	Sarasota	Adult Pretrial and Post Conviction	N/A	N/A	N/A	N/A	89	75	76	57
13	Hillsborough	Adult Post Conviction	3,706	Unknown	2463	Unknown	2767	Unknown	3216	Unknown
13	Hillsborough	Adult Pretrial	230	117	245	123	257	173	247	175
13	Hillsborough	Juvenile	252	104	292	110	218	158	328	164
14	Bay	Adult Pretrial and Post Conviction	60	33	63	30	61	42	61	32
14	Bay	Dependency	1	1	1	0	1	0	0	0
14	Bay	Juvenile	9	2	18	12	10	6	15	9
14	Jackson	Adult Post Conviction	N/A	N/A	N/A	N/A	7 (started Nov. 02)	0	22	0
15	Palm Beach	Adult Pretrial	25	0	323	2	271	139	325	101
16	Monroe	Adult Pretrial and Post Conviction	N/A	N/A	37	19	56	32	26	33
16	Monroe	Dependency	N/A	N/A	3	2	29	11	26	15
16	Monroe	Juvenile	N/A	N/A	38	16	39	35	49	25

Circuit	County	Program Type	2000		2001		2002		2003	
			Admissions	Graduates	Admissions	Graduates	Admissions	Graduates	Admissions	Graduates
17	Broward	Adult Pretrial and Post Conviction	1,200	391	1500	486	1187	828	1468	682
17	Broward	Dependency	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
17	Broward	Juvenile	N/A	N/A	355	58	73	51	N/A	N/A
17	Broward	Adult Re-entry	N/A	N/A	4	0	5	0	3	0
18	Brevard	Adult Pretrial	152	67	81	58	101	56	112	48
18	Seminole	Adult Pretrial	N/A	N/A	46	N/A	50	20	73	32
18	Seminole	Juvenile	N/A	N/A	N/A	N/A	21	0	26	7
19	Indian River	Adult Pretrial	N/A	N/A	N/A	N/A	25	0	26	11
19	Martin	Adult Pretrial	N/A	N/A	73	0	31	28	41	44
19	Martin	Juvenile	N/A	N/A	107	91	38	36	40	50
19	St. Lucie	Adult Pretrial	N/A	N/A	12	0	62	0	46	28
19	St. Lucie	Juvenile	N/A	N/A	N/A	N/A	N/A	N/A	11	0
20	Charlotte	Adult Post Conviction	10	0	11	5	7	1	8	5
20	Charlotte	Dependency	N/A	N/A	N/A	N/A	0	0	1	0
20	Colier	Adult Post Conviction	24	8	16	3	14	8	11	5
20	Colier	Dependency	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
20	Colier	Juvenile	N/A	N/A	N/A	N/A	0	0	17	1
20	Glades	Adult Post Conviction	23	0	11	15	13	10	5	3
20	Hendry	Adult Post Conviction	21	0	11	13	14	3	4	12
20	Lee	Adult Post Conviction	22	0	17	6	29	7	12	6
20	Lee	Dependency	N/A	N/A	18	2	14	4	12	4
20	Lee	Juvenile	N/A	N/A	11	0	12	0	16	8