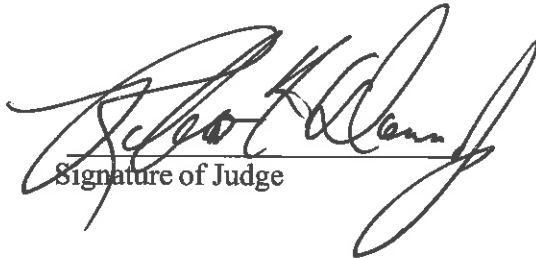
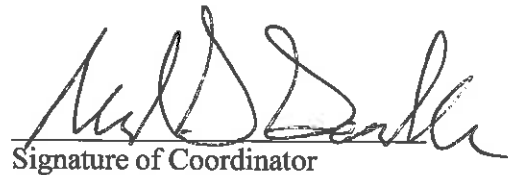


Application
for
Behavioral Health Docket

Submitted by:


Signature of Judge


Signature of Coordinator

of

Charlottesville General District Court

Name of Court

August 14, 2017

Date

APPLICATION GUIDELINES

The Supreme Court of Virginia has established a standardized review process to use in evaluating requests from any locality seeking permission to establish a behavioral health docket. The application should be completed by the local planning committee created to plan the docket. Applications should be submitted to the Supreme Court of Virginia. All application packages should be sent to:

Supreme Court of Virginia
Office of the Executive Secretary
100 North 9th Street
Richmond, Virginia 23219
Email: apowers@courts.state.va.us

In order to evaluate the quality, efficiency and fairness of dockets requesting approval to establish a behavioral health docket the following information shall be submitted by the requesting local advisory committee.

Behavioral Health Docket Application

Jurisdiction Name: City of Charlottesville and County of Albemarle

Court: Circuit X District

Problem Solving Docket Model: Veterans X Behavioral Health

Supervising Judge:

Name: Hon. Robert H. Downer, Jr Telephone: (434)970-3388

Address: 606 E. Market St, Charlottesville, VA 22902 E-mail: RDowner@courts.state.va.us

Program Coordinator:

Name: Neal S. Goodloe, Jr. Telephone: (434)296-2441, ext.117

Address: 750 Harris St, Suite 207, Charlottesville, VA E-mail: ngoodloe@oar-jacc.org

Target Population –(list all that apply):

The Planning Team proposes a post-plea docket, held in the Charlottesville General District Court, that also accepts referrals from the Albemarle County General District Court. The docket will serve medium-to-high risk defendants entering a plea to a misdemeanor charge, and diagnosed with a mental illness that contributed to their crime. The Docket will conform to the Virginia Standards for Behavioral Health Dockets, and The Essential Elements (per DBHDS).

Proposed Start Date: 10/ 1 / 2017

Approved Docket Planning Training:

<u> </u> Date	<u> </u> Location
<u>8/1/17</u> Date	<u>Online</u> Location
<u> </u> Date	<u> </u> Location
<u> </u> Date	<u> </u> Location

Veterans Treatment Court Planning Initiative (VTCPI)

**Developing a Mental Health Court:
An Interdisciplinary Curriculum**

Other:

Other:

Application Contact Person:

Name: Neal S. Goodloe, Jr. Telephone: (434)296-2441, ext. 117

Address: 750 Harris St. Suite 207, Charlottesville, VA E-mail: ngoodloe@oar-jacc.org

Attachment A: Project Abstract

The Albemarle-Charlottesville Therapeutic Docket will serve misdemeanor defendants suffering from serious mental illness who voluntarily agree to participate in court-supervised treatment and community support in lieu of jail. The docket will serve Charlottesville and Albemarle County (pop. 153,790) in their General District Courts.

The target population includes:

- Defendants 18 or older, and
- Charged with a misdemeanor offense (or felony reduced to a misdemeanor), and
- Diagnosed with a serious mental illness, and
- Assessed at medium/high risk of recidivism, and
- Exhibiting a likely connection between mental illness and criminal behavior.

A recent UVa study revealed that 495 local inmates met the screening criteria for serious mental illness during an 18-month period. Many were arrested repeatedly for misdemeanor offenses. The Therapeutic Docket could serve up to 60 of these defendants per year.

Potential participants can be referred by:

- Defense attorney
- Commonwealth Attorney
- Magistrate
- Judge
- Mental Health Case Manager
- Law Enforcement
- Jail Mental Health staff
- OAR Pretrial staff

Upon referral, the court will order the Treatment Team to screen, assess, and file an eligibility report to the court within two weeks.

This is a **post plea** docket. Participants agree to comply with the rules of the docket, the elements of their treatment plan, appear before the therapeutic docket and attend meetings with the treatment team.

Participants, guided by their lawyer, sign an Agreement to Participate, detailing constitutional and statutory rights voluntarily waived during participation.

The Treatment Team collaborates with participants to develop a service plan that addresses their mental health and criminogenic needs.

The Clerk maintains separate files for participants, and seals documents as ordered to ensure confidentiality. Treatment Team members and participants execute appropriate confidentiality

forms to ensure medical/mental health information remains protected under federal and state laws.

The Treatment Team is a collaboration between:

- General District Court Judge
- Docket Coordinator
- OAR Probation Officer
- Region Ten Mental Health Clinician

The Treatment Team ensures that program requirements are adhered to, unique to each program phase, as specified in the Operations Manual.

Sustainability is the responsibility of the Advisory Committee, working with the Treatment Team to establish and track performance measures and adjust the docket accordingly. UVa will serve as research partner.

The program is funded through a \$64,504 DBHDS grant. Ongoing support will be solicited from the Charlottesville City Council and the Albemarle County Board of Supervisors during the FY18-19 budget cycle.

Attachment B: Problem Statement

During 2016, the Charlottesville-Albemarle Regional Jail logged 9,218 bookings, an increase of 28% over the 7,213 bookings recorded in 2013. Males represented 82% of the booking volume, but females had the greatest increase in bookings over the four years (56%). African Americans, who represent roughly 13% of the area's population, accounted for 44% of bookings.

Primary charges at booking (4-year average) were:

• Violation of Court Order	19.1
• Property Felony	18.6
• Traffic Misdemeanor	14.2
• Alcohol	8.6
• Drug Felony	6.1
• Property Misdemeanor	6.1
• Violent Felony	5.6
• Violent Misdemeanor	5.0
• Sex Offenses	3.0
• Weapon	2.3
• Traffic Felony	2.1
• Drug Misdemeanor	1.4
• Other	7.9

Altogether, property and drug crimes, public inebriation, and violations of court-ordered supervision accounted for more than half of all booking volume.

Many arrestees arrive at the jail suffering from a serious mental illness, and jail staff is increasingly called upon to provide mental health stabilization and treatment for inmates, a good number of whom recycle in and out of custody multiple times a year. It is a task for which jails are neither designed nor staffed to deliver as effectively as community mental health services. Until recently, the number of inmates suffering from mental illness at our local jail could not be reliably estimated, nor could a coherent response to their needs be crafted that was based on solid evidence.

Meanwhile, inmates who are released from jail suffering from mental illness often fail to successfully access community treatment services. Until recently, the size of this “service gap” was unknown, due in part to restrictions that prevented criminal justice and mental health agencies from sharing the person-level data required to measure the gap.

In April 2015, over 50 local leaders representing Charlottesville and Albemarle County's law enforcement, corrections and mental health systems met for a planning session, under the facilitation of the Virginia Department of Behavioral Health and Developmental Services. The goal of the meeting was to update a September 2009 cross-systems action plan to address the needs of criminally-involved individuals suffering from mental illness. The good news that came

out of this meeting was that considerable progress had been made in diverting mentally ill citizens from arrest through the implementation of Crisis Intervention Teams in Charlottesville, Albemarle County and at the University of Virginia, including the implementation of a protocol for “drop-off” mental health services at UVa Hospital. However, the consensus of the planning group was that there were still too many individuals suffering from mental illness ending up in jail, although hard data on the size and composition of the mentally ill jail cohort did not exist, nor was data available regarding the preponderance of mental illness at other points along the Sequential Intercept Model.

As part of the action plan that came out of that meeting, the Albemarle-Charlottesville Regional Jail, OAR/Jefferson Area Community Corrections, and the VADOC District 9 Probation Office agreed to participate in a pilot screening process to identify the percentage of jail, pretrial and probation populations that scored high enough on a validated screener to suggest that further evaluation for serious mental illness was warranted. Screening began in July 2015 for all jail inmates held long enough to classify, along with all defendants accepted for pretrial supervision, and all probationers at intake. After 18 months of screening, data from Sequential Intercept points 2-5 were analyzed by the University of Virginia’s Department of Systems and Information Engineering, and cross-matched with consumer data for the same time period at Region Ten Community Services.

The study revealed that 23% of screened jail inmates (496 individuals) met the screening criteria for serious mental illness. Only 44% of those so identified were successfully linked to evaluation/treatment at Region Ten during the study period (and only 23% received mental health treatment services specifically). This “screened in” cohort included approximately 250 individuals charged with a misdemeanor offense.

The UVa research team also found that 218 inmates were categorized as “super utilizers” of the jail (4 or more intakes over the study period), accounting for 5.6% of inmates but 21% of intakes. One out of every three “super utilizers” (72 individuals) met the screening criteria for mental health evaluation/treatment.

Women were significantly over-represented in the “screened in” jail population found in need of mental health evaluation, as they were in similar studies of pretrial and probation populations, suggesting a need for gender-responsive diversion and treatment programming. Neither race nor age were found to be significant factors.

Another discovery from the UVa study was that those scoring high on the mental health screener have more negative outcomes under probation supervision, not because they violate the law, but because they fail to comply with the technical conditions of supervision and/or their court order.

This data analysis has provided support for the implementation of programming designed to reduce the number of mentally ill inmates housed at the regional jail, especially those arrested frequently on misdemeanor charges, and to improve their successful and sustained linkage to mental health services and community support.

Attachment C: Goals and Objectives

The goals of the Albemarle-Charlottesville Therapeutic Docket are as follows:

Goal #1: To reduce the percentage of jail inmates held on misdemeanor offenses (and certain low-level felony offenses reduced to a misdemeanor) who suffer from a serious mental illness that is linked to their criminal behavior.

Objectives:

- Screen 100% of inmates for mental illness during the jail classification process (using a validated brief jail mental health screener) and track over time the percentage of misdemeanor offenders scoring high enough on the screener to warrant further mental health evaluation.
- Reduce average length of jail stay by 50% for Therapeutic Docket participants, through early identification and diversion.

Goal #2: Improve community mental health linkage and clinical outcomes for those accepted for participation in the docket.

- Increase clinical engagement of participants within appropriate levels of treatment.
- Decrease need for more intense level of care within the scope of treatment. (i.e. hospitalization or increased treatment needs.)

Goal #3: Reduce the recycling of participants through the jail for relatively minor offenses, and reduce their long-term risk of recidivism.

- Reduce returns to custody of participants by 50% during their term of participation, as compared to pre-participation rates.
- Reduce recidivism of participants by 50% during the two years following program completion, compared to pre-participation arrest rates.

Goal #4: Reduce repeated contact of participants with the criminal justice system, including police, magistrate, jail, and courts.

- Reduce arrests, bookings and court appearances (other than Docket appearances) for participants by 50% over pre-participation rates.

Goal #5: Increase the capability of participants to successfully address their personal, family and societal responsibilities

- Increase employment (pro-social activity) among participants by 50% over pre-participation rates.
- Increase housing stability among participants by 50% over pre-participation rates.

Goal #6: Promote effective communication, planning and use of resources among criminal justice and other community agencies.

- The Therapeutic Docket Advisory Committee will receive quarterly updates from the Treatment Team regarding progress in program implementation, current program enrollment, and relevant program statistics. Program protocol will be adjusted accordingly.
- The Albemarle-Charlottesville Evidence-Based Decision-Making Policy Team will receive annual updates from the Treatment Team regarding progress in program implementation, current program enrollment, and relevant program statistics.

Attachment D: Description of the Docket

The Albemarle-Charlottesville Therapeutic Docket seeks to identify individuals arrested for misdemeanor offenses (and certain low-level felony offenses reduced to a misdemeanor) who suffer from a serious mental illness that contributed to their unlawful behavior. The docket offers those meeting program eligibility criteria an opportunity to voluntarily participate in a court-supervised diversion program that provides intensive treatment and support in lieu of a jail sentence. The goal of the therapeutic docket is to improve both mental health and criminal justice outcomes.

1. Planning and Administration

Planning for the docket began in April 2015, when over 50 local leaders representing Charlottesville and Albemarle County's law enforcement, corrections and mental health systems met for a planning session, under the facilitation of the Virginia Department of Behavioral Health and Developmental Services. The goal of the meeting was to update a September 2009 cross-systems action plan to address the needs of criminally-involved individuals suffering from mental illness.

As part of the action plan that came out of that meeting, the Albemarle-Charlottesville Regional Jail, OAR/Jefferson Area Community Corrections, and the VADOC District 9 Probation Office agreed to participate in a pilot screening process to identify the percentage of jail, pretrial and probation populations that scored high enough on a validated screener to suggest that further evaluation for serious mental illness was warranted.

While this data set was being assembled and analyzed, a group of local criminal justice and mental health leaders began meeting in the fall of 2016 to consider the establishment of a mental health docket serving Charlottesville and Albemarle County. During those meetings, mental health professionals endorsed an evidence-based, judicially-supervised therapeutic docket to divert and treat the target population. Meetings have continued to the present date to develop consensus around the evidence base, the target population and the structure of the docket. This application is a collaboration of the following members of the Planning Committee:

- Hon. Robert H. Downer, Jr, Chief Judge, 16th Judicial District, Presiding Judge, Charlottesville General District Court
- D. Warner Chapman, Commonwealth's Attorney, City of Charlottesville
- Nina-Alice Antony, Assistant Commonwealth's Attorney, City of Charlottesville
- Robert Tracci, Commonwealth's Attorney, County of Albemarle
- Liz Murtagh, Public Defender
- Albert LaFave, Sentencing Advocate, Public Defender's Office
- Robert Johnson, Executive Director, Region Ten Community Services
- Marna Bentley, Senior Director of Access and Adult Clinical Services, Region Ten

- Pat Smith, Executive Director, OAR/Jefferson Area Community Corrections
- Neal S. Goodloe, Jr., Criminal Justice Planner, Thomas Jefferson Area CCJB
- Herb Stewart, Ph.D., Clinical Psychologist
- Martin Kumer, Superintendent, Albemarle-Charlottesville Regional Jail

Once implemented, ongoing oversight and administration of the docket will be provided by the Therapeutic Docket Advisory Committee. The Advisory Committee is composed of stakeholders representing criminal justice and mental health professionals who meet quarterly to discuss progress and address concerns regarding the Docket's viability. Members of the Docket Advisory Committee will include:

- Judges of the District Courts of Charlottesville and Albemarle County
- Commonwealth Attorneys for Charlottesville and Albemarle County
- Public Defender for Charlottesville and Albemarle County
- Executive Director, OAR/Jefferson Area Community Corrections
- Senior Director of Access and Adult Clinical Services, Region Ten Community Services
- Police Chiefs of Charlottesville and Albemarle County, or designee
- Therapeutic Docket Coordinator
- Superintendent, Albemarle-Charlottesville Regional Jail or designee
- Criminal Justice Planner, Thomas Jefferson Area Community Criminal Justice Board
- Victim/Witness representative
- Citizen Representative
- Ex Officio members

2. Target Population

From July 1, 2015 to December 31, 2016, a total of 495 individuals were identified at intake at the Albemarle-Charlottesville Regional Jail (ACRJ) as in need of further evaluation for serious mental illness, using the validated screening process noted above. The identified cohort was split evenly between felony and misdemeanor defendants, suggesting that approximately 165 identified misdemeanants per year are booked into ACRJ and held long enough to classify (~72 hours). An unknown number are released prior to full classification. Also of interest is a small percentage (5.6%) of inmates booked multiple times (4 or more) during the same time period, but accounting for over 20% of bookings. These "frequent utilizers" are significantly over-represented in the cohort identified to be in need of mental health evaluation.

Based on the evidence above, the target population for the docket will include:

- Defendants 18 years of age or older, and
- Charged in Charlottesville or Albemarle County with a misdemeanor offense (or felony that has been reduced to a misdemeanor), and
- Diagnosed with a serious mental illness as defined by DSM-5 and DMAS guiding criteria (if the defendant does not have a substantiated history of serious mental illness, then they must make an appointment with the mental health clinician to be assessed prior to acceptance), and
- Assessed at medium to high risk of recidivism, as measured by the MOST/OST, a validated assessment instrument employed by the Virginia Department of Criminal Justice Services, and
- Assessed to show a likely connection between the defendant's mental illness and their criminal behavior.

3. Timely Participant Identification and Linkage to Services

Potential participants can be referred by the following:

- Defense attorney
- Commonwealth Attorney
- Magistrate
- Judge
- Mental Health Case Manager
- Law Enforcement
- Jail Mental Health staff
- OAR Pretrial staff

A primary goal of the docket is to identify potential participants as early as possible following arrest. ACRJ already conducts a Brief Jail Mental Health Screener during the classification process that serves as an early indicator of need for further mental health evaluation, as does OAR Pretrial staff when conducting a pretrial supervision intake. Between these two screening processes, potential participants (both incarcerated and released pending trial) can be identified within 72 hours of arrest. Others can be identified at first appearance, or at any stage of the criminal justice process where eligibility can still be considered.

Upon referral, the court orders the Docket Coordinator to facilitate the screening and assessment the defendant's eligibility to participate. Within two weeks of the referral, the Docket Coordinator files a brief written report with the court, describing the defendant's suitability for participation, including relevant clinical history such as a mental illness diagnosis, medications prescribed, and recommendations for treatment.

4. Terms of Participation

The Therapeutic Docket is a **post plea** docket, focusing on defendants who have been diagnosed with serious and persistent mental illness. Participants agree to fully comply with the rules of the docket, the elements of their treatment plan, required appearances before the therapeutic docket and meetings with their supervising probation officer and mental health clinician.

The docket will consist of four phases over a 6-12 month period, briefly outlined below:

Orientation: During this phase, the participant learns about the supervision and requirements of the docket including the role of the Treatment Team.

Stability: During this phase, each new participant interacts intensely with members of the Treatment Team and begins to comply with the requirements of his or her individualized service plan.

Maintenance and Community Reintegration: During this phase, the participant demonstrates continued stability and progress toward realizing his treatment goals.

Transition and successful completion: Once the participant has demonstrated sufficient personal and clinical improvement since entry into the program, the Treatment Team should prepare the participant for transition and graduation.

Due to the complex and fluid dynamics associated with the diagnosis, treatment and management of mental illness, it may be difficult to determine a specific point in time that a participant passes from one phase to the next. When measuring the participant's overall success and progress toward completion of the service plan, the Treatment Team must be mindful that each participant will navigate the phases of the Therapeutic Docket according to his/her abilities, capabilities, resources and unique circumstances.

5. Informed Choice

Each participant executes an "Agreement to Participate" document, which details the constitutional and statutory rights waived when participating. The participant executes the document with the advice and guidance of his/her lawyer prior to entry into the Docket.

6. Treatment Supports and Services

The Docket Coordinator, OAR Probation Officer and the Region Ten mental health clinician, along with any additional professionals already providing services, shall collaborate with the defendant (hereafter referred to as Participant) to develop a service plan going forward that addresses the participant's mental health needs as well as identified criminogenic needs (including cognitive/behavioral issues, substance abuse, housing, employment, etc.) In creating the service plan, the Docket Coordinator, probation officer and mental health clinician (the core

Treatment Team) shall utilize appropriate and recognized risk-needs-responsivity screening tools to determine the risks and needs of each participant, and identify additional barriers to their successful completion of the program. The Treatment Team shall discuss the individualized service plan with each participant to include the participant's views going forward. The service plan shall address the needs of each participant by using evidence-based practices that utilize resources and services that are available in the community. The service plan shall be in writing, signed by the participant, and incorporated into the files of the Treatment Team. The Treatment Team will revise the service plan as appropriate over time.

7. Confidentiality

The Clerk shall maintain separate files for those individuals who are participating on the Therapeutic Docket and seal documents as ordered by the Court to ensure the confidentiality of the documents relating to the participant. The Clerk shall seal the report filed by the Docket Coordinator, any medical/psychological reports prepared by Defendant's private provider that were submitted by defense counsel, any psychological testing results not otherwise governed by statute, and any mental health diagnosis not otherwise governed by statute. The Clerk shall make available to the public all unsealed documents relating to the case.

Treatment Team members and the participant shall execute all appropriate confidentiality forms to ensure information relating to medical/mental health issues remains protected under federal and state confidentiality laws. Treatment Team members and the participant shall execute appropriate release of information forms to enable Treatment Team members to speak with each other and other providers regarding the participant's needs and treatment.

8. Docket Team

Day-to-day responsibility for administration of the docket will be the responsibility of the Therapeutic Docket Treatment Team, which will engage in developing a treatment plan for each participant that addresses the participant's mental health issues, as well as identified criminogenic needs and other issues that are a barrier to stability and success. The Treatment Team meets in the judge's chambers or conference room approximately one hour prior to the commencement of the Docket. The Treatment Team members discuss each participant's adjustment to the treatment plan, pointing out issues of compliance or non-compliance and provide recommendations or adjustments to the treatment plan as appropriate. The Therapeutic Docket Treatment Team members include:

- General District Court Judge
- Docket Coordinator
- OAR Probation Officer assigned to the Therapeutic Docket
- Region Ten Mental Health Clinician assigned to the Therapeutic Docket

The **Commonwealth's Attorney** represents the voice of the community and victims, and their role is to ensure that justice is achieved. The Commonwealth's Attorney may participate actively

in the Docket Team meetings and attend all hearings, or may elect to be involved only at the point of eligibility/acceptance decisions and defendant removal or successful completion of the docket.

Defense Attorneys should also have representation on the Team. At a minimum, they should be present during hearings where decisions about entrance into the docket and removal from the docket occur. The Defense Attorney plays a crucial role in explaining the Docket to their client prior to agreeing to participate – this includes explanation of the process, their legal rights, ramifications of participation, and possible consequences for any non-compliance.

9. Monitoring Adherence to Docket Requirements

It shall be the responsibility of the Docket Team to ensure that the following requirements are adhered to, by program phase:

Participants must meet the following standards in Phase I:

1. Attend all court appearances every 2 weeks.
2. Meet with the probation officer/ and or the mental health clinician weekly.
3. Comply with goal plan established by the probation officer and mental health clinician.
4. Attend all appointments with other treatment providers.
5. Take all medication as prescribed.
6. Comply with all drug screens.
7. Remain drug- and alcohol-free.
8. Actively search for employment, if unemployed and able to work.
9. Maintain current employment, if employed.
10. Have no new criminal charges/convictions arising after being placed in the program.
11. Develop a plan to pay court costs during the probation period.

Participants must meet the following standards in Phase II.

1. Attend Therapeutic Docket review sessions twice per month.
2. Meet with the probation officer, and/ or mental health clinician in person every other week (two times per month).
3. Attend all appointments with the appropriate treatment providers.
4. Comply with elements of the service plan, including medication therapy.
5. Demonstrate stability with regards to housing and financial management.
6. Remain drug- and alcohol-free.
7. Maintain employment, if able to work.
8. Demonstrate consistent ability to pay court costs.
9. Attend all support groups as specified in the service plan..
10. Pay other court ordered obligations.

Participants must meet the following standards in Phase III.

1. Attend the Therapeutic Docket review session in court once each month

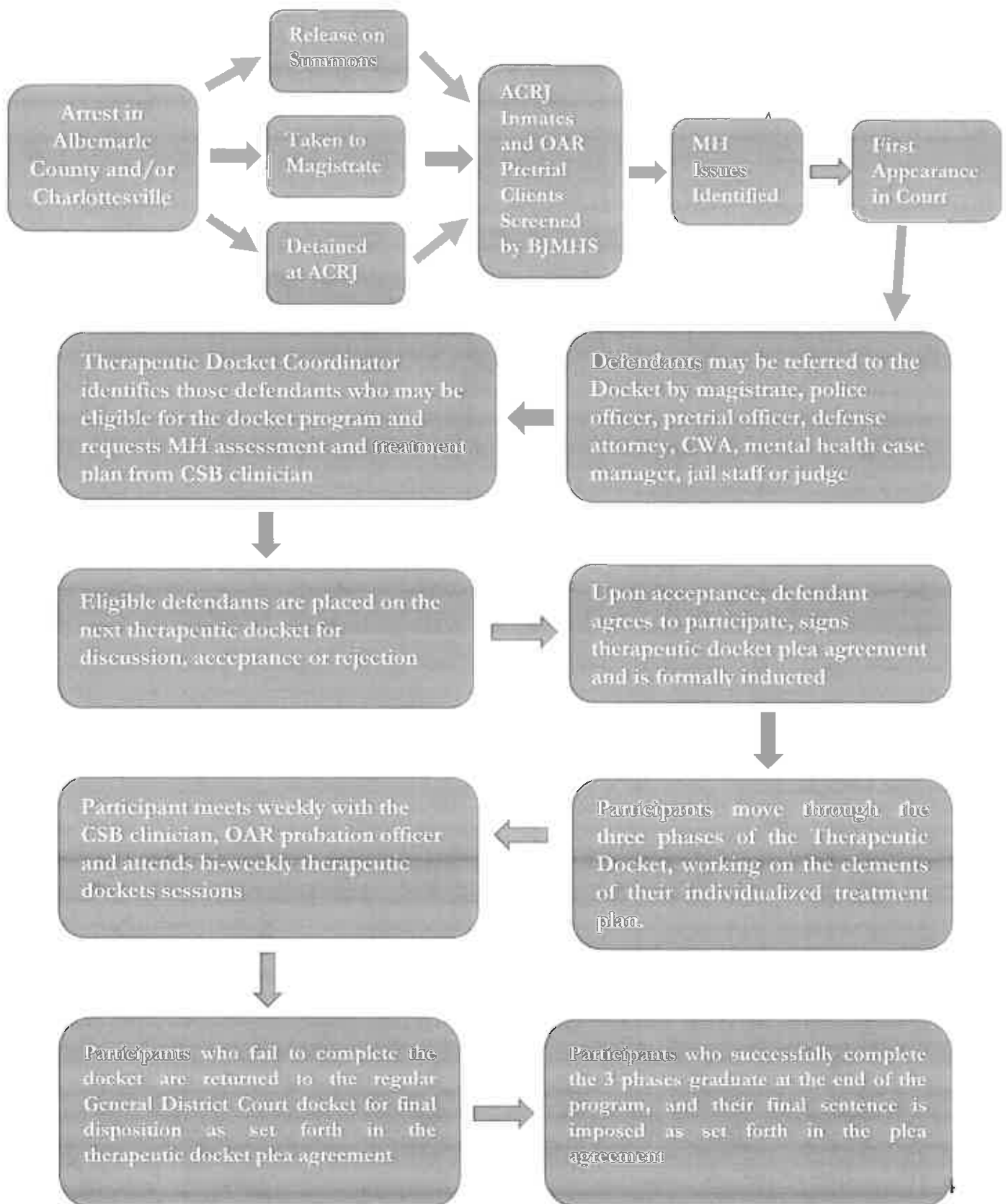
2. Meet with the probation officer, and/ or mental health clinician in person once a month and have phone contact every two weeks
3. Attend all appointments with appropriate treatment providers
4. Comply with the established service plan, including medication therapy
5. Demonstrate stability in housing
6. Demonstrate stability in financial management
7. Remain drug- and alcohol-free
8. Maintain employment, if able to work
9. Have no new criminal / traffic charges or convictions which arose after being placed in the program
10. Pay court costs in full
11. Pay treatment fees in full
12. Pay any other court ordered obligations in full

10. Sustainability

Sustainability of the program shall be the responsibility of the Therapeutic Docket Advisory Committee. The Advisory Committee will work with the Docket Team to establish a set of key performance metrics, gather data to track performance and adjust the operation of the docket accordingly, so that it achieves the mission of the program to provide an evidence-based, judicially-supervised approach that addresses the needs of eligible defendants, for whom there is a likely connection between their mental illness and their criminal behavior.

Financially, the program will be implemented utilizing a Virginia Department of Behavioral Health and Developmental Services grant awarded in the amount of \$64,504, beginning July 1, 2017. Ongoing financial support will be solicited from the Charlottesville City Council and the Albemarle County Board of Supervisors during the FY18-19 budget cycle.

Albemarle-Charlottesville Therapeutic Docket Flow Chart



Attachment E: Policy and Procedures Manual

Therapeutic Docket

General District Court for the 16th Judicial District, Charlottesville and Albemarle County

Operations Manual

Forward:

This manual guides the implementation and ongoing operation of a therapeutic docket serving Charlottesville and Albemarle County General District Courts. The docket seeks to identify individuals arrested for misdemeanor offenses (and certain low-level felony offenses reduced to a misdemeanor) who suffer from a serious mental illness that contributed to their unlawful behavior. The docket offers those meeting program eligibility criteria an opportunity to voluntarily participate in a court-supervised diversion program that provides intensive treatment and support in lieu of a jail sentence. The goal of the therapeutic docket is to improve both mental health and criminal justice outcomes.

Background:

In April 2015, over 50 local leaders representing Charlottesville and Albemarle County's law enforcement, corrections and mental health systems met for a planning session, under the facilitation of the Virginia Department of Behavioral Health and Developmental Services. The goal of the meeting was to update a September 2009 cross-systems action plan to address the needs of criminally-involved individuals suffering from mental illness. The good news that came out of this meeting was that considerable progress had been made in diverting mentally ill citizens from arrest through the implementation of Crisis Intervention Teams in Charlottesville, Albemarle County and at the University of Virginia, including the implementation of a protocol for "drop-off" mental health services at UVa Hospital. However, the consensus of the planning group was that there were still too many individuals suffering from mental illness ending up in jail, although hard data on the size and composition of the mentally ill jail cohort did not exist, nor was data available regarding the preponderance of mental illness at other points along the Sequential Intercept Model.

As part of the action plan that came out of that meeting, the Albemarle-Charlottesville Regional Jail, OAR/Jefferson Area Community Corrections, and the VADOC District 9 Probation Office agreed to participate in a pilot screening process to identify the percentage of jail, pretrial and probation populations that scored high enough on a validated screener to suggest that further evaluation for serious mental illness was warranted. Screening began in July 2015 for all jail inmates held long enough to classify, along with all defendants accepted for pretrial supervision,

and all probationers at intake. After 18 months of screening, data from Sequential Intercept points 2-5 were analyzed by the University of Virginia's Department of Systems and Information Engineering, and cross-matched with consumer data for the same time period at Region Ten Community Services. The study revealed that 23% of jail inmates met the screening criteria for serious mental illness, many were repeatedly booked into the jail, and only 44% of those identified as in need were successfully linked to evaluation/treatment at Region Ten during the study period. This cohort included approximately 250 identified individuals over an 18-month period charged with a misdemeanor offense.

This data analysis provided support for programming designed to reduce the number of mentally ill inmates housed at the regional jail, especially those arrested frequently on misdemeanor charges, and to improve their successful and sustained linkage to mental health services and community support.

While this data set was being assembled and analyzed, a group of local criminal justice and mental health leaders began meeting in the fall of 2016 to consider the establishment of a mental health docket serving Charlottesville and Albemarle County. During those meetings, mental health professionals endorsed an evidence-based, judicially-supervised therapeutic docket to divert and treat the target population

Guidance from the state level soon followed, in the form of Supreme Court of Virginia Rule 1:25, which required that proposed specialty courts in Virginia submit an application to the Supreme Court before approval to implement would be granted. The application process included the requirement that a detailed set of operating procedures be established and submitted prior to approval.

This document was created in compliance of Rule 1:25 and represents the culmination of the Charlottesville-Albemarle Therapeutic Docket Planning Team's work. Guidance has been provided by a Supreme Court of Virginia draft publication, Virginia Standards for Behavioral Health Dockets, and the Virginia Department of Behavioral Health and Developmental Services publication, The Essential Elements of Mental Health Dockets in Virginia. Additional support, guidance and encouragement has also been provided by existing therapeutic dockets in Staunton-Augusta, Roanoke County and Norfolk.

Mission Statement:

The mission of the Therapeutic Docket is to provide an evidence-based, judicially-supervised approach that addresses the needs of eligible defendants, for whom there is a likely connection between their mental illness and their criminal behavior. The Therapeutic Docket will facilitate their early identification and diversion from incarceration, and link participants to appropriate mental health treatment and community support.

Program Description:

The Therapeutic Docket is a **post plea** docket, focusing on defendants who have been diagnosed with serious and persistent mental illness. Offenders may be referred to the program by their

attorney, the Commonwealth Attorney, pretrial/probation officer, mental health case manager, jail mental health staff, a family member, magistrate or the Judge. Upon referral, the court orders the Docket Coordinator to facilitate the screening and assessment the defendant's eligibility to participate. Within two weeks of the referral, the Docket Coordinator files a brief written report with the court, describing the defendant's suitability for participation, including relevant clinical history such as a mental illness diagnosis, medications prescribed, and recommendations for treatment.

The Therapeutic Docket will apply the same eligibility criteria, referral and screening processes, and supervision/treatment requirements in both Charlottesville and Albemarle County. Each participant executes an "Agreement to Participate" document, which details the constitutional and statutory rights waived when participating. The participant executes the document with the advice and guidance of his/her lawyer prior to entry into the Docket. The Treatment Team and the participant develop a service or treatment plan, which includes treatment for mental illness and any high-scoring criminogenic needs. Twice monthly court appearances assure compliance with the details of the service plan. If, after six to twelve months, the offender successfully completes the goals established by the service plan, the offender graduates from the program and the court releases the offender from probation supervision.

Once the defendant accepts the conditions imposed by the Therapeutic Docket and waives certain constitutional rights, the court places the defendant on probation supervision with OAR-Jefferson Area Community Corrections. Immediately, a probation officer who specializes in mental health issues begins to supervise the defendant's probation, in collaboration with a licensed mental health clinician at Region Ten Community Services, both working with the participant to carry out a comprehensive treatment plan.

The court requires the participant to comply with all conditions of probation including special conditions of probation, which may be imposed due to his/her unique circumstances. Participation in mental health treatment, including medication compliance, is essential for compliance with probation. The court shall require the participant to participate in any additional programming to address high-scoring criminogenic needs, such as cognitive/behavioral programming, job training, substance abuse treatment, etc.. Strict compliance is required with all requirements. Sanctions are imposed for non-compliance. Probation supervision is typically 6 to 12 months in duration. Docket participants attend progress review hearings in the General District Court twice each month, so that the Therapeutic Docket judge and the treatment team can monitor and review progress, and make adjustments to supervision and treatment accordingly.

Once a defendant successfully completes the requirements of the Therapeutic Docket, the court may impose a suspended fine or suspended jail sentence if a conviction had been entered earlier or, in the appropriate case, dismiss the charge. The court's dispositional options are determined by the defendant's compliance with treatment, adjustment to probation supervision, prior record, and the nature of the instant offense(s). A graduation ceremony marks the completion of the probation supervision.

Therapeutic Docket Advisory Committee:

The Advisory Committee is composed of stakeholders representing criminal justice and mental health professionals who meet quarterly to discuss progress and address concerns regarding the Docket's viability. Members of the Docket Advisory Committee include:

- Judges of the District Courts of Charlottesville and Albemarle County
- Commonwealth Attorneys for Charlottesville and Albemarle County
- Public Defender for Charlottesville and Albemarle County
- Executive Director, OAR/Jefferson Area Community Corrections
- Senior Director of Access and Adult Clinical Services, Region Ten Community Services
- Police Chiefs of Charlottesville and Albemarle County, or designee
- Therapeutic Docket Coordinator
- Superintendent, Albemarle-Charlottesville Regional Jail or designee
- Criminal Justice Planner, Thomas Jefferson Area Community Criminal Justice Board
- Victim/Witness representative
- Citizen Member
- Ex Officio representatives

Therapeutic Docket Treatment Team:

The Therapeutic Docket Treatment Team engages in developing a treatment plan for each participant that addresses the participant's mental health issues as well as identified criminogenic needs and other issues that are a barrier to stability and success. The Treatment Team meets in the judge's chambers or conference room approximately one hour prior to the commencement of the Docket. The Treatment Team members discuss each participant's adjustment to the treatment plan, pointing out issues of compliance or non-compliance and provide recommendations or adjustments to the treatment plan as appropriate. The Therapeutic Docket Treatment Team members include:

- General District Court Judge
- Docket Coordinator
- OAR Probation Officer assigned to the Therapeutic Docket
- Region Ten Mental Health Clinician assigned to the Therapeutic Docket

The **Commonwealth's Attorney** represents the voice of the community and victims, and their role is to ensure that justice is achieved. The Commonwealth's Attorney may participate actively in the Docket Team meetings and attend all hearings, or may elect to be involved only at the point of eligibility/acceptance decisions and defendant removal or successful completion of the docket.

Defense Attorneys should also have representation on the Team. At a minimum, they should be present during hearings where decisions about entrance into the docket and removal from the docket occur. The Defense Attorney plays a crucial role in explaining the Docket to their client prior to agreeing to participate – this includes explanation of the process, their legal rights, ramifications of participation, and possible consequences for any non-compliance.

Eligibility to Participate:

Who is eligible?

- Defendants 18 years of age or older, and
- Charged in Charlottesville or Albemarle County with a misdemeanor offense (or felony that has been reduced to a misdemeanor), and
- Diagnosed with a serious mental illness as outlined by the Governor’s Access Plan (GAP) SMI Screening Tool ([link](#)), or other diagnosis approved by the Treatment Team.
- Assessed at medium to high risk of recidivism, as measured by the MOST/OST, a validated assessment instrument employed by the Virginia Department of Criminal Justice Services, and
- Determined to show a likely connection between the defendant’s mental illness and their criminal behavior.

Who is not eligible?

- Defendants not approved by the Commonwealth’s Attorney.
- Defendants with pending out-of-state felony charges.
- Defendants pleading guilty to a DUI or DUID charge as their entrance charge..
- Defendants whose instant offense is certified to the Grand Jury.
- Defendants who have been terminated from the Therapeutic Docket within the past 12 months due to noncompliance with the program.

Disqualifications

Although an individual might otherwise qualify under the foregoing considerations, no one shall be admitted into the program if he or she has:

Within the preceding 10 years, a prior conviction as an adult or a prior adjudication of guilty or not innocent as a juvenile for a violent criminal offense as defined in § 17.1-805 or § 19.2-297.1

Who may not be eligible?

- Defendants who have a prior conviction as an adult or a prior adjudication of guilty or not innocent as a juvenile for a violent criminal offense as defined in § 17.1-805 or § 19.2-297.1 that is older than 10 years.
- Defendants charged with misdemeanor traffic offenses such as reckless driving or driving on a suspended operator’s license.

- Defendants already enrolled on another treatment or diversion program.

Cases falling into this category will be considered on a case-by-case basis by the Treatment Team to determine eligibility for the Therapeutic docket. The Commonwealth Attorney reserves discretion to deny entry to defendants otherwise eligible to participate in the Therapeutic Docket.

Reconsideration of eligibility:

Reconsideration may be requested in writing by the party seeking reconsideration. The request should detail the facts supporting reconsideration. The Treatment Team will consider the request and determine whether to permit reinstatement.

Referral Sources:

- Defense attorney
- Commonwealth Attorney
- Magistrate
- Judge
- Mental Health Case Manager
- Law Enforcement
- Jail Mental Health staff
- OAR Pretrial staff

Referral Process: Post Plea

Defendant represented by counsel:

Defendant enters a plea of guilty or nolo contendere. Counsel orally or on written motion asks the Court to screen the defendant to determine the defendant's eligibility to participate in the Therapeutic Docket treatment program.

Defendant *pro se*:

Defendant enters a plea of guilty or nolo contendere, upon request made by the Commonwealth Attorney, mental health case manager, or law enforcement the court will order the defendant to be screened to determine eligibility to participate. The court may order the screening. If approved for participation, the judge will ensure that the defendant is capable of knowingly and voluntarily waiving their right to counsel, given a professional assessment from the treatment team that the defendant has the mental capacity to waive counsel and knowingly and voluntarily plead guilty or no lo contendre. The judge will engage in an extended colloquy with the defendant to ensure the above.

The Court enters an order directing the Defendant to contact the Docket Coordinator immediately to schedule an appointment to be screened. The Court provides a copy of the order to the defendant. The Court schedules the defendant and his attorney to return to court in two

weeks for consideration of the screening report. If held pending approval, the Court notifies the Docket Coordinator via email that a screening has been ordered.

The Docket Coordinator shall file a written report with the court containing the findings regarding the defendant's eligibility for participation and recommendations for treatment. The Court shall review the report in the presence of the defendant and counsel. If the defendant is eligible to participate in the Therapeutic Docket and defendant consents to participate in the Therapeutic Docket, then the defendant and counsel review the "Waiver of Constitutional Rights and Agreement to Participate" form outside the presence of the court. If the defendant agrees to all conditions of participation and waives his constitutional rights as contained in the form, then the Court accepts the defendant as a Therapeutic Docket participant and orders defendant to contact the OAR probation officer assigned to the Therapeutic Docket immediately. The Court provides the defendant with a referral form containing the probation officer's office address and telephone number. The Court schedules the defendant to appear for their first progress review hearing at the next meeting of the Therapeutic Docket. The Court orders the Clerk to seal the report prepared by the Docket Coordinator to ensure the information contained therein remains confidential.

The Docket Coordinator, OAR Probation Officer and the Region Ten mental health clinician, along with any additional professionals already providing services, shall collaborate with the defendant (hereafter referred to as Participant) to develop a service plan going forward that addresses the participant's mental health needs as well as identified criminogenic needs (including cognitive/behavioral issues, substance abuse, housing, employment, etc.) In creating the service plan, the Docket Coordinator, probation officer and mental health clinician (the core Treatment Team) shall utilize appropriate and recognized risk-needs-responsivity screening tools to determine the risks and needs of each participant, and identify additional barriers to their successful completion of the program. The Treatment Team shall discuss the individualized service plan with each participant to include the participant's views going forward. The service plan shall address the needs of each participant by using evidence-based practices that utilize resources and services that are available in the community. The service plan shall be in writing, signed by the participant, and incorporated into the files of the Treatment Team. The Treatment Team will revise the service plan as appropriate over time.

Therapeutic Docket Court Supervision Phases:

Due to the complex and fluid dynamics associated with the diagnosis, treatment and management of mental illness, it may be difficult to determine a specific point in time that a participant passes from one phase to the next. When measuring the participant's overall success and progress toward completion of the service plan, the Treatment Team must be mindful that each participant will navigate the phases of the Therapeutic Docket according to his/her abilities, capabilities, resources and unique circumstances.

Phase I

Orientation: During this phase, the participant learns about the supervision and requirements of the docket including the role of the Treatment Team. Each participant reviews the conditions of probation and signs the probation contract, learns about the requirements for participating in groups to address issues such as substance abuse, begins participation in the specialized Therapeutic Docket treatment protocol, meets with his/her mental health case manager and reviews his/her reporting schedule with the OAR probation officer regarding mental health treatment, and programming to address other identified criminogenic needs.

Participants must meet the following standards in Phase I:

1. Attend court appearances every 2 weeks.
2. Meet with the probation officer/ and or the mental health clinician weekly.
3. Comply with goal plan established by the probation officer and mental health clinician.
4. Attend appointments with other treatment providers.
5. Take all medication as prescribed.
6. Comply with all drug screens.
7. Remain drug- and alcohol-free.
8. Actively search for employment, if unemployed and able to work.
9. Maintain current employment, if employed.
10. Have no new criminal charges/convictions arising after being placed in the program.
11. Develop a plan to pay court costs during the probation period.

Participants may move to Phase II when they have consistently done the following:

1. Attended appointments with the Court, probation officer, mental health clinician, support groups, and treating psychiatrist/psychologist.
2. Complied with the elements of the service plan, including medication therapy
3. Remained drug- and alcohol-free
4. Had no new criminal charges/convictions arising after being placed in the program.
5. Obtained and maintained stable employment, if able to work.
6. Made payments on court costs.

The OAR probation officer and the Region Ten mental health clinician shall make the recommendation to the court that the participant advance to the next phase of the program. The Court shall make the final decision regarding advancement, giving great weight to the recommendation of the probation officer and mental health clinician.

Phase II

Stability: During this phase, each new participant interacts intensely with members of the Treatment Team and begins to comply with the requirements of his or her individualized service plan. The participant attends weekly specialized Therapeutic Docket programming, meets with the probation officer at least twice monthly or as otherwise required, attends other group meetings as required, provides urine screens if required, attends court progress review hearings twice monthly, attends all mental health treatment appointments, remains medication compliant, attends all meetings with the mental health clinician, complies with all requirements of the established service plan, and remains law abiding. The participant must show progress toward realizing his or her treatment goals, and demonstrate stability in his/her life to move to the next phase.

Participants must meet the following standards in Phase II.

1. Attend Therapeutic Docket review sessions twice per month.
2. Meet with the probation officer, and/ or mental health clinician in person every other week (two times per month).
3. Attend appointments with the appropriate treatment providers.
4. Comply with elements of the service plan, including medication therapy.
5. Demonstrate stability with regards to housing and financial management.
6. Remain drug- and alcohol-free.
7. Maintain employment, if able to work.
8. Demonstrate consistent ability to pay court costs.
9. Attend support groups as specified in the service plan.
10. Pay other court ordered obligations.

Participants will be promoted to Phase III once they consistently demonstrate a clear pattern of stability in the following areas:

1. Attendance of appointments with the Court, probation officer and mental health clinician.
2. Compliance with the individualized service plan
3. Compliance with mental health treatment, including medication therapy
4. Stability in housing
5. Stability in financial management
6. Reasonable stability in family relationships (with whom the participant resides)
7. Remain drug- and alcohol-free.
8. Maintain employment, if able to work
9. Have no new criminal / traffic charges or convictions which arose after being placed in the program
10. Paying court costs
11. Paying other court ordered obligations such as restitution if appropriate

Phase III

Maintenance and Community Reintegration: During this phase, the participant demonstrates continued stability and progress toward realizing his treatment goals. The participant attends fewer court progress review hearings, attends fewer meetings with the probation officer, remains medication compliant, attends all meetings with the mental health clinician, complies with all requirements of his or her service plan, completes all group requirements and remains law abiding. The participant and the Treatment Team should begin planning for the participant's transition from the docket to graduation.

1. Attend the Therapeutic Docket review session in court once each month
2. Meet with the probation officer, and/ or mental health clinician in person once a month and have phone contact every two weeks
3. Attend appointments with appropriate treatment providers
4. Comply with the established service plan, including medication therapy
5. Demonstrate stability in housing
6. Demonstrate stability in financial management
7. Remain drug- and alcohol-free
8. Maintain employment, if able to work
9. Have no new criminal / traffic charges or convictions which arose after being placed in the program
10. Pay court costs in full, if able
11. Pay treatment fees in full, if able
12. Pay any other court ordered obligations in full, if able

Graduation:

A participant is eligible to graduate from the Therapeutic Docket upon successful completion of all requirements of the service plan.

Once the participant has demonstrated sufficient personal and clinical improvement since entry into the program, the Treatment Team should prepare the participant for transition and graduation. The Treatment Team and the participant should review the service plan to recognize the participant's progress and accomplishments. The Treatment Team and the participant should identify potential issues and needs going forward, and the Treatment Team should help the participant create a plan for independent living, utilizing resources in the community to assist the participant with his or her needs following graduation. The Treatment Team should stress the participant's need to stay connected to vital services and resources in the community following graduation from the docket.

Generally, participants are deemed successful when they have:

1. Actively participated in and completed the first three phases of the docket and have developed a plan for transition to independent living.
2. Been compliant in taking prescribed medications for their illness

3. Remained arrest-free for at least a six month period

The Probation officer and the mental health clinician shall make a recommendation regarding final disposition to the team. Participants successfully completing the Therapeutic Docket program will appear at the Docket and be recognized as a graduate.

Their case will be referred back to the General District Court of origin with the final disposition in the case. The court may impose a conviction with a fine, impose a conviction and a suspended jail sentence or, in the appropriate case, dismiss the charge as outlined in the therapeutic docket agreement. The court's dispositional options will be determined by the participant's compliance with the program, prior record, and the nature of the immediate offense(s).

A graduation ceremony will mark the completion of the program. At graduation, the judge will conduct a ceremony wherein the participant will be recognized for his/her successful completion of the Docket requirements. Participant's family members and others may attend the ceremony. The judge calls the graduate to the bench first in recognition of the graduate's successful completion of the requirements of the Therapeutic Docket and probation. The judge presents the graduate with a certificate of successful completion. According to the legal posture of the case, the court may dismiss the charge or find the defendant guilty but suspend a jail sentence or impose the penalty agreed to by the attorney for the defendant, defendant, and Commonwealth Attorney when the defendant pled guilty or nolo contendere.

Sanctions for Non-Compliance:

The probation officer explains the consequences of non-compliance to each participant when the participant is received for probation supervision. The probation officer and Court should remind a participant that the participant signed the "Agreement to Participant" form prior to entering the Docket, which identifies the sanctions that may be imposed for noncompliance. The Court should strive to encourage and persuade all participants to comply with the conditions of probation and their service plan prior to imposing sanctions.

The court may impose immediate sanctions by issuing a warrant and remanding the participant to jail as punishment for noncompliant behavior. For less severe violations, the court may impose community service.

Possible sanctions and treatment responses for violating the terms and conditions of **Phase I:**

1. Report more frequently to the probation officer and/or mental health clinician
2. Performance of community service hours
3. Thinking Report
4. Brief period of incarceration
5. Attend more frequent community support meetings
6. Increased level of treatment

7. Termination from the docket, revocation of suspended sentence or, if the defendant enjoyed a deferred disposition prior to the violation, the court may impose a conviction and a jail sentence to serve.

Possible sanctions and treatment responses for violating the terms and conditions of **Phase II**:

1. Demotion to Phase I
2. Report more frequently to the probation officer and/or mental health clinician
3. Thinking Report
4. More frequent drug screens
5. More frequent court appearances
6. Performance of a large number of community service hours
7. Brief period of incarceration
8. Attend more frequent community support meetings
9. Termination from the docket, revocation of suspended sentence or, if the defendant enjoyed a deferred disposition prior to the violation, the court may impose a conviction and a jail sentence to serve.

Possible sanctions and treatment responses for violating the terms and conditions of **Phase III**:

1. Demotion to Phase II or Phase I
2. Report more frequently to the probation officer and/or mental health clinician
3. Performance of community service hours
4. Thinking Report
5. Brief period of incarceration
6. More frequent court appearances
7. More frequent attendance at community meetings or support groups
8. Termination from the docket, revocation of suspended sentence or, if the participant enjoyed a deferred disposition prior to the violation, the court may impose a conviction and impose of a jail sentence to serve

Removal from the Therapeutic Docket:

Generally, participants are deemed to be unsuccessful when they:

1. Have failed to remain actively engaged in treatment
2. Have failed to be adhere to taking prescribed medications
3. Have failed to remain free of alcohol and illegal drugs – additional treatment opportunities will be available and sanctions will be applied by the Therapeutic Docket judge, but the participants must show improvement over time.
4. Have been convicted of repeated misdemeanor offenses or a new felony offense occurring during their time in the docket

The probation officer and mental health clinician shall make a recommendation regarding unsuccessful completion of the program. The Therapeutic Docket Team makes a decision based

on the consensus of the team to refer the case back to the General District Court of origin. The participant, with due process, will be represented by legal counsel at the court proceeding in the General District Court of origin at which time the presiding judge will have a full adjustment summary from the probation officer.

Confidentiality:

The Clerk shall maintain separate files for those individuals who are participating on the Therapeutic Docket and seal documents as ordered by the Court to ensure the confidentiality of the documents relating to the participant. The Clerk shall seal the report filed by the Docket Coordinator, any medical/psychological reports prepared by Defendant's private provider that were submitted by defense counsel, any psychological testing results not otherwise governed by statute, and any mental health diagnosis not otherwise governed by statute. The Clerk shall make available to the public all unsealed documents relating to the case.

Treatment Team members and the participant shall execute all appropriate confidentiality forms to ensure information relating to medical/mental health issues remains protected under federal and state confidentiality laws. Treatment Team members and the participant shall execute appropriate release of information forms to enable Treatment Team members to speak with each other and other providers regarding the participant's needs and treatment.

Evaluation:

The Therapeutic Docket Advisory Committee, and the leadership of OAR/JACC and Region Ten Community Services, are responsible for monitoring staff adherence to the provisions of the program's Operations Manual. The Advisory Committee will direct the Criminal Justice Planner to collect and analyze data required to determine the effectiveness and efficiency of the docket, and provide said data to the Office of the Executive Secretary as required. At a minimum, the Therapeutic Docket will collect the following statistics:

- Name
- Charge
- Date of Referral
- Referring Court
- Date of Birth
- Gender
- Legal status of case-convicted with suspended sentence or plea under advisement
- Length of probation
- Age
- Education
- Marital status
- Employment status at entry
- Employment status at discharge

- Mental health diagnosis
- Identity of Treatment Provider
- Length of time from referral to acceptance into treatment
- Co-occurring disorder-if so, identify
- Group therapy-if so, what groups
- Recidivist rates for Misdemeanor and Felony Offenses
 - While on the Docket
 - Following Graduation from the Docket (Measured yearly after graduation)
- Non-compliant and removal for new convictions
- Non-compliant and removal for inability to complete the service plan
- Non-compliant and continuation on docket
- Non-compliant and removal from docket at Participant's request
- Graduation rate.
- Length of Time to New Charges
- Rate of Arrest (compared to prior to participation)
- Jail Days (compared to prior to participation)
- Treatment dosage per participant

Continuing Education:

All members of the Treatment Team should attend continuing educational and training opportunities relating to the legal aspects of the Therapeutic Docket and clinical aspects of mental illness and substance abuse. All Treatment Team members should keep abreast of new developments in these fields.

Attachment E:

Waiver of Certain Constitutional Rights and Agreement to Participate in the Albemarle-Charlottesville Therapeutic Docket Program

General District Court of _____

Commonwealth vs. _____

Charge: _____ **Court Date:** _____

1. I understand I have pled guilty or nolo contendere to the misdemeanor charge(s) listed above. I further understand that by pleading guilty or nolo contendere to the charge(s) I am submitting matters of sentencing to the court;
2. I understand the court may defer imposing a sentence in my case or may sentence me to jail and suspend all or a portion of that jail sentence conditioned upon my entry in and successful completion of the therapeutic court program;
3. I understand a condition of my participation in the Therapeutic Court program is to attend all court review hearings; I now waive my right to be represented by counsel at all court review hearings;
4. I waive my right to be present and waive my attorney's right to be present during all treatment team meetings in which my progress and treatment is discussed;
5. I agree to the following conditions as a necessary prerequisite to my acceptance into the therapeutic court program:
 - a. I agree to attend all review hearings scheduled by the court in which my progress and adjustment to supervision shall be reported by my treatment team to the court;
 - b. I agree to be bound by all conditions of probation imposed by the court in my case;
 - c. I agree to pay all probation supervision fees;

- d. I agree to participate in counseling for mental health and substance abuse issues as directed by my treatment team;
 - e. I agree to comply with all medication requirements as directed by my treatment team;
 - f. I agree to refrain from the use of alcohol and all non prescriptions drugs while on probation;
 - g. I agree and consent to provide my treatment team with a sample of my breath or urine as requested by my treatment team or as directed by the court;
 - h. I agree to cooperate with my treatment team and be respectful of their recommendations;
 - i. I agree to be law abiding and engage in no criminal activity while on probation;
6. I understand the court shall issue a capias for my arrest should the treatment team recommend in writing my removal from the therapeutic court program as a result of my non-compliance with the conditions of the Therapeutic Court program. I understand I will receive written notice of the alleged violation(s) and be entitled to a hearing on that issue. I understand I will be entitled to be represented by counsel at that hearing. At my request, if I am unable to afford counsel, I understand the court shall appoint counsel to represent me.
7. I understand the court may impose sanctions for my non-compliance with the terms of my probation and order any of the following sanctions:
- a. Removal from the program and termination of my probation
 - b. Issue a capias and remand me to jail to await a further hearing
 - c. If the disposition in my case was deferred by the court, the court may convict me of my original charge and impose a jail sentence of not more than 12 months; fine of not more than \$2,500 or both
 - d. Perform additional community service hours
 - e. Attend additional counseling sessions with my mental health counselor or my substance abuse counselor or both
 - f. Attend additional Community meetings
 - g. Attend additional court reviews
 - h. Provide additional urine or breath screens
 - i. Attend additional meetings with my probation officer
 - j. Other measures the court deems appropriate to punish or sanction my non-compliance
8. I agree to a probation period of not less than 12 months; however, upon meeting all goals set by my treatment team and upon the recommendation of my treatment team, the court may release me from probation prior to the expiration of 12 months.
9. I agree to pay all court costs within 12 months of being placed in the Therapeutic Court program.

I have discussed the contents of this document with my attorney and understand its contents. I have discussed the above waiver of certain constitutional rights with my attorney and fully understand and accept the conditions set forth above. I further agree to be bound by this document and ask the Judge to refer me to the Therapeutic Court as an alternative disposition to be imposed in my case.

Date

Participant

I certify I have discussed the contents of this document with my client. Based upon my discussions today with my client regarding possible sentencing alternatives and specifically my client's participation in the Therapeutic Court, it is my belief my client is competent to make the decision to participate in the Therapeutic Court program.

Date

Counsel for Participant

The defendant and counsel appeared before me on this date, acknowledged the contents of this document, and defendant, after consultation with counsel, signed this document freely. Based upon the evidence produced today, the court finds the defendant is competent to understand the proceedings and to execute the waiver.

Date

Judge

Date

Commonwealth's Attorney

Attachment F: Estimated Budget

Budget Item	Description	Cost
Mental Health Clinician Services – 20 hours per week	1040 hours X \$28.85 per hour <i>(Hourly rate based on annual salary of \$60,000)</i>	\$30005
Mental Health Probation Officer Services – 20 hours per week	1040 hours X \$19.23 per hour <i>(Hourly rate based on annual salary of \$40,000)</i>	\$19999
Training for Mental Health Court Team Judge, Clerk, MH Clinician, MH Pretrial Officer, Commonwealths Attorney, Public Defender, Law Enforcement	Attend NADCP training in DC \$700 per individual registration; Hotel Costs; Travel Costs	\$12000
Purchase of Supplies for Positions	Laptop	\$2000
Program Materials and Supplies – cost of developing and printing policy and procedures, brochures, court forms, etc.	Estimated costs of \$500	\$500
Total		\$64504

Attachment G: Organizational Plan

Authority for operation of the Therapeutic Docket rests with the General District Court Judge who presides over the docket. The docket is provided administrative oversight by the Advisory Committee. The Commonwealth's Attorney serves as the program's "gatekeeper" and retains veto authority over referrals to the program.

The three operational staff include the Therapeutic Docket Coordinator, an OAR Probation Officer and a mental health clinician from Region Ten Community Services. This operational staff, along with the General District Court Judge presiding over the docket represent the Treatment Team.



The **Commonwealth's Attorney** represents the voice of the community and victims, and their role is to ensure that justice is achieved. The Commonwealth's Attorney may participate actively in the Docket Team meetings and attend all hearings, or may elect to be involved only at the point of eligibility/acceptance decisions and defendant removal or successful completion of the docket.

Defense Attorneys should also have representation on the Team. At a minimum, they should be present during hearings where decisions about entrance into the docket and removal from the docket occur. The Defense Attorney plays a crucial role in explaining the Docket to their client prior to agreeing to participate – this includes explanation of the

process, their legal rights, ramifications of participation, and possible consequences for any non-compliance.

Behavioral Health Docket Staff Requirements

The Docket Coordinator is a senior staff member at OAR/Jefferson Area Community Corrections, with primary responsibility for provision of services to mentally ill probationers. This position requires at least a Bachelor's Degree, and considerable progressively-responsible experience in working with the mentally ill in a community criminal justice setting. The Docket Coordinator will be DCJS-certified.

The OAR Probation Officer is a front-line supervisory position, acting as the primary point of contact for docket participants. The OAR Probation Officer will provide assessment, case planning and case management services for the clientele, referrals to community services and support, drug/alcohol testing, and implementation of suitable rewards and sanctions for client behavior. The OAR Probation Officer undergoes training to obtain DCJS certification.

The Region Ten Clinician is a DBHDS-licensed, masters-level position, assigned to the docket to provide both direct clinical services and referrals to a full range of mental health and substance abuse treatment services provided by Region Ten.

Referring Courts/Dockets

The Therapeutic Docket will serve both the Albemarle County General District Court and the Charlottesville General District Court.

Referrals will be accepted from the following sources:

- Defense attorney
- Commonwealth Attorney
- Magistrate
- Judge
- Mental Health Case Manager
- Law Enforcement
- Jail Mental Health staff
- OAR Pretrial staff

Monitoring and Evaluation

The Therapeutic Docket Advisory Committee, and the leadership of OAR/JACC and Region Ten Community Services, are responsible for monitoring staff adherence to the provisions of the program's Operations Manual. The Advisory Committee will direct the Criminal Justice Planner to collect and analyze data required to determine the

effectiveness and efficiency of the docket, and provide said data to the Office of the Executive Secretary as required. At a minimum, the Therapeutic Docket will collect the following statistics:

- Name
- Charge
- Date of Referral
- Referring Court
- Date of Birth
- Gender
- Legal status of case-convicted with suspended sentence or plea under advisement
- Length of probation
- Age
- Education
- Marital status
- Employment status at entry
- Employment status at discharge
- Mental health diagnosis
- Identity of Treatment Provider
- Length of time from referral to acceptance into treatment
- Co-occurring disorder-if so, identify
- Group therapy-if so, what groups
- Recidivist rates for Misdemeanor and Felony Offenses
 - While on the Docket
 - Following Graduation from the Docket (Measured yearly after graduation)
- Non-compliant and removal for new convictions
- Non-compliant and removal for inability to complete the service plan
- Non-compliant and continuation on docket
- Non-compliant and removal from docket at Participant's request
- Graduation rate.
- Length of Time to New Charges
- Rate of Arrest (compared to prior to participation)
- Jail Days (compared to prior to participation)
- Treatment dosage per participant

Ongoing Interdisciplinary Education and Training

All members of the Treatment Team should attend continuing educational and training opportunities relating to the legal aspects of the Therapeutic Docket and clinical aspects of mental illness and substance abuse. All Treatment Team members should keep abreast of new developments in these fields.

Ongoing Collaboration/Sustainability

Sustainability of the program shall be the responsibility of the Therapeutic Docket Advisory Committee. The Advisory Committee will work with the Docket Team to establish a set of key performance metrics, gather data to track performance and adjust the operation of the docket accordingly, so that it achieves the mission of the program to provide an evidence-based, judicially-supervised approach that addresses the needs of eligible defendants, for whom there is a likely connection between their mental illness and their criminal behavior.

Financially, the program will be implemented utilizing a Virginia Department of Behavioral Health and Developmental Services grant awarded in the amount of \$64,504, to Region Ten Community Services as the fiscal agent. Ongoing financial support will be solicited from the Charlottesville City Council and the Albemarle County Board of Supervisors during the FY18-19 budget cycle.

Attachment H: Memorandum of Agreement

Memorandum of Agreement
Between
Region Ten Community Services Board
And
Office of Aid and Restoration

This Memorandum of Agreement (Agreement) covers the provision of treatment services provided within the Charlottesville/Albemarle Therapeutic Docket. (Docket)

This AGREEMENT is entered into between Region Ten Community Services Board (RTCSB) and OAR/Jefferson Area Corrections (OAR) effective 10/1/18. This Agreement shall automatically renew annually for a period of three consecutive years, ending on 9/30/21, unless conditions of termination have been met prior to the end of the three year period.

Under the provision of this agreement, RTCSB shall provide .5 FTE Clinical staff to assist with coordinating the clinical services of those within the docket as well as complete all Clinical Assessments of individuals being referred to the Docket. This position will attend all team meetings as well as court docket meetings as it relates to the Docket. OAR shall provide .5 FTE docket coordinator to supervise individuals within the docket program.

Under the provision of this agreement RTCSB shall provide a one-time payment to OAR In the amount of \$20,000 to cover the first year cost of the .5 FTE docket coordinator as funded through the one-time grant with DBHDS to support this project.

This agreement may be terminated by either party with 30 day notice in writing to the other party. Any amendments or changes to this Agreement may be initiated at any time by either party with 30 day written notice to the other party with requested changes/amendments to this agreement. Proposed changes/amendments to this agreement must be approved within 30 days by both parties or the Agreement will continue as is, under current agreed upon provisions and terms.

Region Ten Community Services Board

Date

Office of Aid and Restoration

Date

Attachment I: Certification and Assurances

Commonwealth of Virginia

Department of Behavioral Health and Developmental Services

Pursuant to the provisions of Title 57.2 Code of Virginia

and
The Rules and Regulations
of the

DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES

A license is hereby granted to

REGION TEN COMMUNITY SERVICES BOARD
50 OLD LYNCHBURG RD.
CHARLOTTESVILLE, VA 22903

to maintain and operate

SEE ADDENDUM FOR LISTING OF LICENSED SERVICES

LICENSE AS: A PROVIDER OF MENTAL HEALTH, INTELLECTUAL DISABILITY, AND
SUBSTANCE ABUSE SERVICES.
STIPULATIONS:

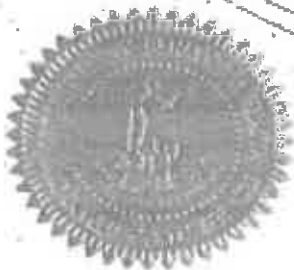
This TRIENNIAL license is for the period beginning OCTOBER 03, 2014 through
OCTOBER 02, 2017, subject, however, to revocation for justifiable cause.

License Number: 173

DEBRA PROUTSON, PH.D.
COMMISSIONER

Chanda C. Braggs
CHANDA BRAGGS, M.S.

ACTING DIRECTOR, OFFICE OF LICENSING



Attachment J: Applicant Disclosure of Pending Applications

The Albemarle-Charlottesville Therapeutic Docket has no pending applications for federally funded grants or sub-grants (including cooperative agreements) that include requests for funding to support the same project being proposed under any solicitation and will cover the identical cost items outlined in the Budget in this application.

The Region Ten Community Services Board has been awarded \$64,504 in grant funding from the Virginia Department of Behavioral Health and Developmental Services to implement the Therapeutic Docket.

Attachment K: Referral Form

Charlottesville/Albemarle Therapeutic Docket Referral Form

SECTION I: To initiate a Therapeutic Docket referral, the referring party must complete SECTION I and forward this form to the Commonwealth's Attorney's Office for the correct jurisdiction.

Defendant Name: DOB: SSN: SID:
Race: Gender: Home Address: Home Phone:
Cell Phone: Other ways to Contact: Currently incarcerated? Y or N:
Jurisdiction of current charge(s): Arrest Date: Charges including VCC Code(s):
Primary Case No: Defense Attorney(s): Referring Party:
Next Court Appearance Details: Date referral submitted to CA:

SECTION II: To be completed by the Commonwealth's Attorney's Office. Then to be forwarded to the Therapeutic Docket Coordinator and returned to the Referring Party.

Date Received: Subject was found to be: ☐ Eligible, ☐ Ineligible, or ☐ Vetoed prior to consideration for eligibility

Ineligible Reason

- ☐ Pending out-of-state felony charge.
- ☐ Instant offense is DUI or DUID.
- ☐ Prior conviction or adjudication for felony violent offense (within ten years of sentencing).
- ☐ Instant Offense certified to Grand Jury.
- ☐ Terminated from Therapeutic Docket within past 12 months.
- ☐ Other

Disapproval Reason

- ☐ Law Enforcement Concern
- ☐ Nature of current charge(s)
- ☐ Criminal History Details
- ☐ Other

Notes/Comments:

Initials

SECTION III: To be completed by Therapeutic Docket Coordinator. Then to be forwarded to Region Ten clinician.

Date Referral Received: Date of First Contact with Subj: Eval Date:

Subject was found to be: ☐ Eligible ☐ Ineligible

If Eligible, Date Referred for Eval at R-10: If Ineligible, Reason:

Notes/Comments:

SECTION IV: To be completed by Region Ten. Then to be forwarded with a letter of recommendation to the Therapeutic Docket Coordinator.

Eval Date: Clinician: Meets clinical criteria for participation: ☐ Does not meet clinical criteria for participation ☐

Notes/Comments:

SECTION V: To be completed by Therapeutic Docket Coordinator. Then forwarded to the Commonwealth's Attorney.

The subject is: ☐ Recommended ☐ Not Recommended for participation. Date reported to Commonwealth:

Region Ten Recommendation: Sent via Fax ☐ Attached ☐ Notes/Comments:

☐ Prior Participant: ☐ Graduated, ☐ Terminated. End Date of prior participation:

SECTION VI: To be completed by the Commonwealth's Attorney.

Final recommendation by the Commonwealth's Attorney: ☐ Approved for Entry ☐ Not Approved for Entry

Initials
Notes/Comments:

Attachment L: Nondisclosure Agreement

Non-Disclosure Agreement

Albemarle-Charlottesville Therapeutic Docket

Due to the sensitivity and confidentiality of the data provided by _____ to the Therapeutic Docket Treatment Team, use and disclosure guidelines must be established.

By signing this document, each member of the Therapeutic Docket Treatment Team agrees to the following:

- To receive and use this data for the sole intended purpose of the Albemarle-Charlottesville Therapeutic Docket.
- You agree not to disclose any information contained within the data to anyone, without written permission from _____.

Agency/Organization: _____

Authorized Representative (print name): _____

Authorized Representative's Title: _____

Signature: _____ Date: _____

Therapeutic Docket Coordinator (print name): _____

Signature: _____ Date: _____

Therapeutic Docket Probation Officer (print name): _____

Signature: _____ Date: _____

Therapeutic Docket Region Ten Clinician (print name): _____

Signature: _____ Date: _____