

THINKING ABOUT PHASE IN YOUR TREATMENT COURT

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Why Have Phases

Structure

Incremental Progress

Recovery Process

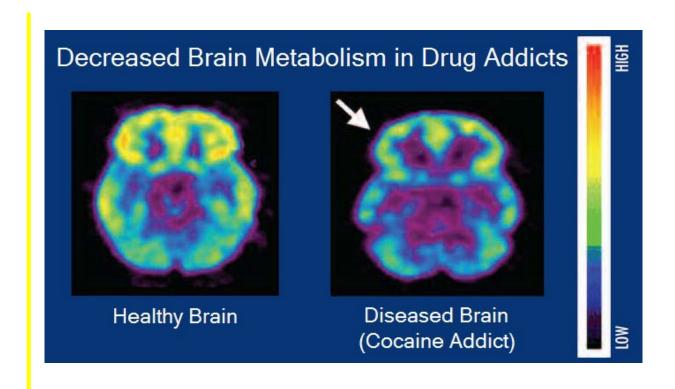


Why Structure

Research shows that patients with frontal cortex damage had impaired decision-making abilities.

https://www.apa.org/monitor/jun01/cogcentral.html

Cognitive functioning simply refers to our thinking, or mental activity. Drugs and alcohol change how your brain functions and gets worse with extended use.





Tools Help

Memory

Motor Functioning

Mental Illiness

Below are a few points of research in relation to various chronic drug disorders and their effects on cognition. (Addiction and Cognition by Thomas J. Gould, Ph.D.)

- cocaine—deficits in cognitive flexibility
- amphetamine—deficits in attention and impulse control
- **opioids**—deficits in cognitive flexibility
- alcohol—deficits in working memory and attention
- cannabis—deficits in cognitive flexibility and attention
- nicotine—deficits in working memory and declarative learning





Sequence and Timing

Early Phase (Responsivity)

- Housing
- Stabilizing
 - Mental Health symptoms
 - Cravings
 - Inability to feel pleasure
 - Withdrawal

Interim phases (Criminogenic)

- Anti-social thought patterns
- Negative peer associations
- Reducing family conflict
- Substance use disorders





Sequence and Timing

Later Phase (Maintenance)

- Vocational assistance
- Educational assistance
- Parent training
- Daily living skills



Proximal and Distal

Behaviors that participants should be capable of doing, even if difficult at first.

Behaviors that participants cannot do readily or require substantial effort to complete.



Critical Questions

Phase	Proximal Behaviors	Distal Behaviors
1		
2		
3		
4		
5		

Each phase builds upon the next to help the participant gain tools and transition from highintensity involvement with treatment and court to low court involvement, high involvement in the recovery community. Write out the proximal and distal behaviors to focus on for each phase to aid in this journey.



Critical Questions

List the responsivity needs of your target population you need to address in the first phase:

(for example, stable housing, medical, mental illness, PTSD, TBI)

List how your phase structure addresses criminogenic needs?

(for example, substance use disorders, criminal thinking patterns, family conflict, and delinquent peer affiliations)



Critical Questions

List how your phase structure addresses maintenance needs?

(for example, job skills, illiteracy, or prosocial activities)

What is advancement based upon? Is it number of days?

Mastery of skills? Is it objective or subjective? Does everyone have equal chance?



Phase 1 Requirements



	e: Date Reviewed:
Re	eview each requirement with staff and initial you understand the expectation
	I will attend court every week at:
	I will follow my treatment plan.
	I will comply with supervision and meet weekly with my supervision officer on time. I will notify my supervision officer of any conflicts at least one hour prior to my appointment in case of an emergency.
	I will allow law enforcement and/or supervision officers associated to the treatment court program into my residence for home visits.
	I will submit to random urine analysis testing as determined by the treatment court team. UA testing call number: Color:
—	I will reside in a safe environment that supports my recovery. I will keep my supervision officer informed if my residency changes.
	I will obtain a medical assessment as directed by my treatment team.
	I acknowledge my curfew is at 9 p.m.
	e reviewed the requirements for phase 1 and understand my responsibilities to the ment court program.
Client	Signature Date

Phase Sheets

These documents outline the requirements to help participants know what to complete to move to next level.

Ownership is placed on the participants to complete and turn in phase application



Reporting Forms

- Tool to keep participant organized between status hearings
- Participants can communicate with the team about any needs or highlights during the week

TURN IN SHEET TO C	COURT COORDINATOR ON MOND	
		AY BEFORE COURT
Ne	xt court date:	- 8
Appointments (check if at		
☐ Supervision Appointm	ent:	
	0.0000000000000000000000000000000000000	
Other Appointment:		
Call Color Line Daily (5	555) 555-555 (color:)
⊥ Tues ∟ We	ds ⊥Thurs _Fri ⊥Sat ∟Su	ın ⊔ Mon
Treatment Groups (chec	ok if atlanded)	
The second secon	Day/Time:	
	bay, rime	
Counselor:	Day/Time:	
Information Learned:_	\$3 - 80	
☐ Counselor:	Day/Time:	
Peer Recovery Groups	(check if attended)	
	Day/Time:	
	Day/Time:	
	Day/Time:	
How did I meet my goa		
The art and Time et my goa		
Highlight from Week:		



Phase Up Applications

Clients identify their goals, what they learned and next steps.

Counselors, case manager, probation, recovery coaches validate client achievements.

Application for Phase 4



Name:	Date Turned in:
Current Address:	Phone:
	Email:
You MUST meet the follo	owing criteria to Phase Up: (place an "X" if task is completed)
You have been in Phase 3 for	a minimum of 90 days. Date entered phase 3:
☐ You have a minimum of 45 co	onsecutive days of sobricty. What is your sobriety date:
You are engaged in treatmen Counselor/Case Mar	nt and attending regularly? nager verification signature:
Are you in compliance with s	supervision? nager verification signature:
☐ Engaged in recovery support	t groups? Home group:
Engaged in pro-social activit	ies? What:
☐ Identify 3 of your biggest str	uggles in Phase 3:
0	
•	
0	a would like to accomplish in the next phase:
•	
75	

Date

Describing the Phases



Chance

If nothing changes, nothing changes

Challenge

If you are going through hell, keep going."
Winston Churchill

Choice

"It always seems impossible until it is done." Nelson Mandela

Growth

Growth is a willingness to make a change." Bill W



Recovery Process

Recovery is a PROCESS of change through which individuals improve their health and wellness, live self-directed lives, and strive to reach their potential.





How will you incorporate the 4 Dimensions of Recovery into your structure?

Dimension	Phase 1	Phase 2	Phase 3	Phase 4	Phase 5
Health					
Home					
Purpose					
Community					

Personal This includes an individual's physical and human capital. Physical capital is the available resources to fulfill a person's basic needs. Human capital relates to a person's abilities, skills, and knowledge, like problem-solving, education, self-esteem, and the ability to navigate challenging situations to achieve goals. Resources: Community This includes attitudes, policies, and resources specifically related to helping individuals resolve substance use disorders.

Potential Barriers:	
Participant Engagement:	
	Potential Barriers:

Participant Engagement:

Resources:

Social

The resources related to intimate relationships with friends and family, relationships with people in recovery, and supportive partners. It also includes the availability of recovery-related social events.

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Potential Barriers:

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Participant Engagement:

Recovery Capital Staffing Questions

Which recovery capitol domain is the participant working on this week?

What is the participant's need they are addressing?

Are there any barriers they are experiencing?

How can the team help?

Checklist

- □ What is the need?
- Which resource best meets the need?
- What barriers exist to access resource?
- □ **How** will you get the participant to engage in the resource?

Recovery Management

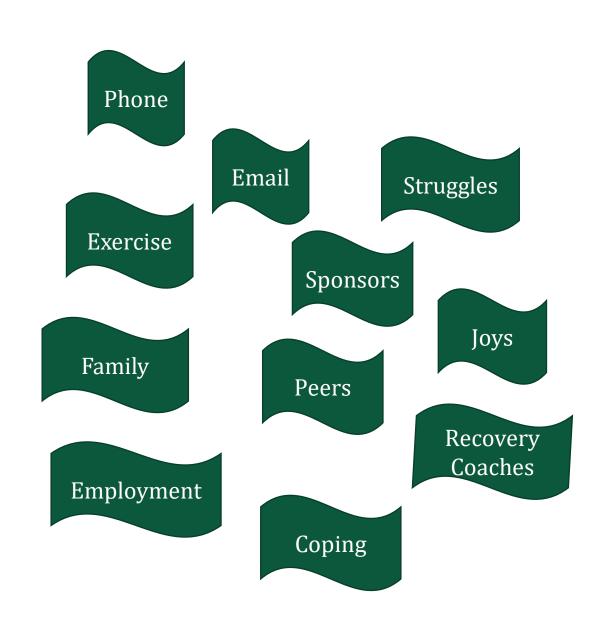
Return to treatment sooner

Receive more treatment

Reduce use and problems

Increase days abstinent







QUESTIONS?

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