

Reporting

SAMHSA Annual Report Template

1. Evidenced Based Practices – Please identify the evidenced based practice(s) implemented for your target of focus
2. Please list and describe, in detail your project’s success in meeting the annual goals and objectives of the required activities as articulated in your grant application.
3. What obstacles did you encounter and what steps did you take to overcome these obstacles? (Please describe in detail.)

BUREAU OF JUSTICE ASSISTANCE
ADULT DISCRETIONARY DRUG COURT PROGRAM—JOINT/ENHANCEMENT
PERFORMANCE MEASURES

The following pages outline general questions and performance measures for the Bureau of Justice Assistance (BJA) *Adult Discretionary Drug Court Grant Program (Drug Court Program)*. The Drug Court Program is designed to build and/or expand capacity at the state, local, and tribal level to reduce crime and substance abuse among high-risk, high-need offenders. The performance measures indicate to what extent grant activities meet the following objective:

Implement, improve, enhance, and/or expand drug court services to reduce substance use and recidivism of drug court participants.

The *Drug Court Program* performance measures are reported in two formats—quantitatively (numeric) and qualitatively (narrative responses). The quantitative data are entered in the BJA Performance Measurement Tool (PMT) for each quarterly activity period, referred to as a reporting period. The qualitative data consist of seven open-ended questions reported in July and January of each calendar year based on activities that occurred during the previous 6-month period. The activities that are entered are specific to the grant being reported.

NOTE: Data entry and reporting in the PMT began with an initial pilot period of measures in October 1, 2011. Subsequently, measures were revised, and data collection and reporting on the finalized measures begins with the October 1 to December 31, 2012, reporting period. Succeeding data entry will occur quarterly, with a 30-day submission period following the close of the reporting period.

In addition, in July and January of each calendar year, the grantee (or direct recipient of funds from BJA) is responsible for creating the *GMS Report* from the PMT to upload into the Grants Management System (GMS). During the nonsubmission periods, you are encouraged to create this report for your records.

If you have questions about your program, please contact your State Policy Advisor (SPA) at <http://www.ojp.usdoj.gov/BJA/resource/ProgramsOffice.html>.

Your response to the questions that follow must be entered in the PMT located at <https://bjapmt.ojp.gov>. If you have any questions about the PMT or performance measures, please call the BJA Performance Tools Help Desk at 1-888/252-6867, or send an e-mail to bjapmt@usdoj.gov.

PLEASE NOTE: THE INFORMATION REPORTED IN THE PMT SHOULD BE BASED ONLY ON BJA-FUNDED ACTIVITIES.

BUREAU OF JUSTICE ASSISTANCE
ADULT DISCRETIONARY DRUG COURT PROGRAM—JOINT/ENHANCEMENT
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GENERAL AWARD INFORMATION

1. Was there **grant activity** in the reporting period? *Grant activity is defined as any proposed activity in the BJA-approved grant application that is implemented or executed with BJA program funds.*
 - A. Yes _____
 - B. No **(Please explain below)**

2. Which one of the following type of areas best describes where your Drug Court program is located? (Please select only one area type.)
 - A. Urban (a large city with 50,000 or more people) _____
 - B. Suburban (territory outside of a large city with a population of 2,500 to 50,000 people or more) _____
 - C. Rural (territory that encompasses all people and housing not included within a suburban, urban, or tribal area) _____
 - D. Tribal (territory that contains a concentration of people who identify with a federally recognized tribe) _____

3. What is the **expected number of participants** the Drug Court program plans to serve with BJA program funds over the life of this award? *The value should correspond to what was reported in the grant application.*
 - A. Enter the expected number of participants _____

4. Is this the last time the grantee is reporting in the PMT before **closing out** this award? *If “yes,” the grantee must complete the Court and Criminal Involvement section.*
 - A. Yes _____
 - B. No _____

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PROGRAM CHARACTERISTICS

5. What type of Drug Court is this grant serving?
- A. Adult Drug Court _____
 - B. Hybrid DWI/Drug Court
 - C. Co-Occurring Court
 - D. Veterans Treatment Court
 - E. Tribal Healing to Wellness Court
 - F. DWI Court
 - G. Other
 - H. If other, please describe: _____
6. What is the date that the drug court first enrolled a participant after this BJA program funding was awarded? *The implementation date for questions 6 and 7 may be the same if the Drug Court program did not exist before this BJA drug court award.*
- A. Enter date (_____/_____/_____) _____
7. What is the date that the Drug Court program first enrolled a participant? *For example, if the Drug Court program was in existence before this BJA program funding, enter the date it first enrolled a participant. The intent of this question is to determine the length of time since program implementation.*
- A. Enter date (_____/_____/_____) _____
8. Does your Drug Court program have a formal policy for graduated sanctions and incentives that is documented in writing and implemented fairly and with certainty in response to participant behavior?
- A. Yes _____
 - B. No _____
9. Does your Drug Court program administer random and observed alcohol and substance abuse testing?
- A. Yes _____
 - B. No _____
10. Does your Drug Court program use evidence-based treatment services? *Evidence-based programs and practices are those demonstrated by the research literature to be effective at reducing substance use among court-involved individuals (a conclusion generally reached through one or more outcome evaluations).*
- A. Yes _____
 - B. No _____

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PROGRAM-LEVEL MEASURES

Amount of Services Added

11. Were your BJA program funds used to add **inpatient** treatment slots during the reporting period? *A drug court slot is a space or position used to determine the number of individuals who can be provided services based on available staff and program funds to deliver services. Inpatient services are services provided in a residential facility.*
- A. Yes _____
 - B. No _____
 - C. If yes, please enter the number of inpatient treatment slots added during the reporting period as a result of this grant. _____
12. Were your BJA program funds used to add **outpatient** treatment slots during the reporting period? *A drug court slot is a space or position used to determine the number of individuals who can be provided services based on available staff and program funds to deliver services. Outpatient services are not provided in a residential facility.*
- A. Yes _____
 - B. No _____
 - C. If yes, please enter the number of outpatient treatment slots added during the reporting period as a result of this grant. _____
13. Were your BJA program funds used to add staff who provide **new case management or offender supervision services** during the reporting period? *Please only report new staff added during the reporting period in which they started offering services to the program (i.e., the reporting period in which they started work).*
- A. Yes _____
 - B. No _____
 - C. If yes, please enter the number of case management or offender supervision staff added during the reporting period as a result of this BJA program funding. _____

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Amount of Services Delivered

14. Were your BJA program funds used to provide **substance abuse treatment services** to drug court participants during the reporting period? *For example, these services might include clinical assessment, residential, outpatient group, outpatient individual, intensive outpatient, outpatient detoxification, addiction receiving facility, substance abuse detoxification (residential), in-home counseling, and aftercare.*
- A. Yes _____
 - B. No _____
 - C. If yes, please enter the number of **NEW drug court participants** who received substance abuse treatment services during the reporting period. _____
15. Were your BJA program funds used to provide **inpatient substance abuse treatment services** during the reporting period?
- A. Yes _____
 - B. No _____
 - C. If yes, please enter the total number of days delivered for inpatient services during the reporting period. _____
16. Were your BJA program funds used to provide **recovery support services** to drug court participants during the reporting period? *For example, these services might include employment, housing, education, mental health, health services such as medical and dental services, pro-social services such as anger and stress management, faith-based services, family counseling, life skills training, mentoring, and other services. One participant may receive more than one category of services during the reporting period. For example, one person could receive a housing referral (housing services) and adult education classes in preparation of receiving a GED during the current reporting period. For this example, please enter '1' in housing services and '1' in education services.*
- A. Yes _____
 - B. No _____
 - C. If yes, please enter the total number of **drug court participants** who received each of the following recovery support service for the first time during the reporting period. *The intent of this question is to see what types of services each unique drug court participant is receiving. Please report only during the first quarter in which the participant receives services and not in subsequent reporting periods if services are received for more than one reporting period.*
 - i. Employment services _____
 - ii. Housing services _____
 - iii. Education services _____
 - iv. Mental health services _____
 - v. Health services (includes medical and/or dental services) _____
 - vi. Trauma treatment _____
 - vii. Veteran services _____

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- viii. Pro-social services _____
- ix. Other services _____
- x. If other services, please explain _____

17. What other program components are these BJA program funds supporting?

- A. Offender Supervision/Case Management _____
- B. Equipment _____
- C. Training _____
- D. Evaluations _____
- E. MIS _____
- F. Aftercare Support _____
- G. Enhancing Risk/ Assessment Screening _____
- H. Performance Measures Standards _____
- I. Other _____
- J. If other, please explain _____

Medication Assisted Treatment

The following questions ask about any Medication Assisted Treatment (MAT) participants may be receiving within your program during the reporting period. BJA supports the right of individuals to have access to appropriate MAT under the care and prescription of a physician. BJA recognizes that not all communities may have access to MAT due to lack of physicians who are able to prescribe and oversee clients using anti-alcohol and opioid medications.

18. If your treatment program includes medication assisted treatment (MAT), which of the following medications are you utilizing, regardless of BJA funding? *Check all that apply.*

- A. _____ We do not provide MAT (Skip next question)
- B. _____ We do not have access to MAT (Skip next question)
- C. _____ Naltrexone (Vivitrol®, depot naltrexone)
- D. _____ Buprenorphine or Buprenorphine/Naloxone (Bup/NX) (Suboxone®)
- E. _____ Methadone

19. Of the total participants enrolled in your program, how many were deemed eligible for medication-assisted treatment (MAT) and of those eligible, how many received MAT during the reporting period?

- A. Individuals Eligible for MAT: _____
- B. Individuals receiving at least one MAT treatment: _____

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ADULT DISCRETIONARY DRUG COURT PROGRAM—JOINT/ENHANCEMENT
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PARTICIPANT-LEVEL MEASURES

Screening and Program Intake

20. Please enter the number of drug court candidates who were **screened** during the reporting period. *Drug Court candidates are those identified at the time of arrest or referred by criminal justice professionals (i.e., prosecutor, defense attorney, probation officer, judge, etc.) but who may not necessarily be deemed eligible for participation. A screening determines eligibility and appropriateness for participation in a drug court.*
- A. Number of drug court candidates who were **screened** during the reporting period _____
21. Of those **screened**, please enter the number of individuals who did not enroll in the Drug Court program during the reporting period.
- A. Number of individuals who did not enroll in the Drug Court program during the reporting period. _____
22. Of those **screened** and **did not enroll** in the Drug Court program, please enter the number of such individuals based on the following categories. *If an individual falls into multiple categories, please select the category that best applies.*
- A. Participant Refused Entry _____
- B. Prosecutor Objection _____
- C. Defense Objection _____
- D. Judicial Objection _____
- E. Out of Jurisdiction _____
- F. Arrest, Conviction, or Incarceration on Another Charge _____
- G. No Drug Problem _____
- H. Exclusionary Prior Non-Violent Offense _____
- I. Violent History _____
- J. Mental Health Diagnosis that Cannot be handled by the Court _____
- K. Insufficient Risk (Low Risk) _____
- L. Ineligible for VA services _____
- M. Accident involving injury _____
- N. Candidate did not complete screening _____
- O. Candidate waiting for program slot (will enroll in a subsequent quarter) _____
- P. Other _____
- Q. If other, please explain _____

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23. Of those **screened and did not enroll** in the Drug Court program, please enter the number of such individuals based on the following demographic information. Enter the **race, ethnicity, and gender** of each individual determined to be ineligible for Drug Court participation during the reporting period. *The number entered should be an unduplicated count, and the sum of each demographic group should equal the number of individuals who did not enter the Drug Court program. If not, please check for data entry error. Hispanics or Latinos should be counted in the race category that best describes their racial identity, including White, Black or African American, Asian, American Indian or Alaska Native, Pacific Islander or Native Hawaiian, or Multiracial. Please see census.gov if you have any questions regarding classifying race.*

A. Enter the **ethnicity and gender** of those **screened and did not enroll** in the Drug Court program.

Ethnicity and Gender				
Measures		Males	Females	Gender Unknown
A	Hispanic or Latino/a			
B	Non-Hispanic or Latino/a			
C	Unknown			

B. Enter the **race and gender** of those **screened and did not enroll** in the Drug Court program.

Race and Gender				
Measures		Males	Females	Gender Unknown
A	White			
B	Black or African American			
C	Asian			
D	American Indian or Alaska Native			
E	Pacific Islander or Native Hawaiian			
F	Multiracial			
G	Unknown			
H	Other			

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Risk Assessment

24. Please enter the number of **newly admitted** drug court participants who were administered a **risk and need assessment** during the reporting period. *A risk and need assessment is an instrument to help identify factors that may lead a participant to reoffend. It pinpoints needed services to minimize those risks. Only include those individuals who have been newly admitted to the Drug Court program during the reporting period.*

A. Number of newly admitted drug court participants who were administered a **risk and need assessment** during the reporting period _____

25. Please name the **risk assessment instrument** that is used to assess risk and need.

26. Of those **newly admitted** participants who were administered a risk and need assessment during the reporting period, please enter the number of such individuals who were identified as having **high criminogenic** risks and high abuse treatment needs.

A. Number of participants who were identified as having **high criminogenic** risks and high abuse treatment needs _____

Number of Drug Court Participants Receiving Services

27. Please enter the **total** number of participants enrolled in the Drug Court program at the end of the reporting period. *Enrolled participants include new admissions (i.e., newly admitted) and those previously admitted in a reporting period and who continue to participate.*

A. **Total number of participants** enrolled in the Drug Court program at the end of the reporting period _____

28. Has the Drug Court Program admitted new participants into the Drug Court program during the reporting period?

A. Yes _____

B. No **(Please explain below)**

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29. Please enter the number of **newly admitted** drug court participants during the reporting period. *New participants are unique individuals who were not previously enrolled in the Drug Court program in previous reporting periods. Individuals who exit the Drug Court program without completion and are readmitted or who have graduated and reentered may be counted twice. For the first reporting period that the program becomes operational, report all participants enrolled as NEW.*

A. Number of **newly admitted** drug court participants during the reporting period. _____

30. Please enter the **race, ethnicity, and gender** of each participant **newly admitted** to the Drug Court program during the reporting period. For the first reporting period, include all participants enrolled in the Drug Court program.

The number entered should be an unduplicated count, and the sum of each demographic group should be equal to the sum of the newly admitted participants in the program during the reporting period. If not, please check for data entry error. Hispanics or Latinos should be counted in the race category that best describes their racial identity, including White, Black or African American, Asian, American Indian or Alaska Native, Pacific Islander or Native Hawaiian, or Multiracial. Please see census.gov for questions regarding classifying race and ethnicity.

A. Enter the **ethnicity and gender of newly admitted** participants in the Drug Court program.

Ethnicity and Gender				
Measures		Males	Females	Gender Unknown
A	Hispanic or Latino/a			
B	Non-Hispanic or Latino/a			
C	Unknown			

B. Please enter the **race and gender of newly admitted** participants in the Drug Court program.

Race and Gender				
Measures		Males	Females	Gender Unknown
A	White			
B	Black or African American			
C	Asian			
D	American Indian or Alaska Native			
E	Pacific Islander or Native Hawaiian			
F	Multiracial			
G	Unknown			
H	Other			

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Program Completion and Judicial Interaction

31. Please enter the number of drug court participants who **successfully completed** all program requirements, excluding financial obligations, during the reporting period. *The number entered should represent only those participants who successfully completed all the requirements of the Drug Court program during the reporting period. Those being held because of financial obligations (e.g., owing money to the court for their drug testing) should still be counted.*

A. Number of drug court participants who **successfully completed** all program requirements during the reporting period _____

32. Of those who **completed all program requirements**, from start to finish, please indicate when these participants graduated from the program within the following time frames. *The sum of all of these categories should be equal to the total number of successful completions in question 30. If not, please check for data entry errors.*

- A. 0 to 6 months _____
- B. 7 to 12 months _____
- C. 13 to 18 months _____
- D. 19 to 24 months _____
- E. 25 months or more _____

33. Please enter the **race, ethnicity, and gender** of each participant who successfully completed all program requirements, excluding financial obligations, during the reporting period. *The number entered should be an unduplicated count, and the sum of each demographic group should be equal to the sum of the participants who successfully completed the program during the reporting period. If not, please check for data entry error. Hispanics or Latinos should be counted in the race category that best describes their racial identity, including White, Black or African American, Asian, American Indian or Alaska Native, Pacific Islander or Native Hawaiian, or Multiracial. Please see census.gov if you have any questions classifying race.*

A. Enter the **ethnicity and gender** of drug court participants who **successfully completed** the Drug Court program.

Ethnicity and Gender				
Measures		Males	Females	Gender Unknown
A	Hispanic or Latino/a			
B	Non-Hispanic or Latino/a			
C	Unknown			

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B. Enter the **race and gender** of participants who **successfully completed** the Drug Court program.

Race and Gender				
Measures		Males	Females	Gender Unknown
A	White			
B	Black or African American			
C	Asian			
D	American Indian or Alaska Native			
E	Pacific Islander or Native Hawaiian			
F	Multiracial			
G	Unknown			
H	Other			

34. Please enter the number of individuals **who exited the program unsuccessfully** in the categories below. *Participants should not fit in more than one category, so choose the option that best represents why these individuals did not complete the program.*

Incompletes		
Measure		Number
A	Number of participants no longer in the program due to court or criminal involvement (technical violation, arrest, conviction, revocation, reincarceration)	
B	Number of participants no longer in the program due to a lack of engagement (no-shows and nonresponsive participants)	
C	Number of participants no longer in the program due to absconding	
D	Number of participants no longer in the program due to relocating or case transfer	
E	Number of participants no longer in the program due to death or serious illness	
F	Number of participants who did not complete the program for other reasons (please specify below) <hr/> <hr/> <hr/>	

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35. Of those drug court participants **who exited the program unsuccessfully**, please indicate the number of these participants who left within the following time frames (from start of the program to termination). *The sum of all of these categories should be equal to the total number of incompletes in question 32. If not, please check for data entry errors. Please round up to the nearest month category.*

- A. 0 to 3 months _____
- B. 4 to 6 months _____
- C. 7 to 9 months _____
- D. 10 to 12 months _____
- E. 13 to 18 months _____
- F. 19 or more months _____

36. Please enter the **race, ethnicity, and gender** of each participant who exited the program unsuccessfully during the reporting period. *The number entered should be an unduplicated count, and the sum of each demographic group should be equal to the sum of the participants in question 33. If not, please check for data entry error. Hispanics or Latinos should be counted in the race category that best describes their racial identity, including White, Black or African American, Asian, American Indian or Alaska Native, Pacific Islander or Native Hawaiian, or Multiracial. Please see census.gov if you have any questions regarding classifying race.*

A. Enter the **ethnicity and gender** of drug court participants **who exited the program unsuccessfully**.

Ethnicity and Gender				
Measures		Males	Females	Gender Unknown
A	Hispanic or Latino/a			
B	Non-Hispanic or Latino/a			
C	Unknown			

B. Enter the **race and gender** of participants **who exited the program unsuccessfully**.

Race and Gender				
Measures		Males	Females	Gender Unknown
A	White			
B	Black or African American			
C	Asian			
D	American Indian or Alaska Native			
E	Pacific Islander or Native Hawaiian			
F	Multiracial			
G	Unknown			
H	Other			

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Alcohol and Substance Involvement

37. Of those enrolled in the Drug Court program at least **90 days**, please enter the total number of participants tested for alcohol, non-prescribed medications, or illegal substances during the reporting period. *This should represent the total number of drug court participants who were tested for the presence of alcohol or illegal substance use. The number entered should be an unduplicated count only of participants enrolled in the program at least 90 days who were tested for alcohol or illegal substances, and it should be equal to or greater than the number of participants who tested positive. If not, please check for data entry error.*

A. Total number of participants tested for alcohol, non-prescribed medications, or illegal substances during the reporting period _____

38. Of those enrolled in the Drug Court program at least **90 days**, please enter the number of participants who tested positive for the presence of alcohol, nonprescribed medications, or illegal substances during the reporting period. *The number entered should be an unduplicated count only of participants enrolled in the program for at least 90 days who tested positive for alcohol, nonprescribed medications, or illegal substances, and it should be equal to or less than the total number of participants tested. If not, please check for data entry error. Alcohol and substance use information should be based on documented tests rather than self-reported information from program participants. Include all participants who received services during the reporting period, regardless of whether they successfully completed the program, exited the program without completion, or are currently enrolled in the Drug Court program.*

A. Number of participants who tested positive for the presence of alcohol, non-prescribed medications, or illegal substances during the reporting period _____

COURT AND CRIMINAL INVOLVEMENT

The next set of questions is about court and criminal involvement for Drug Court Program participants. Note that individuals can be included in more than one category. For example, a Drug Court participant could be arrested and have a conviction; thus, the individual should be counted in both categories. If an ex-offender has multiple arrests or convictions, only count that individual once. **This section is to be completed at the close of the grant.** *These questions will appear and go into effect starting with the January to March 2013 reporting period.*

39. Since the **start** of this **BJA program funding**, please enter the number of participants who:
Are still participating in in the Drug Court program? _____
Have successfully completed the Drug Court program? _____
Exited the Drug Court program unsuccessfully? _____

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40. Since the start of the BJA award, enter the **total number of participants** who have had a **criminal court** and/or **criminal involvement event**. *A participant can be counted in more than one category (i.e., an individual can have an arrest and a conviction). However, do not count the frequency of events (i.e., number of arrests and convictions). Pending charges that the individual had before entering the program should not be counted. New charges that are dropped and/or not prosecuted should **not** be counted.*

Criminal Involvement Since Start of BJA Award for Drug Court Program Participants and Former Participants				
Measure		Charged for Committing a New Criminal Offense	Conviction for a New Criminal Charge	Revocation of Terms of Supervised Release
A	Participants who are still participating in the program			
B	Participants who successfully completed the program in the past 12 months			
C	Participants who successfully completed the program 12–24 months ago			
D	Participants who unsuccessfully exited the program			

41. How was the information obtained for those ex-offenders who were **arrested** on a new criminal charge? *Select the best option that describes how the information was obtained.*

- A. The grantee has direct access to this information through its court information system.
- B. The grantee has a Memorandum of Understanding (MOU), a Memorandum of Agreement (MOA), or a data sharing agreement with a correctional agency that has access to this information.
- C. The grantee conducts public record jail/prison searches online.
- D. The grantee entered unofficial data (through word of mouth or from participants who reported the incident).
- E. The grantee does not have access to official justice information.
- F. Other (please specify) _____

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42. How was the information obtained from those ex-offenders who were convicted of a new crime? *Select the best option that describes how the information was obtained.*
- A. The grantee has direct access to this information through its court information system.
 - B. The grantee has a Memorandum of Understanding (MOU), a Memorandum of Agreement (MOA), or a data sharing agreement with a correctional agency that has access to this information.
 - C. The grantee conducts public record jail/prison searches online.
 - D. The grantee entered unofficial data (through word of mouth or from participants who reported the incident).
 - E. The grantee does not have access to official justice information.
 - F. Other (please specify) _____

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NARRATIVE QUESTIONS

The following questions must be answered in January and July of each calendar year. Please answer based on your experience for the last 6-month period. You can use up to 5,000 characters for each of your responses.

1. What were your accomplishments within this reporting period?

2. What goals were accomplished, as they relate to your grant application?

3. What problems/barriers did you encounter, if any, within the reporting period that prevented you from reaching your goals or milestones?

4. Is there any assistance that BJA can provide to address any problems/barriers identified in question 3?

- A. Yes (Please explain below) ____
- B. No (Go to question 5)

5. Are you on track to fiscally and programmatically complete your program as outlined in your grant application?

- A. Yes (Go to question 6) ____
- B. No (Please explain below)

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6. What major activities are planned for the next 6 months?

7. Based on your knowledge of the criminal justice field, are there any innovative programs/accomplishments that you would like to share with BJA?

THANK YOU FOR PARTICIPATING!



**Superior Court of California
COUNTY OF ALAMEDA**

Court Report

Date: Click or tap to enter a date.	Client Name: Click or tap here to enter text.
Completed by: Click or tap here to enter text.	Court Case Manager Name, Telephone, & FAX:
Agency: Click or tap here to enter text.	
Contact Phone #: Click or tap here to enter text.	

- Outpatient** (less than 9 hours)
 Intensive Outpatient (9+ hours)
 Residential
 Recovery Residence

Is this client receiving individual therapy from a mental health clinician? Yes No

Has this client been prescribed psychiatric medication? No Currently taking Prescribed, but not taking

Last Two Weeks:

Client's attendance is:	Excellent <input type="checkbox"/> (Attended or Excused Absence for all Groups/ Activities)	Fair <input type="checkbox"/> (Attended or Excused Absence for most Groups/ Activities)	Deficient <input type="checkbox"/> (Missed most Groups/ Activities)	<input type="checkbox"/> Did Not Attend Groups/ Activities
Was the client engaged in treatment?	Very Strong <input type="checkbox"/> (Actively participates in all Groups/ Activities)	Fairly Strong <input type="checkbox"/> (Actively participates in most Groups/ Activities)	Weak <input type="checkbox"/> (Did not participate actively in most Groups/ Activities)	<input type="checkbox"/> Not Engaged at All
Is the client improving in treatment?	Making Excellent Progress <input type="checkbox"/>	Making Good Progress <input type="checkbox"/>	Not Making Much Progress <input type="checkbox"/>	<input type="checkbox"/> Not Making any Progress

Substance Use Disorder Stage of Change:

Pre-contemplation
 Contemplation
 Preparation
 Action
 Maintenance

What is the client currently working on in treatment? Click or tap here to enter text.

How can the court support the client in treatment? Click or tap here to enter text.

Comments (Optional): Click or tap here to enter text.

Are one or more children in treatment with parent? Yes No



**Superior Court of California
COUNTY OF ALAMEDA**

Status Update:	<input type="checkbox"/> In treatment	<input type="checkbox"/> Completed Click or tap to enter a date.	<input type="checkbox"/> Terminated or left program Click or tap to enter a date.
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Week One: Drug Test 1

Date: Click or tap to enter a date.

Test Result:

Negative Excused Miss No Show, Unexcused Miss Diluted/ Adulterated
Positive

Substance, if Positive: Alcohol Amphetamines Benzodiazepine Cocaine Opiates
THC Other Drug: Click or tap here to enter text.

Comments: Click or tap here to enter text.

Week One: Drug Test 2

Date: Click or tap to enter a date.

Test Result:

Negative Excused Miss No Show, Unexcused Miss Diluted/ Adulterated
Positive

Substance, if Positive: Alcohol Amphetamines Benzodiazepine Cocaine Opiates
THC Other Drug: Click or tap here to enter text.

Comments: Click or tap here to enter text.

Week Two: Drug Test 1

Date: Click or tap to enter a date.

Test Result:

Negative Excused Miss No Show, Unexcused Miss Diluted/ Adulterated
Positive

Substance, if Positive: Alcohol Amphetamines Benzodiazepine Cocaine Opiates
THC Other Drug: Click or tap here to enter text.

Comments: Click or tap here to enter text.



**Superior Court of California
COUNTY OF ALAMEDA**

Week Two: Drug Test 2

Date: Click or tap to enter a date.

Test Result:

Negative Excused Miss No Show, Unexcused Miss Diluted/ Adulterated

Positive

Substance, if Positive: Alcohol Amphetamines Benzodiazepine Cocaine Opiates

THC Other Drug: Click or tap here to enter text.

Comments: Click or tap here to enter text.



OFFICE OF COLLABORATIVE COURT SERVICES ALAMEDA COUNTY

NAME:	{Photo}	DOB:
FIRST COURT APPEARANCE:		PFN:
PHASE:		CASE/DOCKET #:
PHASE ENTRY DATE:		1.
TREATMENT PROGRAM:		2.
MODALITY:		3.
MH SERVICES RECOMMENDED: <input type="checkbox"/> YES <input type="checkbox"/> NO		4.

PARTICIPANT STATED GOALS AND PLAN

Participant wants to stay clean and sober, find housing, and get a job.
This is how the court can support this plan:

TREATMENT GOALS

Treatment reports that participant is working on distress tolerance (not cussing out staff), honesty, and getting along with their peers in program.

PROGRESS NOTES

Participant is currently in the treatment program, is participating, and is improving. Participant has an appointment at a service provider, or is transferring programs, or has exited the treatment program on a particular date. Case manager is working with the participant to address the following specific needs: X

MENTAL HEALTH NOTES

Participant is engaged with the following mental health services, or has the following appointments, or is not engaging in the following mental health recommendations. No specific diagnosis needs to be reported on this document.

RECOMMENDATIONS

Case Manager is recommending the following responses to participant behavior: participant should complete motivational assignment and read in court. Participant should not phase up this week. Participant should contact case manager twice a week until further notice.

GIFT CARDS

NEGATIVE UA TESTS: YES NO

IN TREATMENT/RECOVERY: YES NO



OFFICE OF COLLABORATIVE COURT SERVICES ALAMEDA COUNTY

Week of:	Court	Test 1	Test 2		Week of:	Court	Test 1	Test 2
1/7/19	Yes	Neg	THC, Coc, Opi		2/11/19	Yes	Neg	Neg
1/14/19	N/C	THC, Coc	THC		2/18/19	N/C	Neg	Neg
1/21/19	Yes	No Show	No Show		2/25/19	No	Neg	Neg
1/28/19	N/C	THC	THC		3/4/19	N/C	Neg	Neg
2/4/19	No	THC	Adulterated		3/11/19	Yes	Neg	Neg
1/7/19	N/C	Neg	Neg		3/18/19	N/C	Neg	Neg
1/14/19	Yes	Neg	Neg		3/25/19	Yes	Neg	Neg
1/21/19	N/C	No Show	No Show		4/1/19	N/C	Neg	Neg
1/28/19	Yes	THC	THC		4/8/19	No	Neg	Neg
2/9	N/C	THC	Adulterated		4/15/19	N/C	Neg	Neg