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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,

KIZH

Karl R. Hade

KRH: atp

Enclosure

cc: Division of Legislative Automated Systems

2021 Virginia Specialty Dockets Annual Report

Office of the Executive Secretary Supreme Court of Virginia

PREFACE

Virginia Code §18.2-254.2 (*Appendix A*) requires 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 the 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.

Table of Contents

VIRGINIA SPECIALTY DOCKETS	1
VETERANS TREATMENT DOCKETS	2
Veterans Treatment Dockets Approved to Operate in Virginia	3
Summary of Veterans Treatment Docket Activity	5
Military History	7
Drugs of Choice and Drug Screens	7
Summary of Departures	
REFERENCES	9
APPENDICES	. 11
Appendix A	. 12
Appendix B	
Appendix C	. 16
Appendix D	. 17
Appendix E	. 18

List of Figures

Figure 1: Approved Veterans Treatment Dockets in Virginia, FY 2021	3
Figure 2: Number of Active Veterans Treatment Docket Participants, FY 2017-2021	4
Figure 3: Military Deployment, Veterans Treatment Docket Active Participants, FY 2021	6
Figure 4: Primary Drug of Choice among Veterans Participants, FY 2021	6

List of Tables

Table 1: Approved Veterans Treatment Dockets in Virginia, FY 2021	3
Table 2: Demographics of Veterans Participants, FY 2021	5
Table 3: Veterans Treatment Docket Drug Screens, FY 2021	7
Table 4: Veterans Treatment Dockets Length of Stay, Departures, FY 2021	8

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 multisite 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.²

Across the country, specialty dockets have experienced exponential growth in recent years. The basis for this growth 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's 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 recognized specialty dockets, authorization process to establish a recognized specialty docket, process to expand the types of specialty dockets, oversight structure, operating standards, funding, and evaluation.

The Supreme Court of Virginia by Rule of Court 1:25, Specialty Dockets, recognizes 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 treatment dockets, and (iii) behavioral health dockets, pursuant to the Behavioral Health Docket Act (§18.2-254.3). 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

² <u>https://www.nadcp.org/wp-content/uploads/Research%20Update%20on%20Adult%20Drug%20Courts%20-%20NADCP_1.pdf</u>

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 treatment 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 treatment dockets benefit from support provided by U.S. Department of Veteran Affairs volunteer veteran mentors and veterans' family support organizations.³

VETERANS TREATMENT DOCKETS

There are approximately 20.3 million veterans living in the United States, representing over seven percent of the U.S. population.⁴ Due to the recent 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 has symptoms of a mental health disorder or cognitive impairment, while one in six veterans who served in Operation Iraqi Freedom 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.⁵ 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.⁶

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 docket 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.

OES was awarded an Office of Justice Programs grant under the Adult Drug Treatment Court and Veterans Treatment Court: Strategies to Support Adult Drug Courts and Veterans Treatment Court 2020 solicitation. The grant supports the expansion of veterans dockets throughout Virginia. Specific goals include, but are not limited to, implementing regional Veterans Reentry Search Services (VRSS) training in collaboration with Virginia Department of Veterans Services to aid local jails in identifying

³ <u>https://www.ndci.org/wp-content/uploads/PCP%20Report%20FINAL.PDF</u>

⁴<u>https://www.va.gov/vetdata/Veteran_Population.asp</u>

⁵Department of Defense. "Department of Defense Annual Report on Sexual Assault in the Military." 2018 <u>https://www.sapr.mil/sites/default/files/DoD_Annual_Report_on_Sexual_Assault_in_the_Military.pdf</u>

⁶ <u>Veterans Treatment Courts: A Second Chance for Vets Who Have Lost Their Way (nicic.gov)</u> https://info.nicic.gov/jiv/sites/info.nicic.gov.jiv/files/030018.pdf

inmates or defendants who have served in the United States military; providing additional training and technical assistance opportunities for specialty docket teams to promote compliance with national best practices; and developing a Veterans Docket Tool-Kit and companion information videos, downloadable reference documents, and interactive diagrams.

This report reviews the basic operations and outcomes of Virginia's veterans treatment dockets in FY 2021. 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 specialty 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 veterans treatment dockets currently and limited number of participants in each veterans treatment docket, there were too few cases to extract conclusions.

Veterans Treatment Dockets Approved to Operate in Virginia

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 Treatment 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. In the latter half of 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 2021, there were seven approved and operational veterans treatment dockets. Four veterans treatment dockets 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 1*).

Figure 1. Approved Veterans Treatment Dockets in Virginia, FY 2021



Table 1. Approved Veterans Treatment Dockets in Virginia, FY 2021	
Veterans Treatment Dockets	
Fairfax (3) Circuit, General District, and J&DR District Courts	<i>n</i> = 7
Hampton Circuit Court	
Norfolk Circuit Court	
Prince William General District Court	
Spotsylvania Circuit Court	

This specialty docket report specifically highlights the participants actively enrolled in a veterans treatment docket program during FY 2021. There were 40 active participants, a decrease from the 43 active participants reported in FY 2020 (*see Figure 2*). While the limited data does not lend to conclusion, the decrease in participants could be due to the pandemic restrictions due to Covid-19.

Figure 2. Number of Active Veterans Treatment Docket Participants, FY 2017-2021



The most common offenses committed by active veteran participants prior to referral included DUI, grand larceny, and probation violation. Twenty participants (50.0%) had at least one DUI charge. Nine participants (22.5%) had at least one larceny charge, while eight had at least one probation violation charge (20.0%).

Summary of Veterans Treatment Docket Activity

Of the 40 active veterans treatment docket participants during FY 2021, the majority were White (57.5%) and male (85.0%). More than half of the participants (57.5%) were between 30 and 39 years of age as shown below in *Table 2*.

Referrals: There were 30 referrals to veterans treatment court dockets in FY 2021, a slight decrease from the 32 referrals reported for FY 2020.

Admissions: There were nine newly admitted participants. The admission rate was 30.0%, which was a decrease from the 40.6% admission rate reported in FY 2020.

Gender: Eighty-five percent of participants identified as male, and 15.0% identified as female.

Race and Ethnicity: The majority of program participants were White (57.5%), followed by 42.5% who identified as Black, African American. Participants did not report any other racial identifications. No participant identified as Hispanic.

Age: More than half of the participants (57.5%) were between 30 and 39 years of age.

	Gender	
·	Count	Percent
Female	6	15.0%
Male	34	85.0%
No Data	0	0.0%
Total	40	100.0%
	Race	
	Count	Percent
American Indian or Alaska Native	0	0.0%
Asian	0	0.0%
Black, African American	17	42.5%
Native Hawaiian or Other Pacific Islander	0	0.0%
White	23	57.5%
Other	0	0.0%
Total	40	100.0%
	Ethnicity	
	Count	Percent
Hispanic	0	0.0%
Non-Hispanic	40	100.0%
Total	40	100.0%
	Age	
	Count	Percent
18-29 years old	4	10.0%
30-39 years old	23	57.5%
40-49 years old	6	15.0%
50-59 years old	5	12.5%
60 years and older	2	5.0%
Total	40	100.0%

Table 2. Demographics of Veterans Participants, FY 2021

Note: Data reflect demographic status at the time of referral to veterans treatment docket program. All demographic data are self-reported.

Military History

Branch of Deployment: When referred to the veterans treatment docket, participants were asked to disclose their military deployment history. Nearly two-thirds reported serving in either the Army or Marines. Twenty 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 Participants, FY 2021

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*). Alcohol was reported as the primary drug of choice for 56.5% percent of the participants. Cocaine and other were tied at 17.4%, while 8.7% reported marijuana as their primary drug of choice.



Figure 4. Primary Drug of Choice among Veterans Participants, FY 2021

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

Program Drug Screenings: In FY 2021, there were 1,895 drug screenings conducted for the 37 participants for whom data were available, an average of 51 screenings per participant for the year. Of the 1,895 total screenings, 84.2% (1,596) were negative, a decrease from the 94.4% rate of negative screens reported in FY 2020 (*see Table 3*).

	Count	Percent
Total Screens	1,895	100.0%
Negative	1,596	84.2%
Positive	299	15.8%
Total Participants Tested	37	
Average Number of Screenings per Participant	51	

Table 3. Veterans Treatment Docket Drug Screens, FY 2021

Summary of Departures

Graduation Rates: Among the 40 active veterans treatment docket participants during FY 2021, 16 participants departed the program. Of the 16 departures, 14 graduated. The graduation rate was 87.5%, an increase from the 58.3% reported for FY 2020.

Termination Rates: Two veterans treatment docket participants were terminated from the program in 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 700 days, while those terminated from the program had a mean length of stay of 319 days. The median length of stay for graduates was 742 days, compared to a median length of stay of 319 days for terminated participants (*see Table 4*).

Table 4. Veterans Treatment Dockets Length of Stay, Departures, FY 2021

Mean Length of Stay, in days			
Graduates	700		
Unsuccessful Completions	319		
Median Length of Stay, in days			
Graduates	742		
Unsuccessful Completions	319		

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Rossman, S. & Zweig, J. (2012, May) The Multisite Adult Drug Court Evaluation. Retrieved from <u>https://www.nadcp.org/wp-</u> content/uploads/Multisite%20Adult%20Drug%20Court%20Evaluation%20-%20NADCP.pdf 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.

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:

Par L Hannige Clerk

Appendix C

Specialty Dockets Advisory Committee Membership Roster

Chair: The Honorable Jack S. Hurley, Jr., Judge Tazewell Circuit Court

Members:

The Honorable Penney Azcarate, Judge 19th Judicial Circuit Fairfax County Circuit Court

The Honorable Phillip Hairston, Judge 13th Judicial Circuit Richmond Circuit Court

The Honorable Wilford Taylor, Jr., Judge (Ret.) 8th Judicial Circuit Hampton Circuit Court

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

Staff:

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

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

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

Appendix D

Veterans Docket Advisory Committee Membership Roster

Co-Chairs:

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

&

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

Members:

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

The Hon. Anton Bell Commonwealth's Attorney City of Hampton

Joey Carico, Esquire, Executive Director Southwest Legal Aid

The 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

Maria Jankowski, Deputy Commissioner Indigent Defense Commission The Hon. Lisa Mayne, Judge Fairfax General District Court

The Hon. Ricardo Rigual, Judge 15th Judicial Circuit 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.