

**Michigan Supreme Court  
State Court Administrative Office**



**Drug Court Program Review Project**

**On-Site Review Summary**

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**County:** Kent                      **Court: Region:** 2                      **Drug Court Type:** Adult/Sobriety  
**Chief Judge:** Hon. Ben H. Logan, II  
**Drug/Sobriety Court Presiding Judge:** Hon. Patrick Bowler  
**Drug/Sobriety Court Coordinator:** Jan Willis  
**Review Dates:** September 10-11, 2008

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**SUMMARY OF ON-SITE REVIEW:**

**Overview:**

The 61<sup>st</sup> District Court runs a priority population drug court, a sobriety court and a Hispanic sobriety court. All three courts have a similar operating function and structure, but hold separate drug court review sessions and staffing meetings prior to the drug court session. A core group of treatment specialists provides services to all three courts. The drug court started in April of 1999, and the Sobriety Court in December of 2002. Each is a four-phase process with an aftercare component.

Personnel interviewed were:

Hon. Patrick Bowler, Drug Court and Sobriety Court Judge  
Joseph Berlin, Chief Probation Officer and Incoming Drug Court Coordinator  
Jeanette Boggiano, Drug Court Case Manager  
Annita List, LMSW, ACSW, CAC-1, CFT, Dip-CFC; Diversity Counseling and Therapy Center, PLLC  
Si Marsh, Director, New Life Counseling Services  
Deb Rader, BS, Program Director, Journies, Inc.  
Richard E. Hillary, Director, Kent County Office of the Defender  
Gregory Boer, Assistant Prosecutor, Kent County Prosecutor's Office  
Three participants (two current Sobriety Court participants; one graduate from Hispanic Sobriety Court)

The reviewer conferred with Janice K. Willis, outgoing Drug Court Coordinator, and Cori VanderVeen, Drug Court Case Manager.

The court is responsible for operation of a drug testing facility located at 82 Ionia St., NE. The director of that operation recently died. Jan Willis conducted a tour of the facility, answered questions about its operation, and provided a copy of drug testing policy and procedures handbook.

**Program Components:**

Preliminary eligibility determinations are made by the Kent County Pre-Trial Services Investigation Unit or, in the case of probation violations, the Department of Corrections Probation Agent. Eligible cases are referred to drug court case managers for screening. Case managers use a non-objective instrument, similar to MAST or CAGE, to gauge risk to the community and the participant's treatment needs. Case managers match the prospective participant's needs and individual circumstances with the most suitable treatment provider. Prospective participants are required to attend up to two drug court sessions prior to admission to insure they fully understand what is involved in participation. Assessments are conducted by the treatment provider, or by the Central Diagnostic Agency (Network 180). A variety of instruments are used, including NEEDS, ASI, a modified MAST for Hispanic participants, or, in the case of Network 180, an instrument similar to SCID (Structured Clinical Interview). Assessments result in DSM-IV or ASAM diagnosis. Immediate treatment is a program requirement, though various factors may cause a delay in starting treatment. Factors noted are:

- Level of treatment
- Degree of participant's resistance
- Treatment program availability

Generally, cases referred to drug court from charge reductions will occur within 2-3 weeks of arrest. Sobriety court referrals, referrals from circuit court probation or technical probation violations may not result in the participant starting treatment for several weeks.

Once admitted, participants engage in frequent random drug tests, 12 step programs, frequent monitoring by the caseworker, and frequent in-court reviews, where graduated sanctions and incentives are used to provide structure and compliance. Ancillary programs related to education, employment, and healthy living are available and used frequently. Staffing meetings always precede drug court review sessions. The staffing meeting observed reflected high degrees of mutual trust, respect and candor.

**Staffing:**

The programs are staffed by experienced, certified caseworkers. Two are assigned to sobriety court, and one each to drug court and Hispanic sobriety court. The Hispanic sobriety court caseworker is bi-lingual, but is not Hispanic. The DCCMIS active case list reports 208 cases with 50 of those being in the "suspended" category.

Judge Bowler will be retiring in December 2008 and the court is in the process of planning its organization structure in his absence. Janice Willis will also be leaving at the same time, and the process of transferring responsibility for the Drug Court Coordinator position to Joseph Berlin is already underway.

**FINDINGS:**

**Compliance with P.A. 224:**

Compliant with all sections.

**Contract Compliance (BYRNE, SCAO, or OHSP)**

Contract materials not available for this program.

**Progress Toward Stated Program Goals:**

A copy of the 2006 Program Goals was furnished, and it is attached to this report. Until January 2008, evaluations were conducted by Dr. Josef Soper. An evaluator is not currently assigned.

**Compliance with the 10 Key Components of Drug Courts:**

The Court self reported this checklist. A copy is attached. All statements in the self reported checklist appear to be accurate.

**Compliance with HIPAA, 42 CFR 2, 26 CFR and other Federal Regulations:**

Compliant with all sections.

**DCCMIS Utilization:**

Information relative to payment of financial obligations is not entered.

**File Review:**

Drug court case files are up to date and comprehensive. Files are well organized and consistently orderly.

**RECOMMENDATIONS:**

The court should consider entering financial information into DCCMIS.

**CONCLUSIONS:**

This is an excellent example of a well run drug court offering a wide variety of services to a diverse population. Program documentation is excellent, and there is abundant evidence of a high level of commitment by the judge, staff, treatment providers, and others throughout this project. Care, compassion and accountability are readily apparent in the manner in which this program conducts business.

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On-site Reviewer:

Reviewer's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Appendix "A"**

**P.A. 224 COMPLIANCE CHECKLIST**

**Court: D61**

**Program Type: Adult/Sobriety**

	<b>Task</b>	<b>Yes</b>	<b>No</b>	<b>Comments</b>
<b>1.</b>	Review Memorandum of Understanding?	X		
<b>2.</b>	Does it possess all statutory requirements?	X		
<b>3.</b>	Have defendants met all pre-admission screening requirements in accordance with Section 1064 (3)?	X		
<b>4.</b>	Have the requirements of Section 1066 been met?			
<b>a.</b>	Finding on record or in file?	X		
<b>b.</b>	Individuals dependent on or abusing drugs or alcohol?	X		
<b>c.</b>	Individuals understand consequences of entering drug treatment court, and agree to comply with all court orders and program requirements?	X		
<b>d.</b>	Individuals are not a risk to community?	X		
<b>e.</b>	Individuals are not violent offenders?	X		
<b>f.</b>	Individuals complete pre-admission screening?	X		
<b>g.</b>	Individuals meet requirements, if applicable, of 7411 of Public Health Code; MCL 333.7411, MCL 762.11, and MCL 769.4a of criminal Procedure; and MCL 771.1, MCL 750.350a, or section 430 of the Michigan Penal Code?	X		
<b>h.</b>	Terms, conditions, and duration of agreements are in the file or placed on the record?	X		
<b>5.</b>	Have provisions of Sec. 1068 been fulfilled?			
<b>a.</b>	Offense related to abuse, illegal use, or possession of a controlled substance?	X		

<b>b.</b>	Individuals plead guilty or admit responsibility?	X		
<b>c.</b>	Individuals waive, in writing, right to speedy trial, right to representation at drug treatment court review hearings by an attorney, and, with agreement of the P.A., the right to a preliminary exam?	X		
<b>d.</b>	Individuals sign a written agreement to participate?	X		
<b>e.</b>	Prosecutor approves of admission to drug court?	X		
<b>6.</b>	Have provisions of Section 1070 been fulfilled?	X		
<b>a.</b>	Court accepts guilty plea or AOR?	X		
<b>b.</b>	No judgment for non-traffic pursuant to agreement?	X		
<b>c.</b>	Judgment for traffic or pursuant to agreement?	X		
<b>d.</b>	Jurisdiction is limited to period fixed by statute?	X		
<b>7.</b>	Have provisions of Section 1072 (1) been fulfilled?			
<b>a.</b>	Consistent, continual, and close monitoring?	X		
<b>b.</b>	Mandatory periodic and random drug testing?	X		
<b>c.</b>	Rewards for compliance?	X		
<b>d.</b>	Sanctions for non-compliance?	X		
<b>e.</b>	Substance abuse treatment services, relapse prevention services, education, and vocational opportunities are provided?	X		
<b>8.</b>	Have provisions of Section 1074 (1) been fulfilled?			
<b>a.</b>	Individuals pay all court ordered fines and costs, including minimum state costs?	X		Not entered on DCCMIS
<b>b.</b>	Pay the drug treatment court fee allowed under section 1070 (4)?	X		
<b>c.</b>	Pay all court ordered restitution?	X		
<b>d.</b>	Pay all crime victims' rights assessments under section 5 of PA 196?	X		
<b>9.</b>	Have provisions of Section 1076 (1)			

	been fulfilled?			
<b>a.</b>	Court places in file or on record successful or non-successful completion and reasons for termination?	X		
<b>b.</b>	Court complies with agreement?	X		
<b>10.</b>	Have provisions of Section 1078 (1) been fulfilled?			
<b>a.</b>	Court maintains files on accepted cases?	X		
<b>b.</b>	Court maintains files on rejected cases?	X		

## Appendix “B”

**Key Component # 1:** Drug courts integrate alcohol and other drug treatment services with justice case processing.

<b>Integration of Services</b>		<b>Y</b>	<b>N</b>	<b>Comments</b>
1.	Is ongoing planning carried out by a broad-based group, including those represented on the drug court team?	X		
2.	Have all drug court documents been collaboratively developed?	X		
3.	Does the program have a policy and/or procedure manual?	X		
4.	Does the program have a participant manual and/or a participant contract?	X		Both.
5.	Does the program have a written consent form?	X		
6.	Are abstinence and law-abiding behavior the goals of the program?	X		
7.	Is there ongoing communication between the court and treatment providers, including frequent exchanges regarding each participant’s overall program performance?	X		Excellent level of communication and high degree of collaboration
8.	Does the judge play an active role in the treatment process, including frequent reviewing of treatment process?	X		
9.	Is interdisciplinary education provided for every person involved in drug court operations?	X		
10.	Are mechanisms for sharing decision-making and resolving conflicts among drug court team members in place?	X		

**Key Component #2:** Using a nonadversarial approach, prosecution and defense counsel promote public safety, while protecting participants’ due process rights.

<b>Nonadversarial Approach</b>		<b>Y</b>	<b>N</b>	<b>Comments</b>
1.	Have the prosecutor and defense counsel participated in the design and implementation of screening eligibility?	X		
2.	Does the prosecuting attorney review the case and determine if the defendant is eligible for the drug court program?	X		
3.	Do both the prosecutor and defense attorney participate in a coordinated strategy for responding to instances of noncompliance?		X	Defers to team. Prosecutor and defense bar generally do not attend staffing meetings or drug court review sessions.
4.	Does the prosecuting attorney make decisions regarding the participant’s continued enrollment in the program based on performance in treatment, rather than on the legal aspects of the case?		X	Deferred to team
5.	Does the defense counsel advise the defendant as to the	X		

	nature, purpose, and the rules of the drug court?			
6.	Does the defense counsel explain all of the rights that the defendant will temporarily or permanently relinquish by participating?	X		
7.	Does the defense counsel give advice on alternative courses of action available outside drug court?	X		
8.	Does the defense counsel encourage the defendant to be truthful with the judge and the treatment staff?	X		

**Key Component #3:** Eligible participants are identified early and promptly placed in the drug court program.

<b>Eligibility</b>		<b>Y</b>	<b>N</b>	<b>Comments</b>
1.	Is eligibility screening based on established written criteria?	X		
2.	Are specific drug court team members designated to screen cases and identify potential drug court participants?	X		
3.	Who are those team members?			Prosecuting Attorney, Pre-trial Services
4.	Are eligible participants for drug court promptly advised about program requirements and the relative merits of participating?	X		
5.	Do trained professionals screen drug court eligible individuals' AOD problems and suitability for treatment?	X		
6.	Who performs this screening?			Case managers
7.	Does the initial appearance before the drug court judge occur soon after arrest or apprehension?		X	Generally 2-3 weeks, excluding cases referred from circuit probation.
8.	Does the drug court require that eligible participants enroll in AOD treatment services immediately?	X		

<b>Screening</b>		<b>Y</b>	<b>N</b>	<b>Comments</b>
1.	Is a validated screening instrument used?	X		Similar to MAST, CAGE
2.	<b>Who is conducting the initial screening?</b>			Case managers
3.	Is training provided for correct use of the instrument?	X		
4.	How is the screening information used to determine drug court eligibility?			Determine extent/level of substance abuse
5.	Will all those identified as needing treatment services be given a referral for services if they are not eligible for admission to drug court?	X		

<b>Assessment</b>		<b>Y</b>	<b>N</b>	<b>Comments</b>
1.	What assessment instrument is being used?			Depends on provider/program. Hispanic Court uses modified MAST. Others include NEEDS, ASI, or instrument similar

			to SCID.
2.	Has it been tested for validity?	X	
3.	Who conducts the initial assessment?		Treatment providers or coordinating agency Network 180
4.	At which point in the process is the assessment conducted?		
5.	Does the assessment include testing for HIV/AIDS, tuberculosis, hepatitis, sexually transmitted diseases, and mental health needs?	X	Unless IV drug use is a factor. Referred testing if necessary.
6.	How do courts utilize the assessment data?		Develop treatment plan, determine funding for treatment.
7.	Is the assessment data translated into an individual treatment plan?	X	
8.	Are the results of the assessment used to determine the treatment level program participation starts at?	X	
9.	Is the treatment plan updated continually? Does the participant provide input on the treatment plan?	X	
10.	Is drug testing conducted in conjunction with the assessment?	X	Testing already underway by assessment date.
11.	What substances are routinely tested for during an assessment? Is the presence of alcohol tested for?		Cocaine, opiate, THC and alcohol. Hispanic Court alcohol only at time of assessment.

**Key Component #4:** Drug courts provide access to a continuum of alcohol, drug, and other related treatment and rehabilitation services.

<b>Treatment Services</b>	<b>Y</b>	<b>N</b>	<b>Comments</b>
1. Do treatment services include:			
2. Family Counseling?	X		
3. Group Counseling?	X		
4. Education Groups?	X		
5. 12 Step Groups?	X		
6. Individual Counseling?	X		
7. Relapse Prevention?	X		
8. Medical/Dental Care?	X		Referred if necessary
9. Domestic Violence Programs? Batterer's Programs?	X		Referred if necessary
10. Are treatment programs/components available to address particular treatment issues of women and/or other special populations?	X		"Lies That Bind" program used for special populations.
11. Is treatment available in various settings? (Residential, day programs, outpatient, etc.)	X		
12. Are case management services available to all participants?	X		
13. Is payment of fines, fees, and restitution incorporated into an		X	Case workers monitor and

individual's treatment?			may advise treatment providers of relative success/failure.
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<b>Accessibility</b>		<b>Y</b>	<b>N</b>	<b>Comments</b>
1.	What accommodations are made for individuals with physical disabilities?			Need based.
2.	What accommodations are made for individuals not fluent in English?			Translators
3.	What accommodations are made for individuals needing childcare?			Treatment providers; no court based program
4.	What accommodations are made for individuals with limited literacy?			Involve local literacy council.
5.	What accommodations are made for individuals needing transportation?			Bus passes
6.	Is there a fee schedule commensurate with an individual's ability to pay? What occurs if the participant cannot pay?	X		
7.	Is treatment delivery relevant to issues of race, culture, gender, age, and sexual orientation?	X		

**Key Component #5:** Abstinence is monitored by frequent alcohol and other drug testing.

<b>Drug/Alcohol Testing</b>		<b>Y</b>	<b>N</b>	<b>Comments</b>
1.	Is there a written policy on testing procedures?	X		
2.	Is urinalysis testing observed? By whom?	X		Lab techs
3.	Is testing done randomly or scheduled?			Random
4.	Is testing done at least twice a week?	X		
5.	Are breathalyzers utilized in conjunction with testing?	X		
6.	Are participants given a verbal and written explanation of what is required regarding drug testing, including possible sanctions for positive tests? Refusing tests? Missing tests?	X	X	X
7.	Are procedures in place for verifying contested test results?	X		
8.	How quickly are test results communicated with the courts?			24 hrs. or earlier if requested
9.	Are sanctions and rewards in place for test results?	X		
10.	Is increased treatment used as a sanction?	X		
11.	How long is a participant required to be drug free before graduation?			Six months

**Key Component #6:** A coordinated strategy governs drug court responses to participants' compliance.

<b>Drug Court Strategy</b>		<b>Y</b>	<b>N</b>	<b>Comments</b>
1.	Does the drug court team maintain open communication?	X		

2.	Does each member get the opportunity to voice his or her opinion?	X		
3.	Are procedures for reporting success/failures clear to team members? Is there a handbook for staff?	X		
4.	Are there predetermined sanctions and incentives for particular behaviors?	X		
5.	What is the court's response for a participant's 1 <sup>st</sup> relapse? 2 <sup>nd</sup> relapse?			14 hrs. work crew at recycling facility; 2 days jail, usually weekends.
6.	What occurs if a participant wants to "opt" out of drug court?			Court makes a concerted effort for participants to reconsider their choice. Most aren't allowed to opt out.

**Key Component # 7:** Ongoing judicial interaction with each drug court participant is essential.

<b>Judicial Interaction</b>		<b>Y</b>	<b>N</b>	<b>Comments</b>
1.	Are regular status hearings used to monitor participant performance?	X		
2.	Are more frequent status hearings held during the initial phases of the program for new participants?	X		
3.	Is the time between status hearings increased or decreased, based on compliance?			Increased interval for compliance
4.	Do a significant number of drug court participants appear at a single session?	X		
5.	Do the drug court team members meet in a regular scheduled staffing session to discuss the progress of the participants?	X		
6.	Does the court apply appropriate incentives and sanctions to match the participant's treatment progress?	X		
7.	Is the payment of fees, fines, and/or restitution is part of the participant's treatment?	X		
8.	Does the court ensure that no one is denied participation in the program solely because of inability to pay fines, fees, or restitution?	X		

**Key Component # 8:** Monitoring and evaluation measure the achievement of program goals and gauge effectiveness.

<b>Monitoring and Evaluation</b>		<b>Y</b>	<b>N</b>	<b>Comments</b>
1.	Have specific goals and objectives been established to measure the effectiveness of the program?	X		
2.	What are these goals?			See application materials

3.	Does an evaluator participate in the ongoing planning and operation of the drug court program?		X	Does not currently have an evaluator.
4.	Does the program employ an automated system to collect data? If so, what kind of system?	X		DCCMIS
5.	Are accumulated data reports provided to the drug court team, policymaking group, and/or the public?	X		
6.	Does data collection procedure comply with federal and state confidentiality laws?	X		
7.	Is the payment of fees, fines, and/or restitution part of the participant's treatment?	X		
8.	Has the program been the subject of an independent evaluation? If so, who conducted the evaluation?	X		Dr. Josef Soper, former Court Administrator

**Key Component # 9:** Continuing interdisciplinary education promotes effective drug court planning, implementation, and operations

<b>Continuing Education</b>		<b>Y</b>	<b>N</b>	<b>Comments</b>
1.	Have all team members been given the opportunity to attend interdisciplinary educational sessions or training related to drug court operation?	X		
2.	Have all team members attended such training? If so, describe the training.			See page 9 of court's self report.
3.	Has the drug court team attended interdisciplinary training as a team? If so, describe the training.			See page 9 of court's self report.
4.	Have team members attained credits for professional education as a result of this training? If so, describe the credits.			See page 9 of court's self report.
5.	Does the team occasionally meet outside of regular staffing and court sessions to address program policies and training needs?	X		

**Key Component # 10:** Forging partnerships among drug courts, public agencies, and community-based organizations generates local support and enhances drug court program effectiveness.

<b>Forging Partnerships</b>		<b>Y</b>	<b>N</b>	<b>Comments</b>
1.	Does the program have a steering committee or a policy group? If so, who serves on this committee?	X		Advisory committee listed on page 21 of Policies and Procedures Manual. It is a broad based community group.
2.	Do members of the drug court team provide information regarding the program through presentations to groups and individuals in the community?	X		
3.	Is there a partnership with the program and local law enforcement agencies in the community?	X		
4.	Is there a partnership with the program and local public agencies?	X		
5.	Is there a partnership with the program and local private agencies?	X		
6.	Does the program demonstrate awareness of the populations they serve and the communities in which they operate?	X		Exemplary Hispanic Drug Court program
7.	Does the drug court hire a professional staff that reflects the population served?	X		
8.	Does the program generate local support through media reports?	X		

## Appendix “C”

### Checklist for Compliance with 42 CFR, 26 CFR and HIPAA

	<b>Requirement</b>	<b>Yes</b>	<b>No</b>	<b>Comments</b>
1.	All confidential documents are not accessible to the public in the court file?	X		
2.	The court maintains releases of information signed by the participant for each agency with whom the participant is involved?	X		
3.	Files containing confidential information are kept in a secure room, locked file cabinet, safe, or other similar container when not in use?	X		
4.	The court has written procedure which regulates and controls access to and use of written records kept on program participants?	X		
5.	The court communicates to the participant that federal law and regulations protect the confidentiality of alcohol and drug abuse patient records?	X		
6.	The court provides the participant a summary, in writing, of the federal law and regulations?	X		