

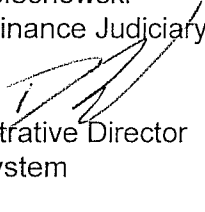
MEMORANDUM

ALASKA COURT SYSTEM

Telephone: (907) 264-8265

Facsimile: (907) 264-8291

TO: Senator Bill Wielechowski
Chair, Senate Finance Judiciary Subcommittee

FROM: Doug Wooliver 
Deputy Administrative Director
Alaska Court System

DATE: March 5, 2019

RE: Questions from February 20th Subcommittee Meeting

This memo addresses questions raised in the Wednesday, February 20, 2019 Senate Finance Judiciary Subcommittee. Please let me know if you would like additional information.

Provide the criminal filing and case clearance statistics for the past 10 years.

The attached list shows the felony and misdemeanor filings and the clearance rates for those cases for the past 10 years.

What percentage of inmates in the Department of Corrections suffers from a diagnosed mental illness or substance abuse disorder?

In 2014 Hornby Zeller Associates produced a study entitled "Trust Beneficiaries in Alaska's Department of Corrections." The study was commissioned by the Mental Health Trust Authority and the Department of Corrections. According to that study, on a single day, June 30, 2012, 65% of the DOC population was a beneficiary of the mental health trust. Over the course of the year 40% of those booked into a correctional facility were mental health trust beneficiaries. The Department of Corrections may have additional or more recent data.

What treatment programs are available in the Department of Corrections?

The attached program list was provided by the Department of Corrections, and includes a list of all substance use disorder treatment services provided by the department. It details the type of programs available, where they are provided, each program's capacity, the length of each program, and who provides the treatment services.

Have we seen an increase in therapeutic court participants who enter the program as a result of marijuana-related criminal behavior?

Although we don't have data on this, anecdotally our staff has not noticed a change.

Are some addictions more successfully treated than others?

Although we don't have specific data on success for each type of substance abuse, there are well-developed, FDA approved pharmaceuticals that aide in the treatment of alcohol and opioid addition, which have been shown to increase the likelihood of treatment success. There are no such medications yet for methamphetamine, marijuana, or cocaine. Importantly though, a great many therapeutic court participants have more than one layer of substance abuse. For example, law enforcement, therapeutic court supervisors, and treatment providers all state that most of those with opioid addictions also have methamphetamine addictions. Medication can help with the opioids, but not the methamphetamine.

What can be done to increase participation in therapeutic courts?

There are several aspects of therapeutic courts that could be enhanced or changed to increase the role therapeutic courts play in the criminal justice system. Although most of these changes would require coordinated efforts with other justice agencies, additional staffing would enable some immediate improvements.

There are two people who help oversee the statewide development and oversight of all of the court's therapeutic courts. When our statewide coordinator (Michelle Bartley) began her work in 2006 we had six courts in five locations. We now have 12 courts in six locations. The management and growth of our therapeutic courts is limited by the time our statewide office has to develop them. A deputy statewide coordinator would greatly benefit the overall statewide growth and management of existing courts and allow more time to focus on the time-consuming task of developing new ones.

Our growth potential would be further enhanced with the addition of two new probation officers. One would assist the substance abuse court in Palmer, the other would allow the Fairbanks substance abuse court to expand to add a veteran's court. Neither of these courts can expand without additional staff.

Increased use of therapeutic courts would also benefit from more systemic and long-term changes. Those include, changing the way participants are referred to therapeutic courts, increasing the institutional training for those whose jobs include working with therapeutic courts, and increasing the availability of safe and sober housing. And as courts expand, additional resources would be need for treatment, and housing.

Change the admission practices

The legislature could set out objective criteria in the statutes and require that anyone who meets those criteria be referred for a treatment assessment to see if he or she would be appropriate for therapeutic court. If the person is found to be a good candidate, the person could be recommended to the program. This approach could lead to more participation because it would replace the current system of case-by-case determinations with a system where any

person who meets the criteria, and who is assessed as appropriate for treatment would be able to access the program. However, an approach that removes much of the current discretion over admissions may meet with some resistance unless both the eligibility criteria and the program specifics are carefully drafted to the satisfaction of all concerned.

Increase training for judges, lawyers, and treatment providers

One of the most important variables in a successful therapeutic court is a team that is trained in and supports the therapeutic court process. This is particularly true given that these courts have significant turnover of staff. If we were to increase the participation in therapeutic courts we would need to increase our training of those responsible for making those courts work. This training needs to be an ongoing and regular part of therapeutic courts.

Increase the availability of safe and sober housing for participants.

One of the most important resources needed for success in a therapeutic court is the availability of safe and sober housing so that the participant is in an environment that facilitates rather than frustrates his or her treatment and recovery. The lack of such housing is a frequent impediment to both expanding courts and in adequately serving current participants. In Bethel, for example, some participants have had to stay in the Department of Corrections' halfway house during their program participation, which is not the most appropriately therapeutic environment.

Can therapeutic court be mandated?

New Jersey appears to be the only state that mandates participation in its drug court. That program mandates that offenders who meet specific criteria must submit to a diagnostic assessment to determine if the person is suitable for treatment through the drug court program. The judge may waive this mandate if the judge is "clearly convinced" that the assessment would not serve any useful purpose. If the judge doesn't block the assessment, and if the person meets is assessed as appropriate, the person is required to participate in the program.

It is not clear why no other states have followed New Jersey, but if Alaska were to adopt this model, we would likely need to phase it in slowly so that resources could be expanded to meet the growth. And as with a statutory eligibility presumption discussed above, unless both the eligibility criteria and the program specifics are carefully drafted, there would likely be resistance to a mandatory program.

Alaska Court System

10-Year Review of Criminal Case Filings, Dispositions, and Clearance Rates

2/25/2019

(Column Reference)	(a)	(b)	(c)	(d)	(e)	(f)
Fiscal Year	Superior Court Felony Filings	Superior Court Felony Dispositions	Clearance Rates	District Court Misdemeanor Filings	District Court Misdemeanor Dispositions	Clearance Rates
FY09	5,821	5,888	101.2%	31,705	31,613	99.7%
FY10	6,380	6,110	95.8%	32,467	32,882	101.3%
FY11	6,454	6,218	96.3%	32,353	32,810	101.4%
FY12	6,274	6,296	100.4%	29,824	30,013	100.6%
FY13	6,675	6,284	94.1%	29,562	29,692	100.4%
FY14	6,448	6,155	95.5%	28,009	28,088	100.3%
FY15	6,457	6,553	101.5%	25,887	26,658	103.0%
FY16	6,618	6,514	98.4%	24,100	23,206	96.3%
FY17	6,198	6,005	96.9%	19,030	19,697	103.5%
FY18	7,186	6,140	85.4%	21,232	19,271	90.8%
FY19 (6 Months)	3,753	3,133	83.5%	12,426	10,647	85.7%
5-Year Total	68,264	65,296	95.7%	286,595	284,577	99.3%

ADOC Substance Use Disorder Treatment Services

FY19

Residential Substance Abuse Treatment (RSAT) Level 3.5

Gender	Location	Capacity	Est. Length of Program	Provider
Female	Hiland Mountain Correctional Center	24	6 months	Salvation Army Clitheroe Center (SACC)
Male	Wildwood Correctional Complex	40	6 months	Cook Inlet Council on Alcohol and Drug Abuse (CICADA)

Intensive Out Patient Substance Abuse Treatment (IOPSAT) Level 2.1

Gender	Location	Capacity	Est. Length of Program	Provider
Female	Hiland Mountain Correctional Center	15	15 weeks	SACC
Male	Goose Creek Correctional Center	105	15 weeks	SACC
Male	Anvil Mountain Correctional Center	10	15 weeks	Norton Sound Health Corporation
Female/Male	Anchorage CRCs	24	15 weeks	SACC
Male	Nome Seaside CRC	10	15 weeks	Norton Sound Health Corporation
Female/Male	Fairbanks Northstar CRC	24	15 weeks	Fairbanks Interior Aids Association
Male	Juneau Glacier Manor CRC	24	15 weeks	Gastineau Human Services

Dual Diagnosis Intensive Out Patient Substance Abuse Treatment (DD IOPSAT) Level 2.1

Gender	Location	Capacity	Est. Length of Program	Provider
Male	Goose Creek Correctional Center	10	20 weeks	SACC
Female	Hiland Mountain Correctional Center	10	20 weeks	SACC
Male	Anchorage Correctional Complex West	10	20 weeks	SACC

Psycho-Educational (PsychEd) Level 0.5

Gender	Location	Capacity	Est. Length of Program	Provider
Male	Goose Creek Correctional Center	30	6 weeks	SACC
Female/Male	Wildwood Correctional Center	30	6 weeks	CICADA
Female/Male	Hiland Mtn. Correctional Center	30	6 weeks	SACC
Female/Male	Yukon Kuskokwim Correctional Center	15	6 weeks	Bethel Family Clinic

Assessments Only (Fee for Service)*

Gender	Location	Number	Provider
Female/Male	Anchorage Correctional Complex	Up to 3 per week	SACC
Female/Male	Fairbanks Correctional Center	Up to 5 per week	Fresh Start
Female/Male	Mat-Su Pretrial Facility	2+ per week	TBD
Female/Male	Lemon Creek Correctional Center	2+ per week	Gastineau Human Services
Male	Spring Creek Correctional Center	2+ per week	Akeela, Inc.
Female/Male	Yukon Kuskokwim Correctional Center	Up to 3 per week	Bethel Family Clinic

Medication Assisted Treatment (MAT) Vivitrol

Gender	Location	Point of Contact
Female/Male	Anchorage Correctional Complex	Kody Kimberlin, DOC
Female/Male	Hiland Mtn. Correctional Center	James Christmas, SACC
Female/Male	Fairbanks Correctional Center	PO C. Study
Male	Goose Creek Correctional Center	Carey Ecker, SACC
Female/Male	Wildwood Correctional Center	Victoria Clark, CICADA
Female/Male	Lemon Creek Correctional Center	Pending-Gastineau Human Services

*Fee for Service- Local contract providers conduct assessments in the facility at an agreed upon rate. The providers identified on this list all have a contract with DOC. Fee for service assessments occur typically at facilities with no treatment and/or no permanent counselor staff.