

TELESERVICES: HAPPENING NOW!

Problem-solving courts are using technology to transform the way they operate. Drug courts, in particular, are embracing technologies like videoconferencing, smartphone apps, portable drug testing devices, and many others to deliver treatment services, supervise clients, and train staff. Collectively, these innovative uses of technology are known as “teleservices.” In 2015, the Center for Court Innovation (the Center) published “The Future is Now: Enhancing Drug Court Operations Through Technology,” a practitioner monograph that explores emerging uses of technology and highlights some of the early teleservices initiatives in problem-solving courts. The following year, the Center assisted four jurisdictions in planning and implementing pilot teleservices projects. This document offers an overview of the pilot projects, highlights promising practices, and offers recommendations for implementing teleservices initiatives in other jurisdictions.

1. USING TELESERVICES TO SERVE MORE PEOPLE IN NEED



Yellowstone County Veterans Court
Billings, Montana

Montana has one of the largest veteran populations in the United States. But the state also has one of the lowest population densities in the country, so these veterans tend to be spread across great distances and often are not within reach of needed services. This geographic isolation poses a challenge to the Yellowstone County Veterans Court—also known as CAMO (Court Assisting Military Officers)—which is one of only three veterans treatment courts in Montana. CAMO sought to use technology to reach more justice-involved veterans who live in isolated parts of the state.

The Center helped to kick off CAMO’s ambitious pilot project by facilitating a two-day planning workshop. The CAMO team included the judge, a veterans justice outreach officer, a community outreach worker, and representatives from the prosecutor’s office, defense bar,

probation, and treatment providers. The team planned a new teleservices track that allows for remote treatment, court appearances, and supervision. In addition, the team developed a remote screening and referral process for accepting cases from other counties. This process included a questionnaire for assessing potential participants’ “technology readiness.”

Today, CAMO uses Montana’s statewide Polycom videoconference system to facilitate remote participation. When a defendant from another county wishes to be considered for CAMO, the court coordinator administers a comprehensive risk-need assessment via video. Defendants also have the opportunity to observe court proceedings remotely before deciding to enter CAMO. Once a defendant has been accepted into the program, the court uses videoconferencing to conduct regular status hearings, and participants engage in one-on-one counseling sessions by video as well. There is even a Polycom app that allows participants to connect to the court and counselors using their phones. The project has been so successful that CAMO has purchased an additional Polycom unit to begin Moral Reconciliation Therapy (MRT) classes and statewide mentor training.

To enhance supervision of remote participants, CAMO uses the CheckBAC smartphone app to monitor alcohol use and track participants’ location. The app notifies participants when they are required to submit a breath test. Within 20 minutes of receiving an

alert, participants must blow into a hand-held police-grade breathalyzer device connected to the phone via Bluetooth. In the case of a positive result or missed test, the app immediately notifies court staff using a secure connection. Court staff can review breathalyzer results, schedule tests, and monitor defendant location.

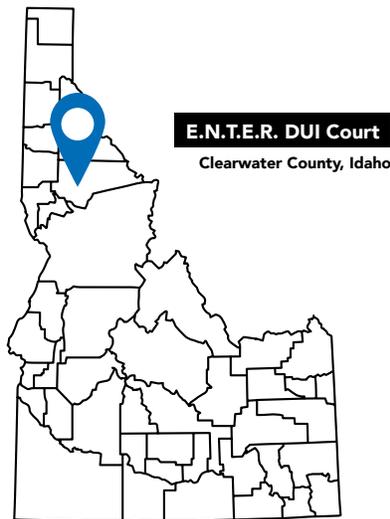
CAMO also uses text messaging to offer participants motivational support. Participants receive individualized text messages that include court announcements, updates, reminders, notifications about community events, and motivational recovery messages. The messages are sent daily through Live Inspired, an automated online messaging system. The system, which can generate generic or customized recovery messages,

has been a valuable resource for clients and is an example of how a simple and inexpensive teleservices initiative can support participant recovery.

CAMO is supported by the Drug Court Case Management System, a propriety, web-based case management tool designed specifically for drug courts. This system, which is used by a number of treatment courts around the country, helps court professionals effectively track a drug court case over time, manage treatment, and monitor drug testing and other case information. It also allows team members to enter information 24/7, facilitating more effective team collaboration and information sharing.

**2. BUILDING
TELESERVICES
THROUGH
INNOVATIVE
PARTNERSHIPS**

In Idaho, a new teleservices-based DUI court is being planned to address the state’s high rates of death and injury caused by impaired driving. Idaho is largely a rural state, and many court-involved residents do not have access to a DUI court. Moreover, individuals who lose their driving privileges after DUI arrests have difficulty accessing treatment services and other resources. To address these barriers, the state transportation department proposed creating a teleservices-based DUI court to serve the mountainous logging communities of north-central Idaho. Such a court would improve access to treatment and make it easier to supervise defendants in the community. In addition, technology could enable court teams to meet regularly and receive training without traveling great distances.



The new initiative, called “E.N.T.E.R. DUI Court” (Employing New Technology to Extend the Reach of DUI Court), leverages an existing partnership between Clearwater County and the neighboring Nez Perce Tribe. The tribe has the technological infrastructure to deliver internet service to the remote communities in the region, and it was already providing internet service to the county court building. As part of the new project, the tribe agreed to provide internet service to support remote treatment delivery for E.N.T.E.R. DUI Court participants. The tribe will house the necessary equipment in a designated facility and supply court participants with state-funded tablet computers. In return, the system will be configured to enable access to substance use treatment for the underserved tribal community.

The Center for Court Innovation supported the E.N.T.E.R. DUI Court initiative by facilitating a planning workshop for the project’s key stakeholders in Clearwater County. During the workshop, the planning team—which was comprised of representatives from the court, the state technology and transportation departments, and the Nez Perce Tribe—created an action plan for implementing the new DUI court and strengthening the partnerships between the tribe, the court, and community-based agencies. These partnerships will provide a solid foundation for implementing the project once necessary state and federal funding is secured.

3. PROMOTING BEST PRACTICES THROUGH TELESERVICES

McHenry County is a rural area located 63 miles outside of Chicago. The county currently has two problem-solving courts: an adult drug court and a mental health court. These courts, however, grapple with a shortage of residential treatment resources in the community. Participants who need residential treatment typically must utilize far-away facilities, making it nearly impossible for them to attend court. Accordingly, participants are usually excused from court appearances during their time in residential treatment. Adult drug court best practices, however, emphasize the importance of the judge-participant relationship in supporting the best possible client outcomes. Missed court appearances make it more difficult for the participant and the judge to build a positive relationship.

The 22nd Judicial Circuit Office of Special Projects, which oversees the specialty courts in McHenry



County, identified videoconferencing as a solution to these challenges. The courts partnered with the Gateway Foundation's Lake Villa Treatment Center to enable clients to attend court hearings through videoconferencing. The court purchased a webcam and a monitor for the courtroom, while the treatment facility set aside a dedicated HIPAA-compliant space (a room with an opaque door containing all of the necessary technology components) equipped with OmniJoin videoconferencing software. Participants attending court hearings from the treatment facility are able to build rapport with the judge and view the judge's interactions with the other treatment court participants.

This model has already been successful in a nearby jurisdiction. In Illinois' 19th Judicial Circuit, Lake County Adult Probation Services added teleservices to its treatment model in 2009. The county partnered with Haymarket Center, a residential treatment provider in Chicago, to ensure that participants in residential treatment have access to court proceedings via Skype. This approach is not without challenges. For instance, the court must make special arrangements to take participants into custody at the residential treatment facility when such a court sanction is required. Despite this challenge, however, the project has been a success—since its inception, approximately 150 participants have appeared for court from the treatment facility using teleservices.

4. USING A NEEDS ASSESSMENT TO DESIGN A TELESERVICES INITIATIVE



In 2013, the West Virginia state legislature passed a bill requiring all judicial circuits to have an adult drug court. The state's Division of Probation Services, a branch of the Administrative Office of the Supreme Court of Appeals, is responsible for the development and oversight of adult drug courts, including ensuring that adequate treatment services are available for adult drug court participants. In West Virginia, access to treatment is hindered by a shortage of evidence-based treatment providers and the geographic barriers posed by the state's vast, often mountainous terrain.

To address these challenges, the Division of Probation Services sought to partner with local day reporting centers, where justice-involved individuals could

go to receive evidence-based substance use treatment delivered remotely from a centralized treatment provider located in Charleston. Center for Court Innovation staff helped the key stakeholders develop a detailed survey, which was distributed to 29 adult drug courts across the state. The survey assessed current technological capabilities, available evidence-based treatment interventions, and the courts' capacity to implement a new teleservices initiative. The results helped shape the scope

of the project by identifying suitable sites for teleservices based on demonstrated need and existing resources.

Following this needs assessment, West Virginia's planning committee began drafting policies and procedures, roles and responsibilities, state regulations, HIPAA compliance protocols, and insurance requirements. Equipment installation has begun in five sites. The final step will be to train behavioral health staff for program implementation.

5. ADDRESSING RACIAL DISPARITIES IN THE JUSTICE SYSTEM THROUGH TELESERVICES



Missouri's Office of State Courts Administrator (OSCA) contacted the Center for Court Innovation to help develop a teleservices initiative to deliver culturally-relevant services to the state's underserved African-American population. Through its statewide data tracking system, OSCA discovered that African-American males in Missouri are excluded from drug courts at a disproportionately higher rate than other racial and ethnic groups. Moreover, African-American males who are admitted to drug court graduate at a lower rate than their white counterparts. To address these disparities and improve outcomes for African-American participants, OSCA identified Habilitation Empowerment Accountability Therapy (H.E.A.T.) as a culturally-relevant intervention that could be offered remotely through teleservices.

H.E.A.T. is a holistic, manualized, cognitive behavioral therapy intervention designed for African American males between the ages of 18-29. It aims to reduce recidivism and drug use by focusing on spirituality, community, family, and self. The program also includes a special emphasis on overcoming trauma, ambivalence, and resistance. H.E.A.T. is currently offered through in-person sessions in St. Louis and Greene counties, and it has produced positive outcomes in both places. Based on this success, OSCA sought to test the remote delivery of H.E.A.T. through teleservices.

The Center and OSCA are working closely with Darryl Turpin, co-creator of H.E.A.T., to pilot H.E.A.T. remotely. Currently, the state of Missouri does not have a trained H.E.A.T. facilitator or sufficient group size needed to offer in-person H.E.A.T. outside St. Louis and Greene counties. Through teleservices, however, participants will be able to join a group led by a trained facilitator located in St. Louis. In OSCA's pilot program, the facilitator will integrate remote participants into a group via a HIPAA-secure videoconference platform. This initiative will address a service gap by giving rural participants access to a much-needed service while also using properly-trained facilitators and ensuring fidelity to the H.E.A.T. curriculum.

6. PROVIDING SERVICE DELIVERY OPTIONS THROUGH TELESERVICES



Coconino County

Arizona

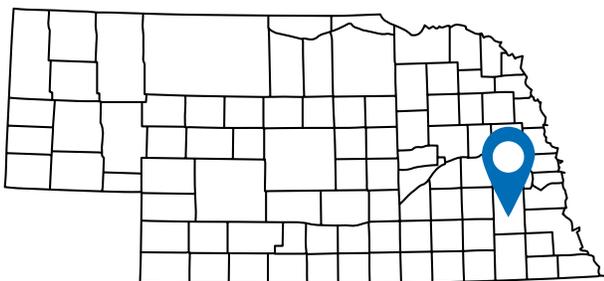
Treatment courts may look to other criminal justice agencies for teleservices inspiration. Probation departments, in particular, have embraced teleservices in recent years. One promising program can be found in Flagstaff, Arizona, where the Coconino County Adult Probation Department oversees a three-pronged teleservices program called Coconino Online Probation Education (“COPE”). COPE is a BJA-funded program with project sites in Flagstaff, Page, Tuba City, and Williams.

COPE expands services for probationers through three teleservices components:

- Computer kiosks located in sites throughout the county. Each computer provides access to LRS Systems, a self-directed online educational curriculum including modules on anger management, traffic safety, and substance misuse.
- Moral Reconciliation Therapy (MRT) group sessions via video conference.
- Peer mentoring services via videoconference, phone, and text messaging.

As in other rural communities where transportation by car is essential, Coconino County struggles with DUI and other drug cases that result in a loss of driving privileges. It is not uncommon for probationers to hitchhike on dirt roads to attend appointments up to 60 miles away. Through teleservices, COPE connects probationers to their probation officers, as well as cognitive behavioral therapy, employment readiness, skills building, mentors, and mentoring specialists. Since implementation in 2014, nearly 100 probationers have been referred to COPE.

7. OVERCOMING LANGUAGE BARRIERS WITH TELESERVICES



State Probation Department

Nebraska

In Nebraska, teleservices is being used to overcome language barriers and bring services to Spanish-speaking probationers. The state probation department recognized a need for Spanish-speaking Moral Reconciliation Therapy in a number of communities. None of these communities, however, had enough potential participants to support

an in-person MRT group. The probation department, therefore, began videoconference-based Spanish MRT groups for probationers in South Sioux City, Lexington, and Hastings. This initiative, which began in October 2016, brings together participants who wouldn’t otherwise have access to MRT in their primary language. Course materials were translated into Spanish with careful attention to maintaining the fidelity to the MRT model. Participants in the Spanish MRT program have offered positive feedback, indicating that they feel their horizons have been expanded and that they appreciate interacting with participants from other communities and cultures.

TELESERVICES CHECKLIST

As with any new project, preparation is critically important when planning and implementing a teleservices initiative. The following checklist is designed to help justice system practitioners lay the foundation for a successful teleservices project.

- **How can teleservices support current drug court operations?** Teleservices can be used to enhance drug court operations in several ways, including delivering remote treatment and other services, supervising participants in the community, facilitating long-distance drug testing, and allowing participants to make remote court appearances. Consider whether your court could use teleservices in these areas, or others.
- **How can teleservices fill gaps in treatment?** Teleservices can address continuum of care treatment gaps by delivering treatment interventions that are not available locally. Evidence-based gender, trauma, and culturally-appropriate interventions, as well as recovery support services, can be provided to individuals or groups via teleservices.
- **What technology is readily available, and what technology needs to be acquired?** A technology needs assessment can help to identify the kinds of technologies that are currently available in your area as well as those that are needed to fill service gaps. The assessment should conclude with recommendations for technology infrastructure enhancements and equipment needs to support the proposed teleservices initiative.
- **Which stakeholders should be included in the planning process?** Stakeholder input is critical to the success of a justice system teleservices initiative. The planning process should include representatives from court administration, technology staff, treatment court team members, and community partners.
- **What funding resources are needed to support the initiative?** Funding needs will vary based on your current technology infrastructure, as well as the equipment and staffing requirements of your specific teleservices initiative. Take care to develop a thorough cost projection for your project during the planning phase. Also note that some technology-based treatment services may be billable to Medicaid or private insurance, while other services may require funding through grants or other sources.
- **What HIPAA compliance concerns need to be addressed?** Teleservices projects are subject to the same participant confidentiality laws as traditional treatment modalities. Therefore, teleservices initiatives must be compliant with the regulations contained in 42 CFR Part 2 and ensure that participant release forms meet all regulatory requirements.
- **What policies and procedures need to be established?** Teleservices projects should develop their own policies and procedures that address state and local regulations, HIPAA requirements, information sharing, service delivery expectations, and protocols for participant and facilitator behavior.
- **What training is needed for court staff and service providers?** All stakeholders engaged in the teleservices project should receive adequate training on equipment setup and use, troubleshooting strategies, teleservices delivery methods, confidentiality requirements, and all policies and procedures developed for the project. In addition, treatment providers and other individuals who will facilitate teleservices-based communications should be trained in de-escalation techniques to diffuse conflicts and manage group dynamics.

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