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December 1, 2020

The General Assembly of Virginia
900 East Main Street
The Pocahontas Building
Richmond, VA 23219

Dear Senators and Delegates:

Virginia Code 18.2-254.2 directs the Office of the Executive Secretary of the Supreme Court of Virginia to develop a statewide evaluation model and conduct ongoing evaluations of the effectiveness and efficiency of all local specialty dockets established in accordance with the Rules of Supreme Court of Virginia. Please find attached the current annual report.

If you have any questions regarding this report, please do not hesitate to contact me.

With best wishes, I am

Very truly yours,

Karl R. Hade

KRH: atp

Enclosure

cc: Division of Legislative Automated Systems

Virginia Specialty Dockets 2020 Annual Report

**Office of the Executive Secretary
Supreme Court of Virginia**

PREFACE

Code of Virginia §18.2-254.2 (Appendix A) directs the Office of the Executive Secretary of the Supreme Court to develop a statewide evaluation model and conduct ongoing evaluations of the effectiveness and efficiency of all local specialty dockets established in accordance with the Rules of Supreme Court of Virginia. The section further requires each local specialty docket to submit evaluative reports to the Office of the Executive Secretary as requested and requires the Office of the Executive Secretary to submit a report of such evaluations to the General Assembly by December 1 of each year. This report is submitted in compliance with that requirement.¹

¹ This report includes information about veterans treatment dockets. Evaluation information on drug treatment courts and behavioral/mental health dockets is reported separately, in accordance with Va. Code § 18.2-254.1 and Va. Code § 19.2.254.3.

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VIRGINIA SPECIALTY DOCKETS

Specialty Dockets accommodate offenders with specific problems and needs that are not or could not be adequately addressed in the traditional court setting. They have been called by various titles, including therapeutic jurisprudence courts/dockets, problem-solving dockets and problem-solving justice. Specialty dockets seek to promote outcomes that will benefit not only the offender, but also the victim and society. They were developed as an innovative judicial response to a variety of offender problems, including substance abuse and mental illness, as well as problems presented to the courts involving military veterans. Early studies conclude that these types of dockets have a generally positive impact on the lives of offenders and victims, and, in most instances, save governmental authorities significant jail and prison costs (Marlowe, 2010; Rossman & Zweek, 2013).

Across the country, specialty dockets have experienced exponential growth in recent years. There is a common belief that courts and judges have an obligation to use their resources and best efforts to solve the problems that bring people into court, whether as the accused, the victim, or the witness. Toward that end, specialty dockets generally involve hearings before a judge who, through frequent interaction, utilizes incentives as well as sanctions in order to compel defendants to comply with appropriate treatment and intervention. These dockets are testing new methods of administering justice, recreating ways that state courts address the many factors that contribute to crime. Among these are mental illness, illegal drug use, domestic violence, and child abuse or neglect. The judge works closely with a community-based team of experts in order to develop a specific case plan for each person before the court. The primary goal is to protect public safety through individualized, meaningful treatment.

The Virginia Judicial System mission is “to provide an independent, accessible, responsive forum for the just resolution of disputes in order to preserve the rule of law and to protect all rights and liberties guaranteed by the United States and Virginia Constitutions.” In response to numerous inquiries about various specialty dockets in Virginia, the Supreme Court of Virginia promulgated Rule 1:25, Specialty Dockets, effective January 16, 2017. The Rule includes the definition of and criteria for specialty dockets, types of specialty dockets, an authorization process, expansion of types of specialty dockets, oversight structure, operating standards, funding, and evaluation.

The Supreme Court of Virginia currently recognizes the following three types of specialty dockets: (i) drug treatment court dockets as provided for in the Drug Treatment Court Act, §18.2254.1, (ii) Veterans Treatment dockets, and (iii) Behavioral/Mental Health dockets §19.2.254.3. A circuit or district court that intends to establish one or more types of these recognized specialty dockets must petition the Supreme Court of Virginia for authorization before beginning operation of a specialty docket. These specialized dockets are designed to fulfill local needs utilizing local resources. Pursuant to Code of Virginia §18.2-254.2, this Report will provide an annual summary of Veterans Treatment dockets.

Veterans Treatment dockets serve military veterans with treatment needs who face possible incarceration. These dockets promote sobriety, recovery and stability through a coordinated response with the understanding that the bonds of military service and combat run very deep. Veterans dockets allow veterans to navigate the court process with other veterans who are similarly situated and have common experiences, but also link them with Veterans Affairs services uniquely designed for their

needs. Veterans dockets benefit from support provided by U.S. Department of Veteran Affairs volunteer veteran mentors, and veterans' family support organizations. (NDCI, Painting the Current Picture, July 2011).

VETERANS TREATMENT DOCKETS

There are approximately 20.3 million veterans living in the United States, representing over seven percent of the U.S. population.² Due to the ongoing conflicts in Iraq and Afghanistan, the U.S. faces an additional influx of veterans who return home grappling with mental illness, substance use, intimate partner violence, and homelessness. Justice for Vets, a nonprofit dedicated to transforming the way the justice system identifies, assesses, and treats veterans, found that one in five veterans returning home from combat have symptoms of a mental health disorder or cognitive impairment, while one in six veterans who served in Operation Iraqi Freed suffered from a substance use issue. These conflicts have also resulted in an increased number of veterans who have experienced traumatic brain injury and military sexual trauma. An average of one in four women and about one in 100 men have been reported victims of military sexual assault.³ Left untreated, these mental health disorders, substance use, and military sexual trauma experienced by veterans have been found to be directly related to involvement in the criminal justice system (Edelman, Berger, & Crawford, 2016).

Virginia's Veterans Treatment Dockets are specialized criminal dockets that provide specific services for veterans with identified substance dependency or mental illness. The veterans treatment court model adopts many elements from the adult drug treatment court and behavioral health docket models, including frequent court appearances, accountability and individualized treatment plans. Programs offer substance use and mental health treatment to justice-involved veterans in need of treatment as an alternative to traditional case processing. They also often include alternatives to incarceration, case dismissal, reduction in charges, and reduction in supervision. One element of the veterans treatment court model that sets it apart from adult drug treatment court is the participation of veteran peer mentors. The camaraderie of fellow veterans, which taps into the unique aspects of military and veteran culture, is another distinctive component that can aid justice-involved veterans' program completion.

The following section reviews the basic operations and outcomes of Virginia's veterans treatment dockets in FY 2020. Information is provided in this report on program participants, including demographics, program entry offenses, program length and program completion or termination. This information is based on data from the drug court docket database established and maintained by the Office of the Executive Secretary (OES). Veterans treatment docket staff in local programs entered data on docket participants into the OES Specialty Docket Database. Due to the small number of participants in each veterans treatment docket, these results should be considered with caution. In some cases, there were too few cases to extract conclusions.⁴

Veterans Treatment Dockets Approved to Operate in Virginia

²https://www.va.gov/vetdata/Veteran_Population.asp

³ Department of Defense. "Department of Defense Annual Report on Sexual Assault in the Military." 2018
https://www.sapr.mil/sites/default/files/DoD_Annual_Report_on_Sexual_Assault_in_the_Military.pdf

⁴ <http://www.courts.state.va.us/courtadmin/aoc/djs/programs/sds/programs/vtd/home.html>

The goals of Virginia veterans treatment docket programs are: (1) to reduce substance use and mental illness associated with criminal behavior by engaging and retaining the justice-involved veteran in need of treatment services; (2) to address other needs through clinical assessment and effective case management; and (3) to remove certain cases from traditional courtroom settings.

The first Veterans Docket in Virginia began prior to the January 16, 2017, effective date of Rule of Court 1:25 (*see Appendix B*). Pursuant to the Rule of Court 1:25, the Veterans Docket Advisory Committee was appointed by the Chief Justice. Later that year, in 2017 the Veterans Docket Advisory Committee approved four dockets to operate. As additional applications for veterans treatment dockets were received, the committee convened to review the applications for approval. The most recent docket approved was the Spotsylvania Veterans Docket application to expand to its surrounding communities as a regional veterans treatment docket.

As of FY 2020, there were seven approved and operational veterans treatment dockets. Four veterans treatment dockets currently operate in circuit courts. Two veteran treatment dockets operate in general district courts, while one operates in a juvenile and domestic relations court (See Figure 1 and Table 2).

Figure 1. Approved Veterans Treatment Dockets in Virginia, FY 2020

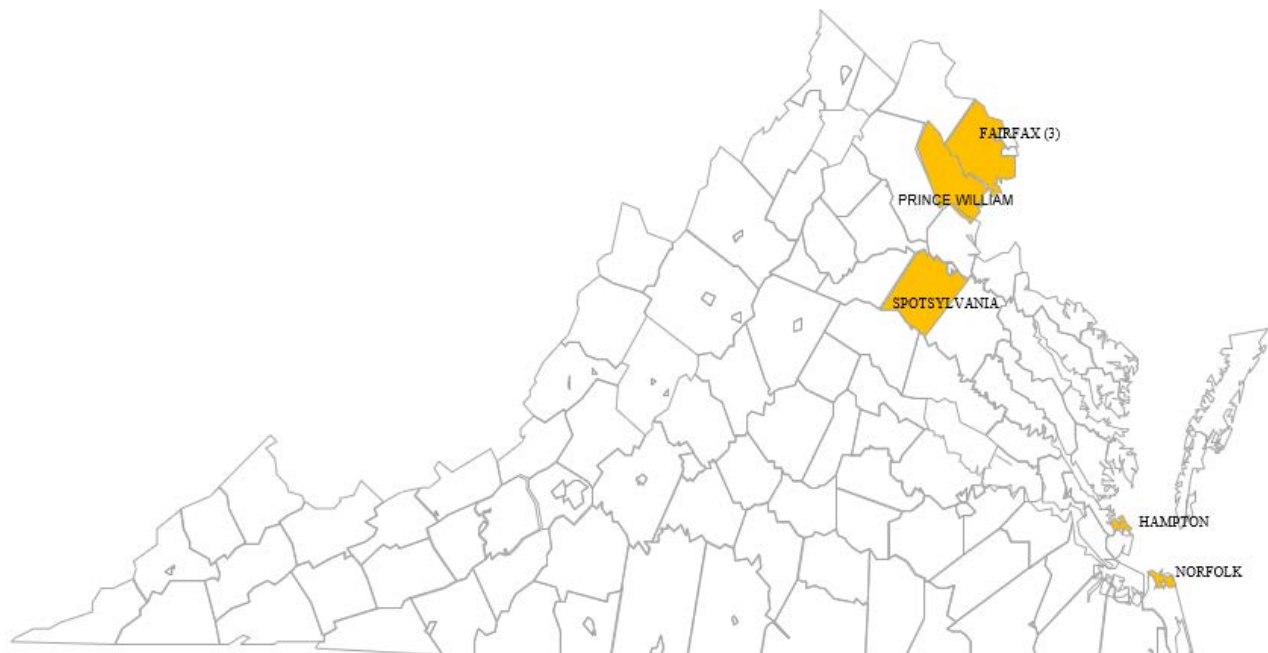
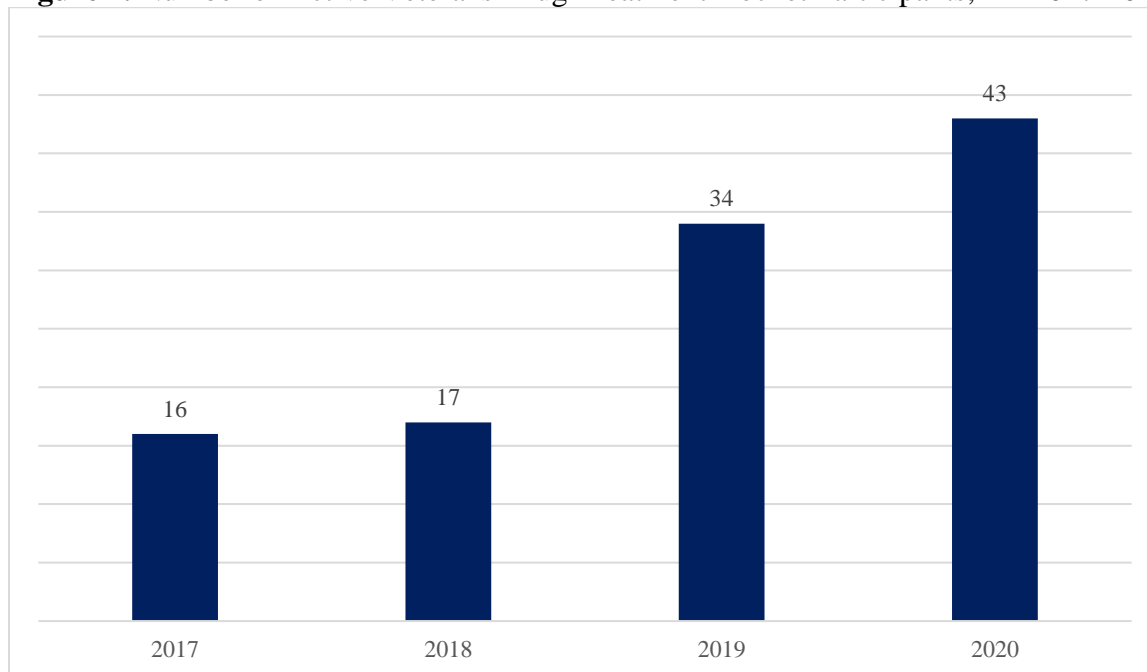


Table 1. Approved Veterans Treatment Dockets in Virginia, FY 2020

Veterans Treatment Dockets	
Fairfax (3) General District, Circuit, and J&DR District Courts	<i>n</i> = 7
Hampton Circuit Court	
Norfolk Circuit Court	
Price William General District Court	
Spotsylvania Circuit Court	

While veterans may be served by other specialty dockets, this report specifically highlights the 43 participants actively enrolled in veterans treatment docket programs during FY 2020 (see Figure 2). This is an increase from the 34 active participants reported for FY 2019.

Figure 2. Number of Active Veterans Drug Treatment Docket Participants, FY 2017-2020



The most prevalent instant offenses committed by active veteran participants included DWI, grand larceny, and probation violation. Eleven participants (25.6%) had at least one DWI charge. Ten participants (23.2%) had at least one larceny charge, while eight had at least one probation violation charge (18.6%).

Summary of Veterans Treatment Docket Activity

Of the 43 active veterans treatment docket participants during FY 2020, the majority of participants were White (53.5%) and male (88.4%). Nearly 50 percent of participants were between 30 and 39 years old, as shown below in Table 2.

Referrals: There were 32 referrals to veterans treatment court dockets in FY 2020, a slight increase

from the 30 referrals reported for FY 2019.

Admissions: There were 13 newly admitted program participants. The admission rate was 40.6%, which was a decrease from the 70.0% admission rate reported in FY 2019.

Gender: 88.4% of participants identified as male, and 11.6% identified as female.

Race and Ethnicity: The majority of program participants were White (53.5%), followed by 45.5% who identified as Black, African American. Participants did not report any other racial identifications. No participants identified as Hispanic.

Age: Veterans treatment docket participants varied in age. 48.8% of participants were between 30-39 years old.

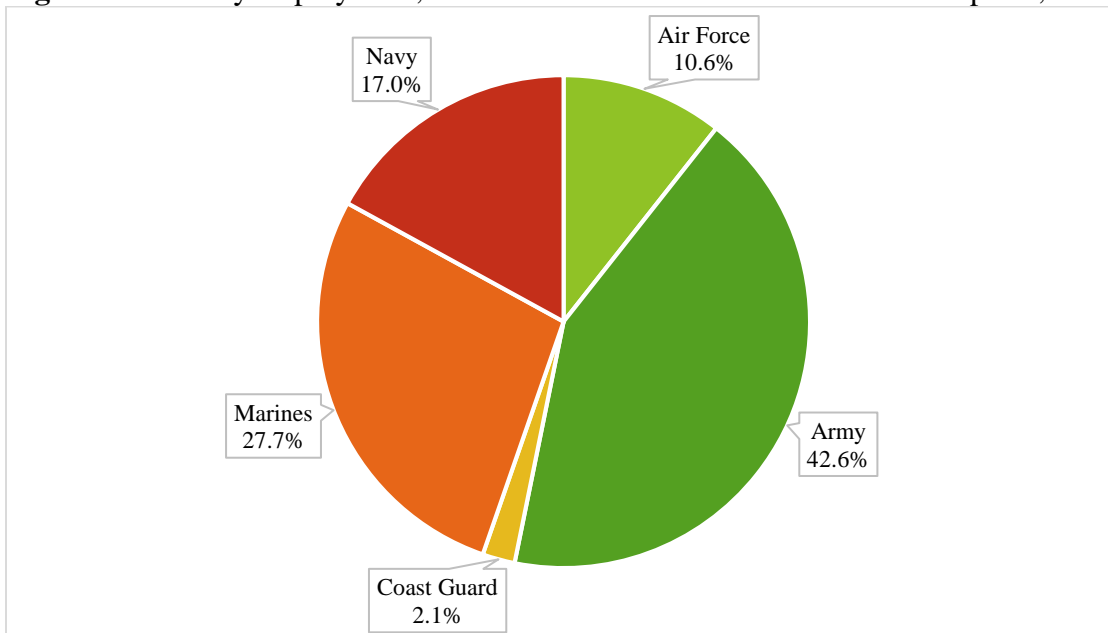
Table 2. Demographics of Active Veterans Participants, FY 2020

Gender		
	Count	Percent
Male	38	88.4%
Female	5	11.6%
Total	43	100.0%
Race		
	Count	Percent
Black, African American	20	45.5%
White	23	53.5%
Total	43	100.0%
Ethnicity		
	Count	Percent
Hispanic	0	0.0%
Non-Hispanic	43	100.0%
Total	43	100.0%
Age at time of referral		
	Count	Percent
18-29 years old	3	7.0%
30-39 years old	21	48.8%
40-49 years old	8	18.6%
50-59 years old	8	18.6%
60 years and older	3	7.0%
Total	43	100.00%

Military History

Branch of Deployment: When referred to the veterans treatment docket, participants were asked to disclose their military deployment history. Nearly 42.6% of participants for whom data is available reported serving in the United States Army, while 27.7% reported serving in the Marines. Seventeen percent reported serving in the Navy. The remainder served in the Air Force and Coast Guard (see Figure 3).

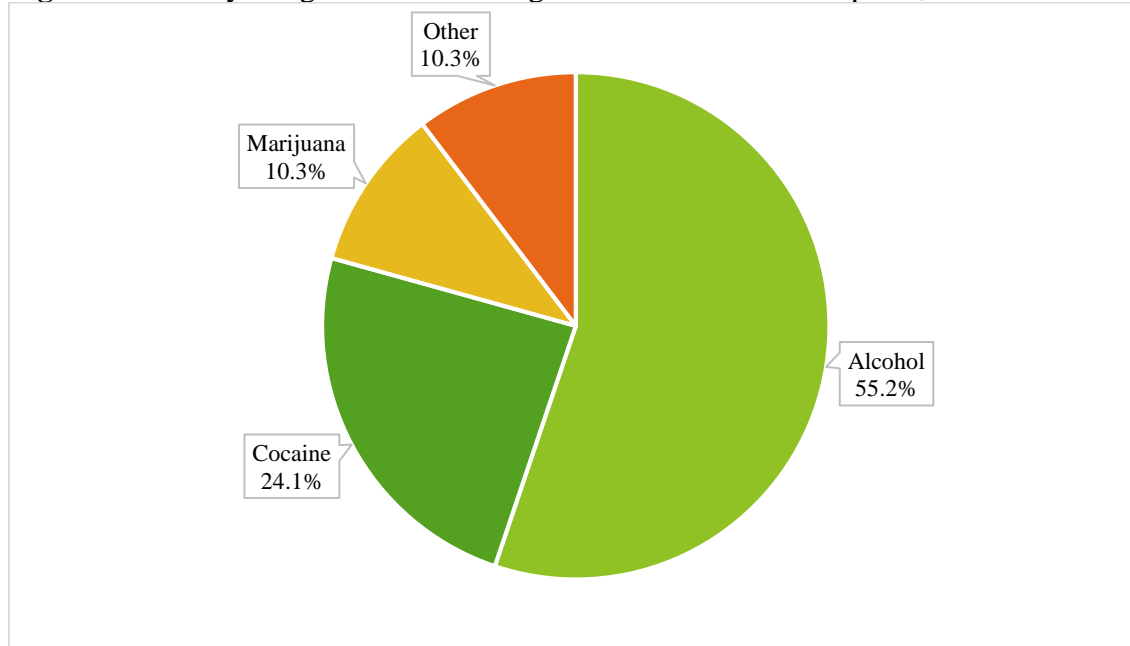
Figure 3. Military Deployment, Veterans Treatment Docket Active Participants, FY 2020



Drugs of Choice and Drug Screens

Drugs of Choice: At the time of admission, participants were asked to self-disclose their primary drug of choice (see Figure 4). 55.2% percent reported alcohol as their primary drug of choice. Cocaine was second with 24.1%, while 10.3% reported marijuana as their primary drug of choice.

Figure 4. Primary Drug of Choice among Active Veterans Participants, FY 2020



Note. Figure 4 should be interpreted with caution. Data are based on self-reported primary drug of choice.

Program Drug Screenings: Veterans drug screen results indicate a higher percentage of negative screenings when compared to other specialty docket programs. In FY 2020, there were 1,521 drug screenings conducted for the 36 participants for whom data were available, an average of 43 screenings per participant for the year. Of the 1,521 total screenings, 1,436 (94.4%) were negative (see Table 3).

Table 3. Veterans Treatment Docket Drug Screens, FY 2020

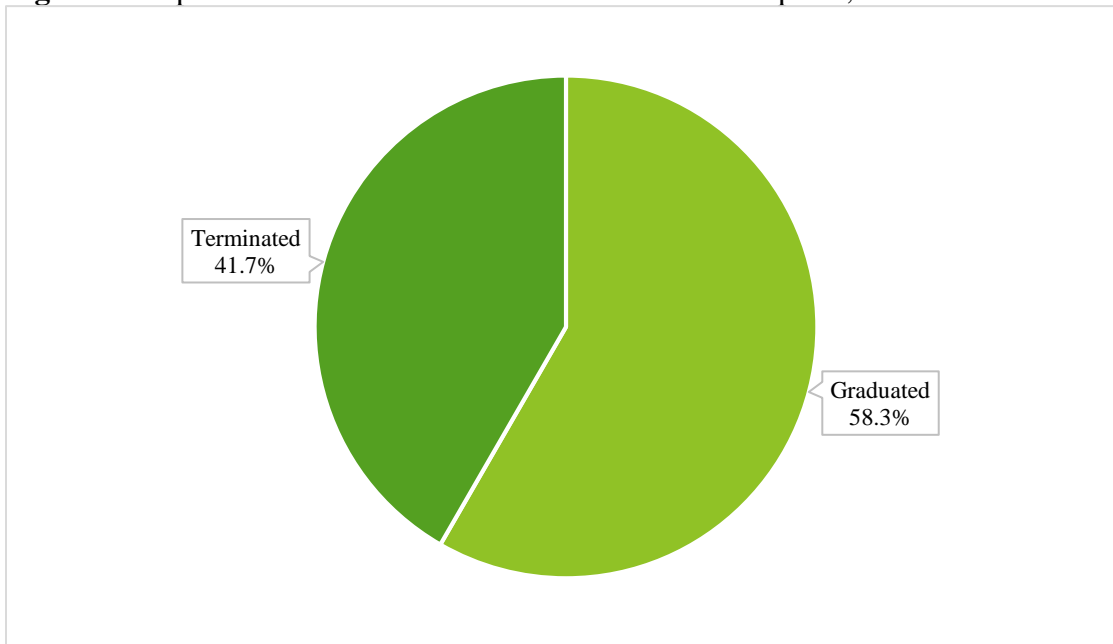
	Count	Percent
Negative	1,436	94.4%
Positive	85	5.6%
Total Screens	1,521	100%
Total Participants Tested	36	
Average Screenings per Participant	43	

Summary of Departures

Graduation Rates: Among the 43 active veterans treatment docket participants during FY 2020, 12 participants exited the program. Of the 12 departures, seven graduated. The graduation rate was 58.3%, an increase from the 50.0% reported for FY 2019.

Termination Rates: Five veterans treatment docket participants were terminated from the program in FY 2020. The termination rate was 41.7%, a decrease from the 50.0% reported for FY 2019 (see Figure 5).

Figure 5: Departures for Veterans Treatment Docket Participants, FY 2020



Length of Stay: Length of stay was measured by calculating the number of days from program entry (acceptance date) to completion date (either graduation date or date of termination). Graduates had a mean length of stay of 535 days, while those terminated from the program had a mean length of stay of 438 days. The median length of stay for graduates was 532 days, compared to a median length of stay of 451 days for terminated participants (see Table 4).

Table 4: Veterans Treatment Court Dockets Length of Stay, Departures, FY 2020

Mean Length of Stay, <i>in days</i>	
Graduates	535
Unsuccessful Completions	438
Median Length of Stay, <i>in days</i>	
Graduates	532
Unsuccessful Completions	451

REFERENCES

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APPENDICES

Appendix A

§ 18.2-254.2. Specialty dockets; report

A. The Office of the Executive Secretary of the Supreme Court shall develop a statewide evaluation model and conduct ongoing evaluations of the effectiveness and efficiency of all local specialty dockets established in accordance with the Rules of Supreme Court of Virginia. Each local specialty docket shall submit evaluative reports to the Office of the Executive Secretary as requested. The Office of the Executive Secretary of the Supreme Court of Virginia shall submit a report of such evaluations to the General Assembly by December 1 of each year.

B. Any veterans docket authorized and established as a local specialty docket in accordance with the Rules of Supreme Court of Virginia shall be deemed a "Veterans Treatment Court Program," as that term is used under federal law or by any other entity, for the purposes of applying for, qualifying for, or receiving any federal grants, other federal money, or money from any other entity designated to assist or fund such state programs.

2019, cc. 13, 51;2020, c. 603.

The chapters of the acts of assembly referenced in the historical citation at the end of this section may not constitute a comprehensive list of such chapters and may exclude chapters whose provisions have expired.

Appendix B

Rule 1:25 Specialty Dockets

VIRGINIA:

In the Supreme Court of Virginia held at the Supreme Court Building in the City of Richmond on Monday the 14th day of November, 2016.

It is ordered that the Rules heretofore adopted and promulgated by this Court and now in effect be and they hereby are amended to become effective January 16, 2017.

Rule 1:25. Specialty Dockets.

(a) Definition of and Criteria for Specialty Dockets.

- (1) When used in this Rule, the term "specialty dockets" refers to specialized court dockets within the existing structure of Virginia's circuit and district court system offering judicial monitoring of intensive treatment, supervision, and remediation integral to case disposition.
- (2) Types of court proceedings appropriate for grouping in a "specialty docket" are those which (i) require more than simply the adjudication of discrete legal issues, (ii) present a common dynamic underlying the legally cognizable behavior, (iii) require the coordination of services and treatment to address that underlying dynamic, and (iv) focus primarily on the remediation of the defendant in these dockets. The treatment, the services, and the disposition options are those which are otherwise available under law.
- (3) Dockets which group cases together based simply on the area of the law at issue, e.g., a docket of unlawful detainer cases or child support cases, are not considered "specialty dockets."

(b) Types of Specialty Dockets. -The Supreme Court of Virginia currently recognizes only the following three types of specialty dockets: (i) drug treatment court dockets as provided for in the Drug Treatment Court Act, § 18.2-254.1, (ii) veterans dockets, and (iii) behavioral/mental health dockets. Drug treatment court dockets offer judicial monitoring of intensive treatment and strict supervision in drug and drug-related cases.

The dispositions in the family drug treatment court dockets established in juvenile and


domestic relations district courts may include family and household members as defined in Virginia Code § 16.1-228. Veterans dockets offer eligible defendants who are veterans of the armed services with substance dependency or mental illness a specialized criminal specialty docket that is coordinated with specialized services for veterans. Behavioral/mental health dockets offer defendants with diagnosed behavioral or mental health disorders judicially supervised, community-based treatment plans, which a team of court staff and mental health professionals design and implement.

- (c) *Authorization Process.* - A circuit or district court which intends to establish one or more types of these recognized specialty dockets must petition the Supreme Court of Virginia for authorization before beginning operation of a specialty docket or, in the instance of an existing specialty docket, continuing its operation. A petitioning court must demonstrate sufficient local support for the establishment of this specialty docket, as well as adequate planning for its establishment and continuation.
- (d) *Expansion of Types of Specialty Dockets.* - A circuit or district court seeking to establish a type of specialty docket not yet recognized under this rule must first demonstrate to the Supreme Court that a new specialty docket of the proposed type meets the criteria set forth in subsection (a) of this Rule. If this additional type of specialty docket receives recognition from the Supreme Court of Virginia, any local specialty docket of this type must then be authorized as established in subsection (c) of this Rule.
- (e) *Oversight Structure.* - By order, the Chief Justice of the Supreme Court may establish a Specialty Docket Advisory Committee and appoint its members. The Chief Justice may also establish separate committees for each of the approved types of specialty dockets. The members of the Veterans Docket Advisory Committee, the Behavioral/Mental Health Docket Advisory Committee, and the committee for any other type of specialty docket recognized in the future by the Supreme Court shall be chosen by the Chief Justice. The State Drug Treatment Court Advisory Committee established pursuant to Virginia Code § 18.2-254.1 shall constitute the Drug Treatment Court Docket Advisory Committee.
- (f) *Operating Standards.* - The Specialty Docket Advisory Committee, in consultation with the committees created pursuant to subsection (e), shall establish the training and operating standards for local specialty dockets.

- (g) *Financing Specialty Dockets.* -Any funds necessary for the operation of a specialty docket shall be the responsibility of the locality and the local court but may be provided via state appropriations and federal grants.
- (h) *Evaluation.* -Any local court establishing a specialty docket shall provide to the Specialty Docket Advisory Committee the information necessary for the continuing evaluation of the effectiveness and efficiency of all local specialty dockets.

A Copy,

Teste:


Clerk

Appendix C

Specialty Dockets Advisory Committee Membership Roster

Chair:

Honorable Jack S. Hurley, Jr., Judge
Tazewell Adult Docket Treatment Court Judge, Tazewell Circuit Court

Members:

Honorable Penney Azcarate, Judge
Fairfax Veterans Docket Judge,
Fairfax County Circuit Court

Honorable Philip Hairston, Judge
13th Judicial Circuit of Virginia
Richmond Circuit Court

Honorable Wilford Taylor, Jr., Judge
(Ret.) Hampton Veterans Docket,
Hampton Circuit Court

Honorable Jacqueline F. Ward Talevi
23rd Judicial District
Roanoke County General District
Court

Appendix D

Veterans Docket Advisory Committee Membership Roster

Co-Chairs:

Honorable Penney Azcarate, Judge
Fairfax Veterans Docket Judge, Fairfax County Circuit Court

&

Honorable Wilford Taylor, Jr., Judge (Ret.)
Hampton Veterans Docket, Hampton Circuit Court

Members:

Robert Barrett, Esquire
Co-Chair Veterans Task Force
Virginia Bar Association

Hon. Anton Bell
Commonwealth's Attorney
City of Hampton

Joey Carico, Esquire, Executive Director
Southwest Legal Aid

Hon. Llezelle Dugger, Clerk
Charlottesville Circuit Court
Virginia Court Clerks Association

Wendy Goodman, Administrator/ Case
Management and Program Infrastructure
Reentry and Programs Unit Virginia
Department of Corrections

Thomas Herthel, Deputy Commissioner
Department of Veterans Services

Karl Hade, Executive Secretary
Office of the Executive Secretary

Maria Jankowski, Deputy
Executive Director, Virginia
Indigent Defense Commission

Hon. Lisa Mayne, Judge
Fairfax General District Court

Hon. Ricardo Rigual, Judge,
Rappahannock
Regional Veterans Docket
Spotsylvania Circuit Court

Natalie Ward-Christian
Executive Director
Hampton Newport News Community
Services Board, VACSB
Representative

Staff:

Paul DeLosh, Director
Department of Judicial Services
Office of the Executive Secretary

Anna T. Powers, Specialty Docket
Coordinator
Department of Judicial Services
Office of the Executive Secretary

Elisa Fulton, Specialty Docket
Training Coordinator
Department of Judicial Services
Office of the Executive Secretary

Appendix E

STANDARDS FOR VETERANS DOCKETS IN VIRGINIA

Standard 1: *Administration.* Each docket must have a policy and procedure manual that sets forth its goals and objectives, general administration, organization, personnel, and budget matters.

Standard 2: *Team.* A veterans docket team should include, at a minimum, the judge, Commonwealth's Attorney, Defense Attorney, and a representative from local treatment providers, a Veterans Justice Liaison, a representative from the local Department of Social Services, a veteran mentor coordinator, and a representative from community corrections.

Standard 3: *Evidence-Based Practices.* The docket should establish and adhere to practices that are evidence-based and outcome-driven and should be able to articulate the research basis for the practices it uses.

Standard 4: *Voluntary and Informed Participation.* All docket participants should be provided with a clear explanation of the docket process. Participation in the docket must be completely voluntary. Participants must have capacity to consent to participation in the docket.

Standard 5: *Eligibility Criteria.* Criteria regarding eligibility for participation in the docket must be well-defined and written, and must address public safety and the locality's treatment capacity. The criteria should focus on high risk/high need veterans who are at risk for criminal recidivism and in need of treatment services.

Standard 6: *Program Structure.* A veterans docket program should be structured to integrate alcohol, drug treatment and mental health services with justice system processing. Participants should progress through phases of orientation, stabilization, community reintegration, maintenance, successful completion and transition out of the program. All participants shall be paired with a veteran mentor to navigate them through the program and assist with VA healthcare.

Standard 7: *Treatment and Support Services.* Veterans dockets must provide prompt admission to continuous, comprehensive, evidence-based treatment and rehabilitation services to participants. All treatment providers used by the docket should be appropriately licensed by the applicable state regulatory authority or the equivalent federal governing agency when applicable, and trained to deliver the necessary services according to the standards of their profession.

Standard 8: *Participant Compliance.* Veterans dockets should have written procedures for incentives, rewards, sanctions, and therapeutic responses to participant behavior while under

court supervision. These procedures must be provided to all team members and the participant at the start of a participant's participation in the program.

Standard 9: Confidentiality. Veterans docket programs must protect confidentiality and privacy rights of individuals and proactively inform them about those rights. Information gathered as part of a participant's court-ordered treatment program or services should be safeguarded in the event that the participant is returned to traditional court processing.

Standard 10: Evaluation and Monitoring. Veterans docket programs must establish case tracking and data collection practices. At a minimum, data should be collected regarding 1) Characteristics of the Participants, 2) Clinical Outcomes, and 3) Legal Outcomes. All veteran docket programs are subject to annual fiscal and program monitoring by the Office of the Executive Secretary.

Standard 11: Education. All team members, including the judge, should be generally knowledgeable about mental illness, service related issues, trauma, substance abuse disorders, and pharmacology, as relevant to the docket. All team members should attend continuing education programs or training opportunities to stay current regarding the legal aspects of a veterans' dockets and the unique clinical challenges facing veterans.

