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# Initiative to Develop and Test Juvenile Drug Treatment Court (JDTC) Guidelines

## JDTC Court Self-Assessment Validation Report

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Melissa Scardaville, Roger Jarjoura, Titus Payne, John Kochanek

JULY 2022



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JULY 2022



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This report (and the validation study it documents) was developed as part of the Initiative to Develop and Test Juvenile Drug Treatment Court (JDTC) Guidelines (Award Number 2014-DC-BX-K001) funded by the Office of Juvenile Justice and Delinquency Prevention (OJJDP) and managed by the National Institute of Justice, Office of Justice Programs, U.S. Department of Justice. Opinions or points of view expressed are those of the author(s) and do not necessarily reflect the official position or policies of the U.S. Department of Justice.

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## Introduction

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The American Institutes for Research (AIR) collaborated with other researchers and technical assistance providers in the development of a Court Self-Assessment (CSA) for Juvenile Drug Treatment Courts (JDTC) based on the [JDTC Guidelines](#). As part of a study to validate the CSA, AIR researchers worked together with researchers from the University of Cincinnati to prepare materials to guide data collection and organize information collected from individual JDTCs. The CSA was then completed by staff members at each of 35 JDTCs across several U.S. states. This report is a companion to the technical report written by Christopher J. Sullivan and Nicole McKenna.

The validation study took place over the course of a one-year period from the summer of 2020 to the summer of 2021. The version of the CSA that was tested had been revised based on cognitive testing with a sample of JDTCs and input from an expert panel. As an appendix to the Sullivan and McKenna technical report, we include the version of the CSA used with the JDTCs participating in the study, and the data collection and coding protocols. In total, we enrolled 35 JDTCs in the validation study across seven different states and territories. In two of the states, we enrolled nearly all the currently operating JDTCs. The JDTCs were diverse in terms of how long they had been in operation, how long the current judge was in their role, whether they were located in an urban or rural jurisdiction, and the number of youth they were currently serving. While the sample is not representative of a well-defined population of JDTCs, the diversity of the sample makes the results broadly applicable to JDTCs in the United States in 2021.

The CSA was designed to include numerous indicators for each of the guidelines. We created binary measures that reflected the degree to which a particular JDTC “met” or “did not meet” the criteria for each indicator. In addition, for each guideline, the relevant items were then summed to create a composite that reflects each of the JDTC’s overall adherence to that guideline.

This report is organized by guideline statement. For each guideline, a table is provided that shows the full set of indicators that the CSA was designed to measure. Several results are shown for each indicator which factored into decisions made about revisions to the CSA as a result of the validation process. In the first column, we identify the indicator. In the second column, we specify the location of that indicator on the CSA instrument. Then in column three, we report the percentage of the JDTCs in our sample that met the criteria for that indicator (i.e., the percent adherence). In the fourth column, we report the percent of the responses on the

CSA that were revised based on our data collection process. Higher revision rates reflect items that JDTCs found confusing to understand without assistance. We gave careful consideration to potential revisions based on the revision rates. The results shown in the final two columns are from the reliability analyses conducted by Sullivan and McKenna. The item-rest correlation was used to identify those indicators that did not seem to fit with the other indicators for the particular guideline. As item-rest correlations approached zero, this was also a consideration in decisions to remove or revise items on the CSA. Finally, we report the Kuder Richardson (KR) 20 (a measure of the internal consistency (i.e., reliability) of a set of items to represent a single construct (i.e., a guideline), if the indicator were to be removed. As a summary measure for each Exhibit, we provide the KR20 statistic from the reliability analysis for that guideline.

We also provide two graphs for each guideline. The first chart plots the total scores for the guideline among all 35 JDTCs in our sample. The overall score for each guideline is simply the percentage of criteria met out of the total number of indicators possible. In interpreting the scores relative to each guideline, we offer the following framework:

- If a JDTC scored between 75-100%, the JDTC's practices have **high** alignment with the guideline.
- If a JDTC scored between 50-74%, the JDTC's practices have **moderate** alignment with the guideline.
- If a JDTC scored below 49%, the JDTC's practices have **low** alignment with the guideline, and might be a focus for improvement.

The second chart presented under each guideline is another look at the distribution of scores for each indicator where data collection by the research team did not challenge the accuracy of the response on the CSA by the JDTC. These data are also reported in the Exhibit in each section, but as the revision rates were among the strongest evidence to inform revisions to the validated CSA, we highlight these results in a graphical presentation.

In the discussion that follows for each guideline, we describe the findings and point to revisions to the CSA that are reflected in the validated instrument.

## Guideline-Specific Results

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### Guideline 1.1.

**The JDTC team should be composed of stakeholders committed to the JDTC’s philosophy and practice, and to ongoing program and system improvement. The team should include collaborative relationships with community partners.**

As shown in Exhibit 1, the first three indicators of Guideline 1.1, which capture the teams’ commitment to JDTC philosophy and practices through Memorandum of Understandings (MOU), showed high item-rest correlation ( $r = 0.894-0.902$ ). The final indicator (5a) that speaks to collaborative relationships did not correlate ( $r = -0.149$ ) with the other items. Indeed, removing 5a from this guideline improves the fit, with the KR20 coefficient rising to 0.959. Analyses showed that the treatment providers were always a member of the team, and this lack of variability affected the correlation with the other items. In further consideration of the intent behind the guideline, we looked closer at whether the JDTCs included community partners other than the treatment providers, and this will be the modification to the scoring of indicator I4.

While almost all (97.1%) of JDTC’s adhered to the criteria for Indicator 4, fewer courts (57.1% – 62.9%) adhered to the remaining three indicators. Adherence across Guideline 1.1 was effectively bimodal for our sample, with slightly more than half ( $n=18$ ) at 90% compliance and most of the remainder ( $n=13$ ) at 30% or lower compliance (see exhibit 2). Across all indicators, as shown in exhibit 3, more than 90% of courts did not need to revise their answers to the relevant items on the CSA, suggesting that the statements should remain as they are written in the CSA.

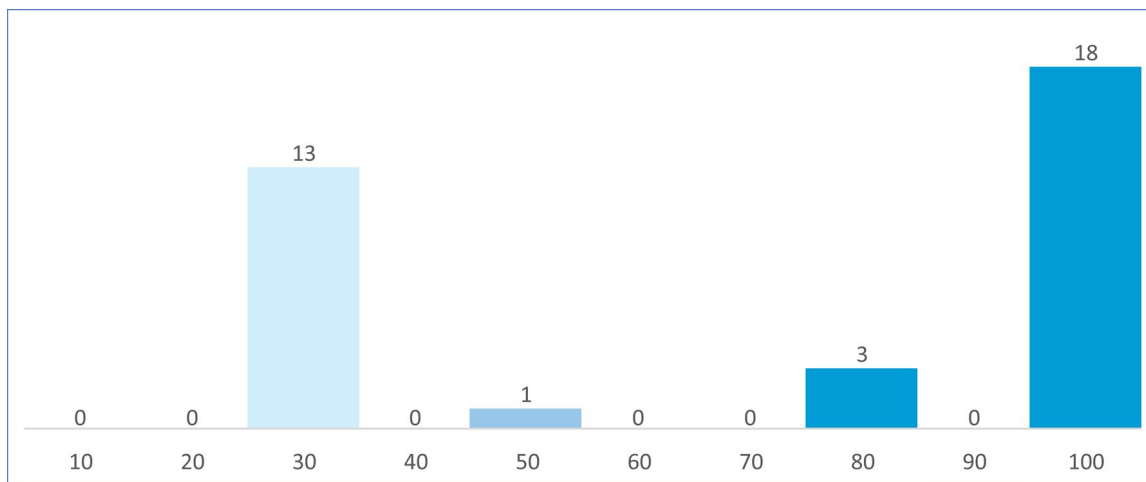
**Resulting Changes to Validated Court Self-Assessment:** The scoring on I4 will be adjusted so that the criterion is that JDTCs have community partner(s) as active team members. These community partners will be in addition to treatment providers that may already participate as members of the JDTC team. This is not a change to the item on the CSA but is reflected in the scoring for this guideline.



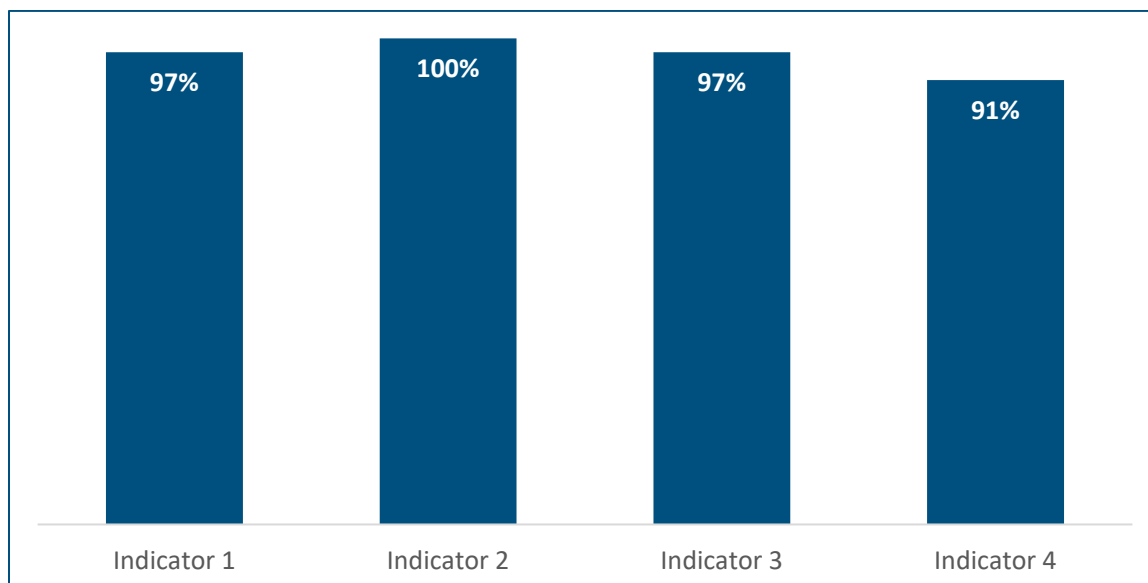
### Exhibit 1: Indicator-Specific Results for Guideline 1.1

Indicator	CSA Item	Percent Adherence	Percent Revised	Item-rest correlation	KR20 w/out Item
The JDTC has a MOU that requires team members to commit to the JDTC’s philosophy and/or practice. (I1)	2d.a	57.1	2.9	0.894	0.642
The JDTC has a MOU that requires team members to commit to ongoing system improvement within the JDTC. (I2)	2d.b	57.1	0.0	0.894	0.642
The JDTC has a MOU that requires team members to commit to being collaborative. (I3)	2d.c	62.9	2.9	0.902	0.639
The JDTC includes at least one of the following as team members: (1) clinical treatment supervisor or liaison; (2) substance use treatment provider representative(s); (3) mental health treatment provider representative and/or (4) community partner(s). (I4)	5a	97.1	8.6	-0.149	0.959
<b>KR20 Coefficient</b>					<b>0.823</b>

### Exhibit 2. Distribution of Adherence Scores for Guideline 1.1



### Exhibit 3. Distribution of Scores with no Need for Revision for Guideline 1.1



## Guideline 1.2.

**The roles for each member of the JDTC team should be clearly articulated.**

The indicators for Guideline 1.2 were moderately associated with item-rest correlation ranging from  $r = 0.305$  to  $0.550$  (see Exhibit 4). The KR20 coefficient was acceptable ( $0.687$ ) and removing indicators did not substantially improve K20. Over half of the courts in the sample adhered to the first two indicators, which addressed defining team member roles and information sharing. The third indicator – written position descriptions – had the lowest item-rest correlation ( $r = 0.305$ ) as well as the highest percentage of courts ( $22.9\%$ ) who revised their CSA answer once we discussed the intent of the question (see also Exhibit 6). Indicators 4 and 5, which asked about formal orientations, had the lowest adherence. As shown in Exhibit 5, courts in the sample varied wildly in overall adherence to Guideline 1.2, ranging from less than  $10\%$  to more than  $90\%$  compliance.

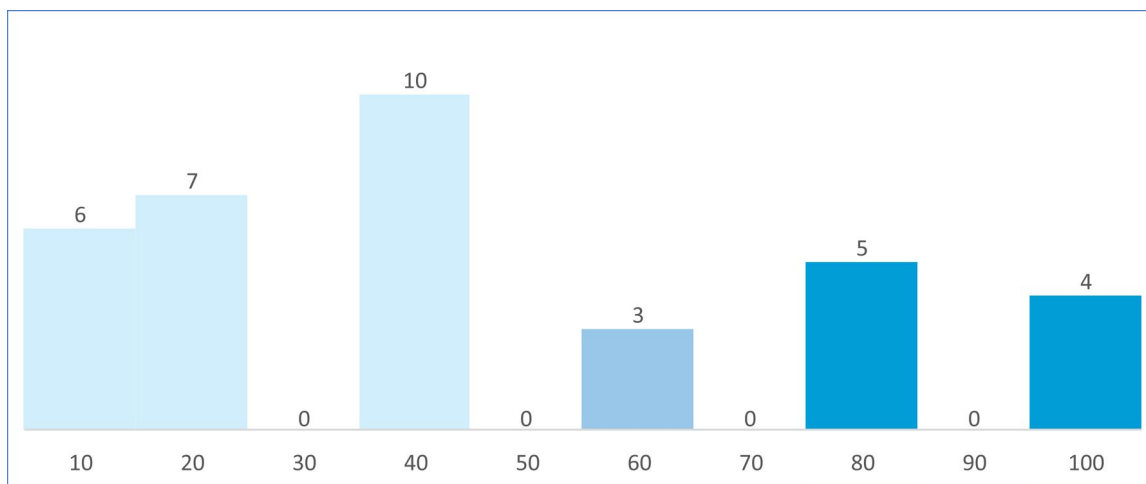
Given that over one in five courts in this sample needed to revise Indicator 3 and that Indicators 1 and 2 already address JDTC team roles, item 5b was deemed to be redundant and the more complicated of the items addressing the question of whether JDTC team member roles were articulated. Interviews with representatives from courts in the sample highlighted the confusion over what “formal” meant regarding orientation. To address this issue, we took into consideration whether a formal orientation was required to achieve the intent of Guideline 1.2, or whether some process of orienting new team members to their roles might be sufficient.

**Resulting Changes to Validated Court Self-Assessment:** The decision was made to remove item 5b from the CSA and is no longer to be scored under this guideline. In addition, item 6a will be removed from the CSA and item 6b.c will be revised to focus on orienting team members to their roles rather than whether there was a specific formal orientation. Thus, there are now to be only three indicators for Guideline 1.2.

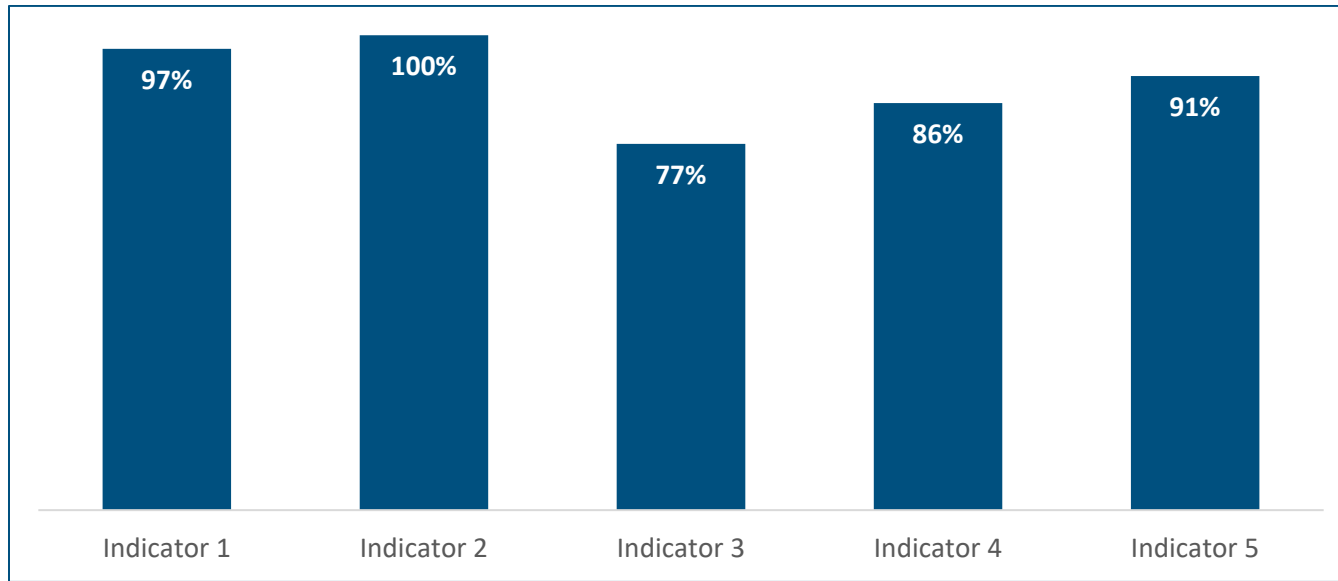
#### Exhibit 4: Indicator-Specific Results for Guideline 1.2

CSA Question	CSA Item	Percent Adherence	Percent Revised	Item-rest correlation	KR20 w/out Item
The JDTC has a MOU that defines the role and duties expected of each team member. (I1)	2b	54.3	2.9	0.546	0.589
The JDTC has a MOU that specifies what information will be shared between team members. (I2)	2c	60.0	0.0	0.550	0.587
All JDTC team members have written position descriptions. (I3)	5b	40.0	22.9	0.305	0.695
The JDTC holds a formal orientation for new team members. (I4)	6a	22.9	11.4	0.419	0.648
The JDTC’s formal orientation covers team member roles. (I5)	6b.c	40.0	8.6	0.403	0.654
<b>KR20 Coefficient</b>					<b>0.687</b>

#### Exhibit 5. Distribution of Adherence Scores for Guideline 1.2



**Exhibit 6. Distribution of Scores with no Need for Revision for Guideline 1.2**



### Guideline 1.3.

The JDTC team should include participants from local school systems, with the goal of overcoming the educational barriers JDTC participants face.

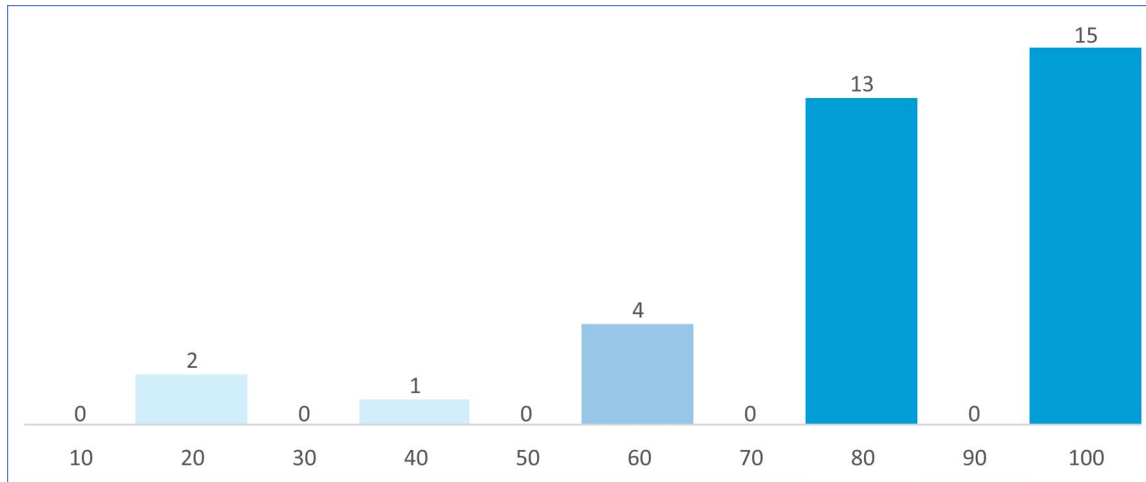
As seen in Exhibit 7, all indicators positively correlated with one another except indicator 2 (identifying a contact at the youth’s school). KR20 coefficient also improved from 0.473 to 0.773 when that indicator is removed. Additionally, all indicators except #2 had very few or no changes between the original and revised CSA answers (see Exhibit 9). About 80% of courts in this sample had 75% or higher compliance with Guideline 1.3, with about two out of five courts having near or perfect compliance (see Exhibit 8).

**Resulting Changes to Validated Court Self-Assessment:** Given this lack of fit for indicator 2, item 7h.a will be removed from the CSA and is no longer scored under this guideline. Thus, on the validated instrument, there are four indicators for Guideline 1.3.

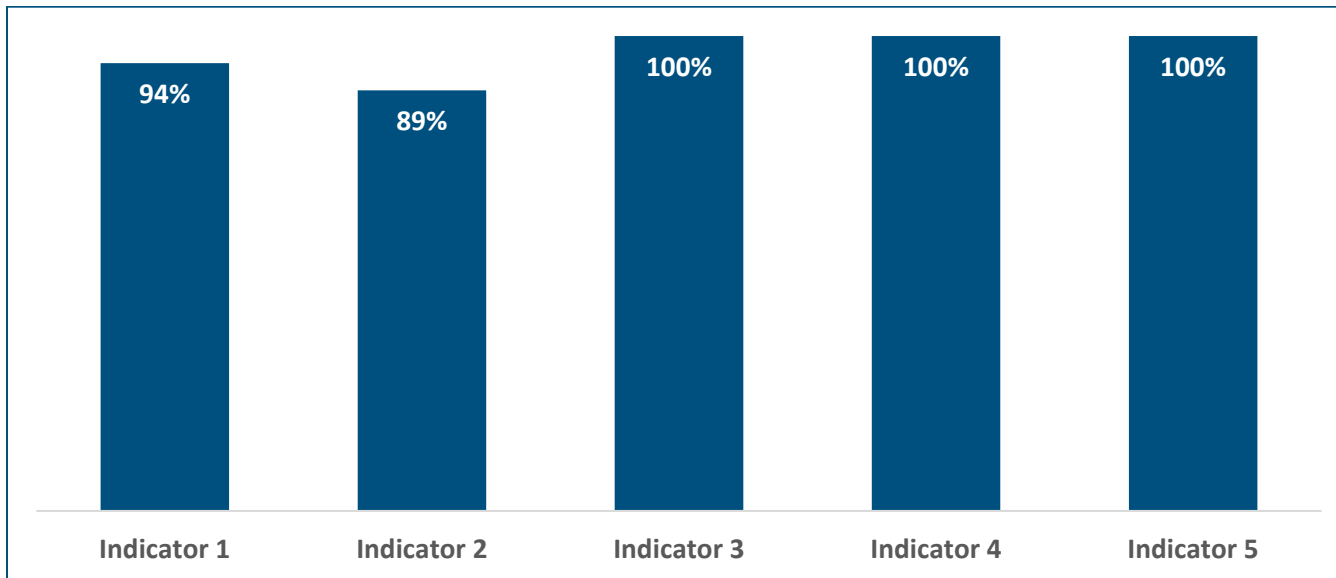
#### Exhibit 7: Indicator-Specific Results for Guideline 1.3

CSA Question	CSA Item	Percent Adherence	Percent Revised	Item-rest correlation	KR20 w/out Item
A school representative or liaison is a JDTC team member. (I1)	5a	80.0	5.7	0.643	0.090
The JDTC assigns a case manager or other team member the responsibility of identifying a contact at the youth’s school. (I2)	7h.a	77.1	11.4	-0.327	0.773
The JDTC works in collaboration with school partners to keep participants in school. (I3)	7h.c	94.3	0.0	0.567	0.302
The JDTC has secured the level of school involvement (such as sharing of school-related information or participation as a team member) they wanted. (I4)	7g	82.9	0.0	0.394	0.317
A school representative or liaison attends JDTC team meetings (staffings) where participant progress is discussed. (I5)	9b.h	74.3	0.0	0.402	0.293
<b>KR20 Coefficient</b>					0.473

**Exhibit 8. Distribution of Adherence Scores for Guideline 1.3**



**Exhibit 9. Distribution of Scores with no Need for Revision for Guideline 1.3**



## Guideline 1.4.

**The JDTC should ensure that all team members have equal access to high-quality regular training and technical assistance (TTA) to improve staff capacity to operate the JDTC and deliver related programming effectively.**

The KR20 coefficient was strong (.890) and no item deletion substantially improved the fit (see Exhibit 10). That said, item-rest correlation varied from 0.155 to 0.802 with indicator 4 (training on need assessments tool) having a negative correlation ( $r = -0.017$ ). About half of indicators rarely needed revision, as shown on Exhibits 12 and 13. Conversely, indicator 2 (changes due to technical assistance) and indicator 5 (training on incentives and sanctions) had to be corrected in about one out of every four JDTCs in this sample (see Exhibit 12). Overall, most JDTCs ( $n=28$ ) in this sample had low alignment with Guideline 1.4 (see Exhibit 11). Given the high percentage of revisions for technical assistance items (indicators 1 and 2), we believe an accompanying manual for the CSA should contain a detailed definition and description of technical assistance.

**Resulting Changes to Validated Court Self-Assessment:** The CSA that we assessed included 25 indicators for Guideline 1.4. We were looking to reduce the number of indicators based on our analyses. Two of the items were removed because they did not provide for distinguishing between JDTCs with or without practices aligned with this guideline. For instance, indicator 25 will be dropped from scoring and the CSA because in the interviews we conducted, we learned that training in specimen protocol collection is a required practice. Similarly, it appears nearly universal that judges are participating in some form of training on JDTCs (indicator 24). Additionally, six of the 25 indicators will be dropped from scoring Guideline 1.4 because of lack of fit, redundancy in other guideline indicators, or poor face validity (not capturing the intent of the guideline statement). The indicators that will be removed cover training on assessments (indicators 3 and 4) and formal orientation and training to the JDTC model (indicators 7-10).

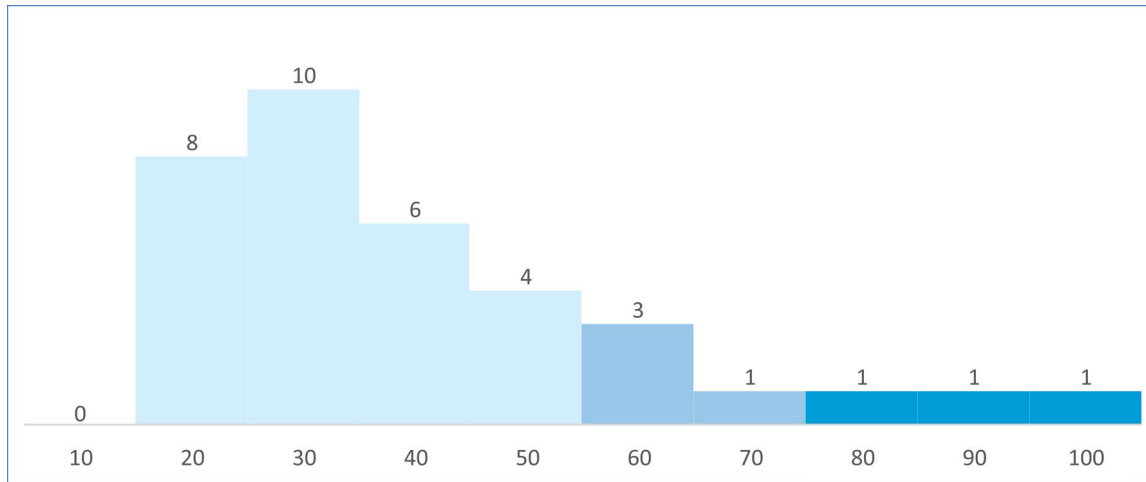


### Exhibit 10: Indicator-Specific Results for Guideline 1.4

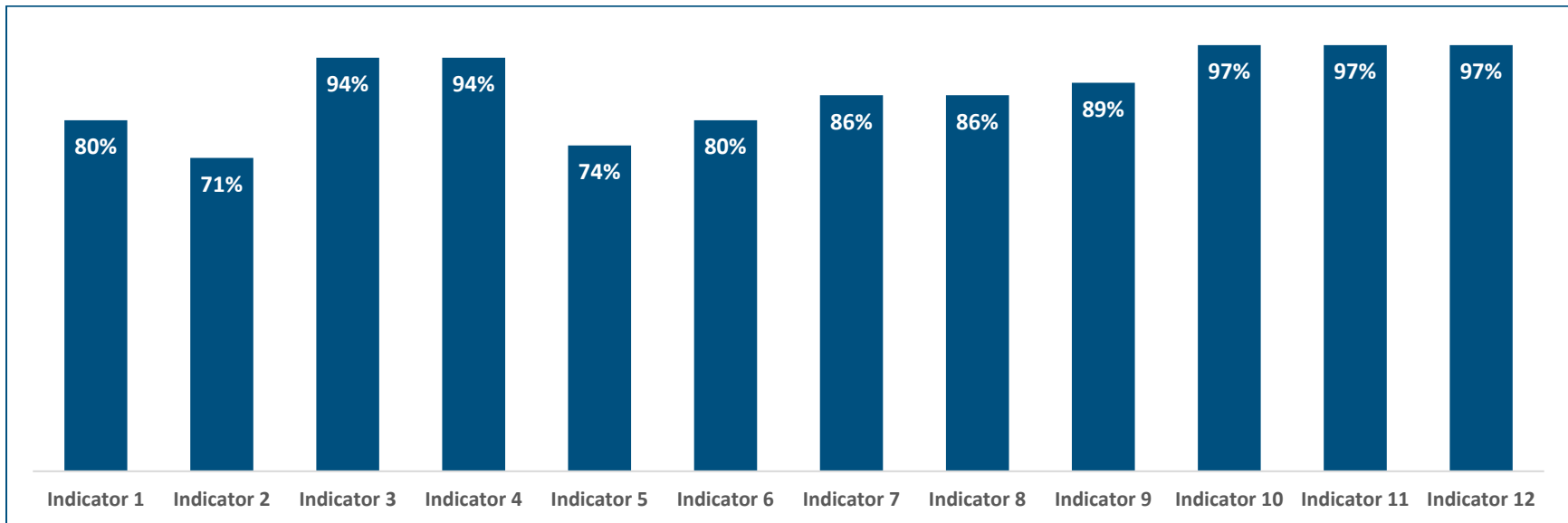
CSA Question	CSA Item	Percent Adherence	Percent Revised	Item-rest correlation	KR20 w/out Item
The JDTC has received technical assistance and/or training within the past year. (I1)	1d	88.6	20.0	0.149	0.892
The JDTC made changes as a result of that technical assistance. (I2)	1e	60.0	28.6	0.303	0.891
Individuals who administer the risk assessment received training on the tool. (I3)	4e	82.9	5.7	0.155	0.893
Individuals who administer needs assessments received training on the tool. (I4)	4m	82.9	5.7	-0.017	0.897
All JDTC team members have received training or education specifically in the use of incentives and sanctions to modify the behavior of JDTC participants. (I5)	5a; 6d.a-k	22.9	25.7	0.281	0.891
All JDTC team members received training or education specifically on the treatment court model (other than on-the-job training). (I6)	5a; 6e.a-k	25.7	20.0	0.303	0.890
The JDTC holds a formal orientation for new team members. (I7)	6a	51.4	14.3	0.541	0.884
The JDTC's formal orientation covers the JDTC model/philosophy. (I8)	6b.a	42.9	14.3	0.567	0.883
The JDTC's formal orientation covers the JDTC practices. (I9)	6b.b	42.9	11.4	0.488	0.886
New JDTC team members receive training on the treatment court model before or soon after starting work. (I10)	6f	22.9	2.9	0.444	0.886
JDTC team members have received formal training in:					
• The nature of substance use disorders and the dynamics of recovery (I11)	6g.a	11.4	2.9	0.549	0.884
• The development of treatment plans (I12)	6g.b	11.4	2.9	0.589	0.883
• Adolescent development (I13)	6g.c	14.3	2.9	0.538	0.884
• Developmentally-appropriate juvenile justice programming (I14)	6g.d	11.4	0.0	0.688	0.881
• Cultural competency (I15)	6g.e	14.3	2.9	0.556	0.884
• Strategies for family engagement (I16)	6g.f	17.1	5.7	0.724	0.879
• Trauma informed approaches to working with families (I17)	6g.g	8.6	0.0	0.511	0.885

CSA Question	CSA Item	Percent Adherence	Percent Revised	Item-rest correlation	KR20 w/out Item
<ul style="list-style-type: none"> <li>The purpose of the treatment and service interventions provided by the JDTC (I18)</li> </ul>	6g.h	20.0	2.9	0.735	0.879
<ul style="list-style-type: none"> <li>The use of evidence-based practices in substance use treatment (I19)</li> </ul>	6g.i	20.0	2.9	0.802	0.877
<ul style="list-style-type: none"> <li>Case management skill (I20)</li> </ul>	6g.j	11.4	2.9	0.769	0.879
<ul style="list-style-type: none"> <li>The risk-needs-responsivity (RNR) model (I21)</li> </ul>	6g.k	11.4	2.9	0.609	0.883
<ul style="list-style-type: none"> <li>Their specific role on the team (I22)</li> </ul>	6g.l	31.4	5.7	0.699	0.879
<ul style="list-style-type: none"> <li>Strength-based philosophy and practices (I23)</li> </ul>	6g.m	11.4	0.0	0.412	0.887
The judge has attended JDTC specific training, attended relevant JDTC seminars at conferences or received informal training (peer-to-peer) on JDTCs. (I24)	6c.a; 6c.b	97.1	2.9	0.182	0.891
Staff members who collect specimens trained in standard collection protocols. (I25)	11a	100.0	0.0	*	*
<b>KR20 Coefficient</b>					0.890

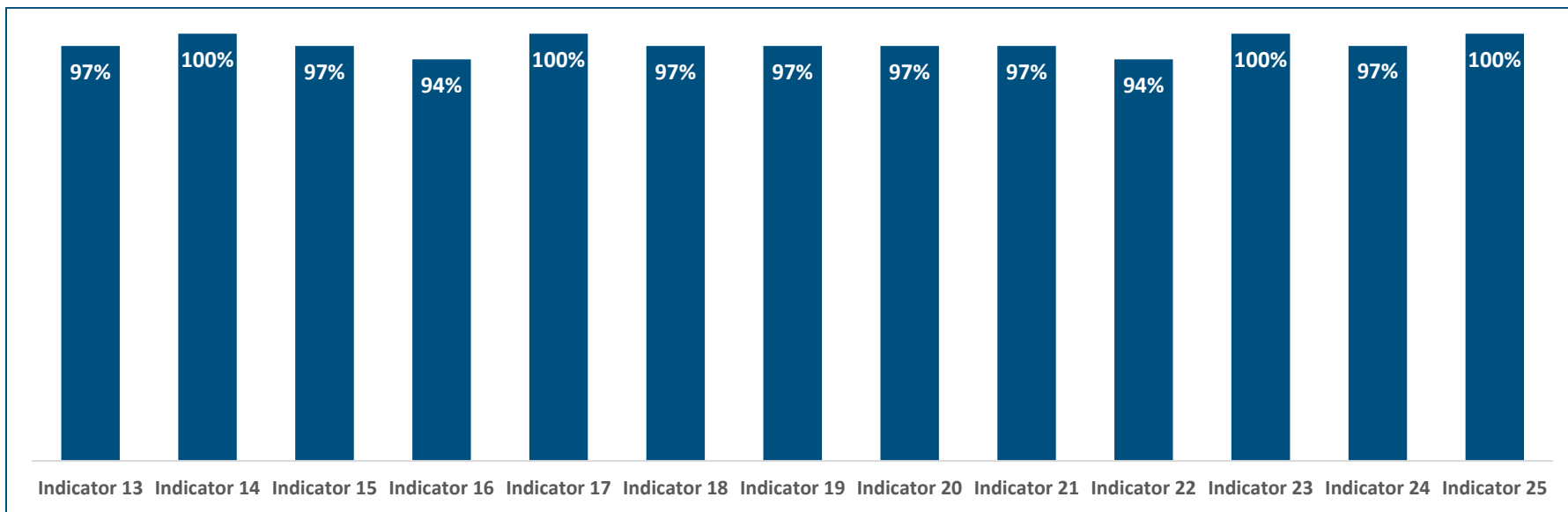
**Exhibit 11. Distribution of Adherence Scores for Guideline 1.4**



**Exhibit 12. Distribution of Scores with no Need for Revision for Guideline 1.4, Part 1**



**Exhibit 13. Distribution of Scores with no Need for Revision for Guideline 1.4, Part 2**



## Guideline 1.5.

**JDTCs should be deliberate about engaging parents or guardians throughout the court process, which includes addressing the specific barriers to their full engagement.**

All indicators were positively correlated with one another ranging from  $r = 0.252$  to  $0.650$  as shown in Exhibit 14. The KR20 coefficient ( $0.724$ ) was good and dropping items would not substantially improve the fit. Overall, the courts in the sample had generally few revisions (see also Exhibit 16) to the indicators except for Indicator 8 (responsible party allowed to call into court) and Indicator 11 (case planning outside of normal business hours). As shown in Exhibit 15, overall adherence to the combined set of indicators ranged from less than 30% to over 90%, with 80% of sample courts having at least strong or moderate alignment with Guideline 1.5.

**Resulting Changes to Validated Court Self-Assessment:** The CSA that we assessed included 12 indicators for Guideline 1.5. We were looking to reduce the number of indicators based on our analyses. We also wanted to reduce overlap between the indicators for Guideline 1.5 and the guidelines under Objective 3, Objective 5, and Objective 6. As such, we made a number of reductions to this set of indicators for Guideline 1.5. Indicator 12 (family therapy modalities) is removed from scoring Guideline 1.5 because the guideline focuses on the engagement practices by the court, not the role of treatment. Indicator 1 (family liaison) was ultimately so general in its wording that nearly all JDTCs in this sample met that criterion. That was found to be the case for indicator 7 (family involvement in youth supervision) as well. There were two indicators that addressed flexibility in engaging caregivers in case planning. We opted to retain indicator 11 and drop indicator 5, in suggesting that case planning outside of normal business hours better captures the intent of the guideline than case planning that occurs in the home. Conversely, in deciding between two items that reflected flexibility in drug testing procedures, we opted to retain indicator 4 and drop indicator 10. Here we are suggesting that it offering drug testing in the home better reflected the intent of the guideline than just making the hours for drug testing more varied. With these changes, there are now 7 indicators for Guideline 1.5.

### Exhibit 14: Indicator-Specific Results for Guideline 1.5

CSA Question	CSA Item	Percent Adherence	Percent Revised	Item-rest correlation	KR20 w/out Item
There is a specific staff member designated to be the primary point of contact or liaison for the responsible parent/guardian/family member. (I1)	7a	97.1	11.4	0.328	0.717
The JDTC ensures that at least one family member or other adult is available to participate in discussions to help the court make decisions about each participant. (I2)	7b	82.9	5.7	0.252	0.722
The JDTC provides childcare to facilitate the involvement of responsible parent/guardian/family member and participants in court requirements. (I3)	7d.a	8.6	2.9	0.220	0.723
The JDTC performs drug testing in the home. (I4)	7d.b	80.0	11.4	0.526	0.680
The JDTC conducts case planning meetings in the home. (I5)	7d.c	54.3	2.9	0.547	0.673
The JDTC offers peer support to family members. (I6)	7d.e	57.1	5.7	0.450	0.693
The JDTC encourages a responsible parent/guardian/family member to participate in supervision and discipline of the JDTC participant. (I7)	7e.a	100.0	0.0	*	*
The JDTC allows responsible parent/guardian/family member to call in for court, if they are unable to attend in person. (I8)	7e.b	88.6	17.1	0.185	0.728
JDTC court sessions are scheduled at a time that accommodates work and school schedules. (I9)	7e.c	94.3	2.9	0.238	0.721
The JDTC offers a wide range of hours for flexibility in drug testing times (including early morning and evening). (I10)	7e.d	88.6	5.7	0.418	0.700
The JDTC conducts case planning meetings at a wide range of hours (including early morning and evening). (I11)	7e.e	65.7	17.1	0.650	0.653
Treatment models such as Brief Strategic Family Therapy (BSFT), Family Behavior Therapy (FBT), Functional Family Therapy (FFT), Multidimensional Family Therapy (MFFT) or other family therapy sometimes or always required of JDTC participants. (I12)	8i.e-k	77.1	2.9	0.252	0.724
<b>KR20 Coefficient</b>					0.725

### Exhibit 15. Distribution of Adherence Scores for Guideline 1.5

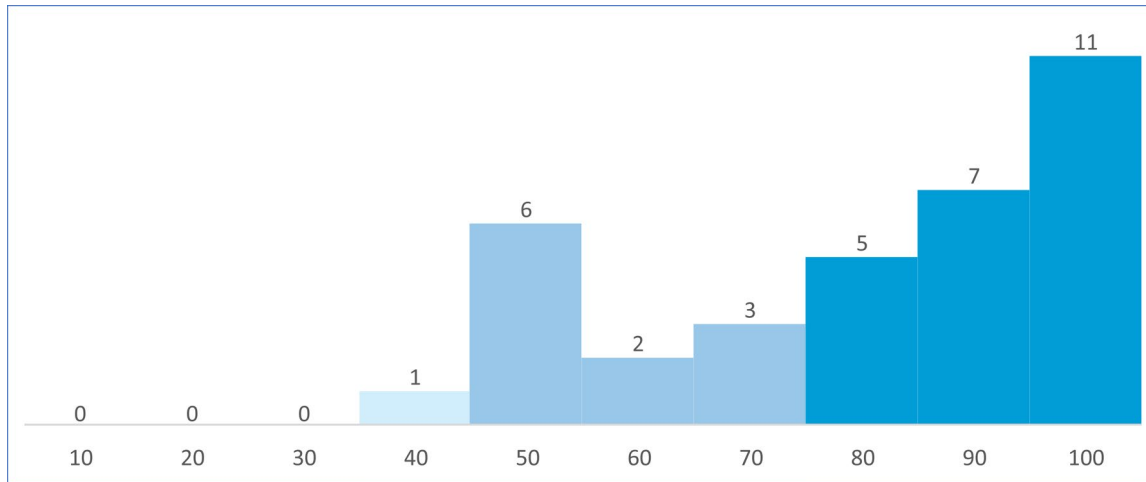
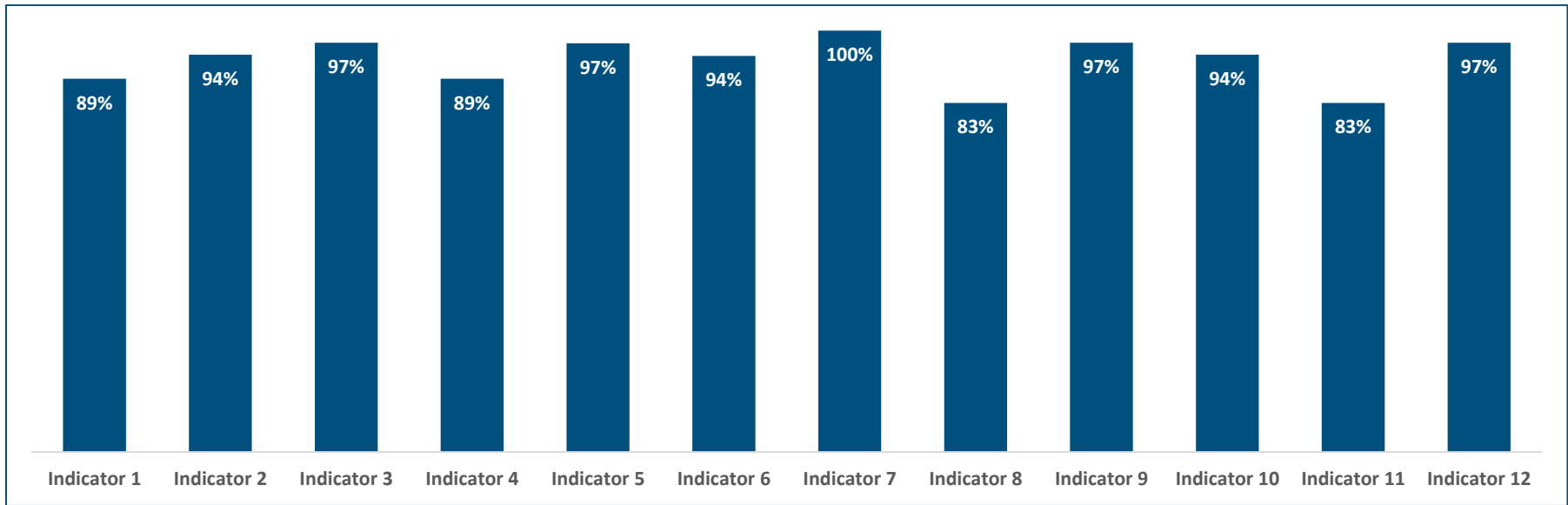


Exhibit 16. Distribution of Scores with no Need for Revision for Guideline 1.5





## Guideline 1.6.

**JDTCs should provide court-certified or licensed onsite interpreters for parents or guardians with limited English proficiency and for those with a hearing deficiency. In addition, all documents should be translated into the native language of non-English-speaking youth and parents or guardians.**

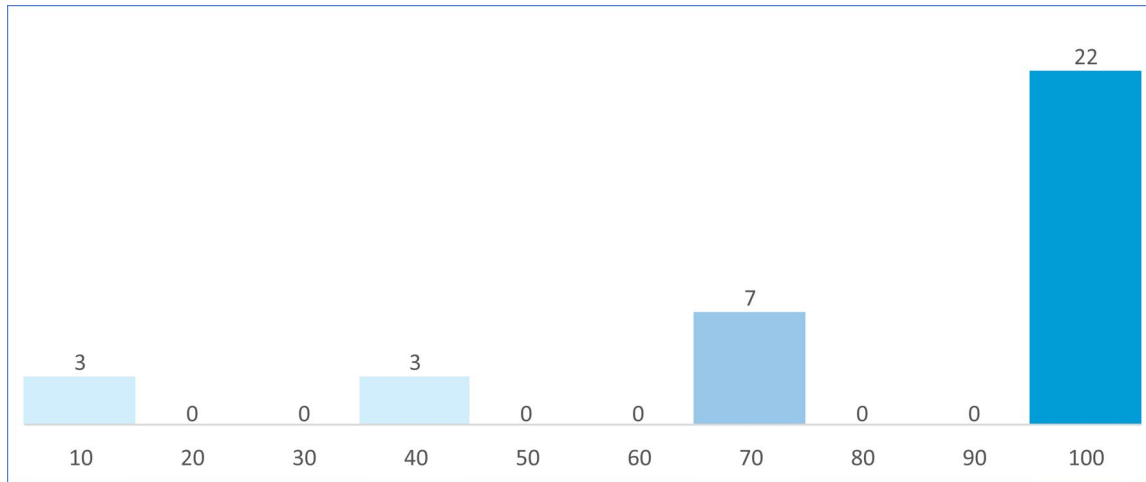
While the items had moderate item-rest correlation ( $r = 0.460 - 0.644$ ) and good KR20 coefficient (0.722), the JDTCs participating in the validation study needed to have responses to the indicators revised about one-third of the time (see Exhibits 17 and 19). Given this, language introducing these items on the CSA will be rewritten to resolve what data collection identified to be the point of confusion – whether the item addressed the court’s capacity to accomplish the task or the frequency in which it had to do it. In Exhibit 18, almost all sample courts (82.8%) had moderate ( $n=7$ ) or high ( $n=22$ ) alignment with the guideline.

**Resulting Changes to Validated Court Self-Assessment:** The three items that required the most assistance among all the items on the CSA were those for Guideline 1.6. These items were often interpreted as asking how often have the JDTCs had to provide such services, rather than whether they had the capacity to do so if the need arose. We revised the lead-in question to reduce the confusion for future respondents. There was no reduction in the number of indicators for Guideline 1.6.

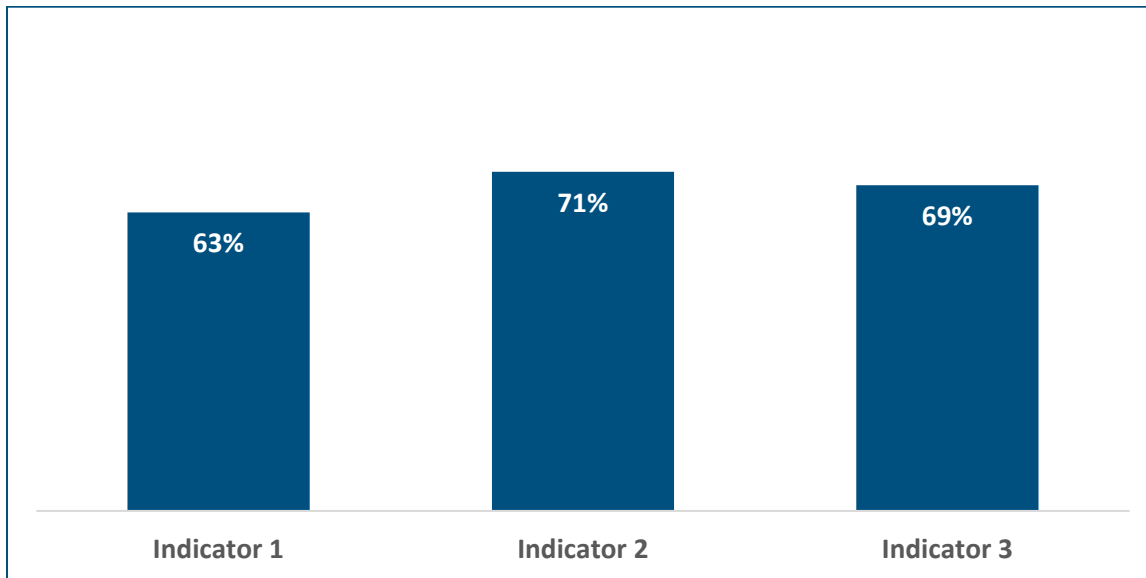
### Exhibit 17: Indicator-Specific Results for Guideline 1.6

CSA Question	CSA Item	Percent Adherence	Percent Revised	Item-rest correlation	KR20 w/out Item
The JDTC will provide court-certified or licensed onsite interpreters for participants and parents/ guardians/family members with limited English proficiency. (I1)	7f.a	88.6	37.1	0.460	0.733
The JDTC will provide court-certified or licensed onsite interpreters for participants and parents/ guardians/family members with a hearing deficiency. (I2)	7f.b	80.0	28.6	0.664	0.478
All JDTC public documents translated into native language of non-English speaking youth and parents/guardians/family members. (I3)	7f.c	68.6	31.4	0.548	0.650
<b>KR20 Coefficient</b>					0.722

**Exhibit 18. Distribution of Adherence Scores for Guideline 1.6**



**Exhibit 19. Distribution of Scores with no Need for Revision for Guideline 1.6**



## Guideline 2.1.

Eligibility criteria should include the following: youth with a substance use disorder; youth who are 14 years old or older; and youth who have a moderate to high risk of reoffending.

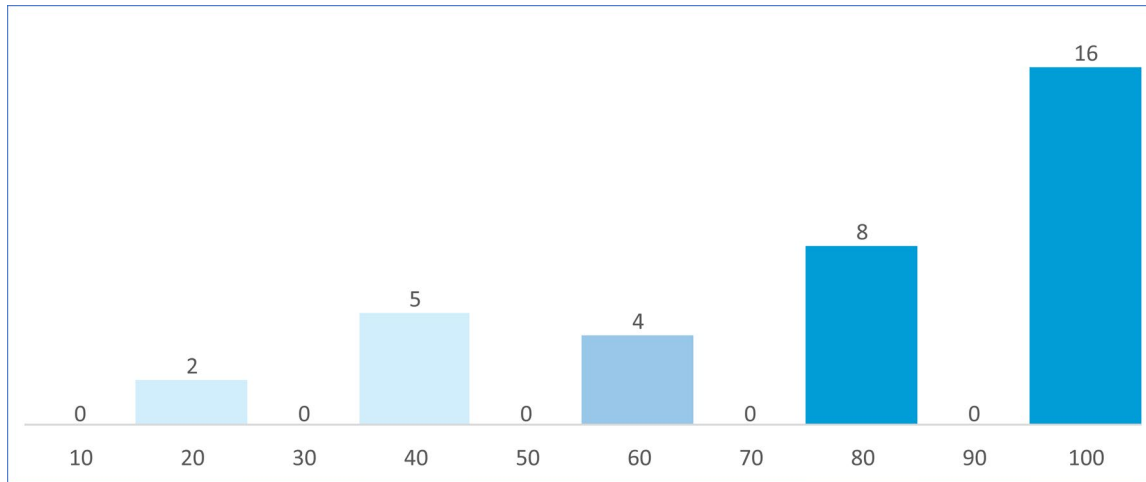
As shown in Exhibit 20, all indicators correlated with each other, with correlations ranging from 0.251 to 0.547. The KR20 coefficient was sufficient at 0.633. As shown in Exhibit 21, almost 70% of the courts in the sample had high alignment with this guideline. As we see in Exhibit 22, some of the items required assistance during our data collection process for the JDTCs to arrive at the response that best reflected their current practices.

**Resulting Changes to Validated Court Self-Assessment:** Based on feedback gathered from the JDTCs in our sample during data collection, indicator 3 (level of criminogenic risk and eligibility) and indicator 4 (level of treatment needed) will be revised to be more clearly understandable. Given that risk for reoffending (Indicator 5) will now be more effectively captured in Indicator 3, indicator 5 will no longer be considered for scoring this guideline but still remains on the CSA, as it is an indicator for Guideline 2.2.

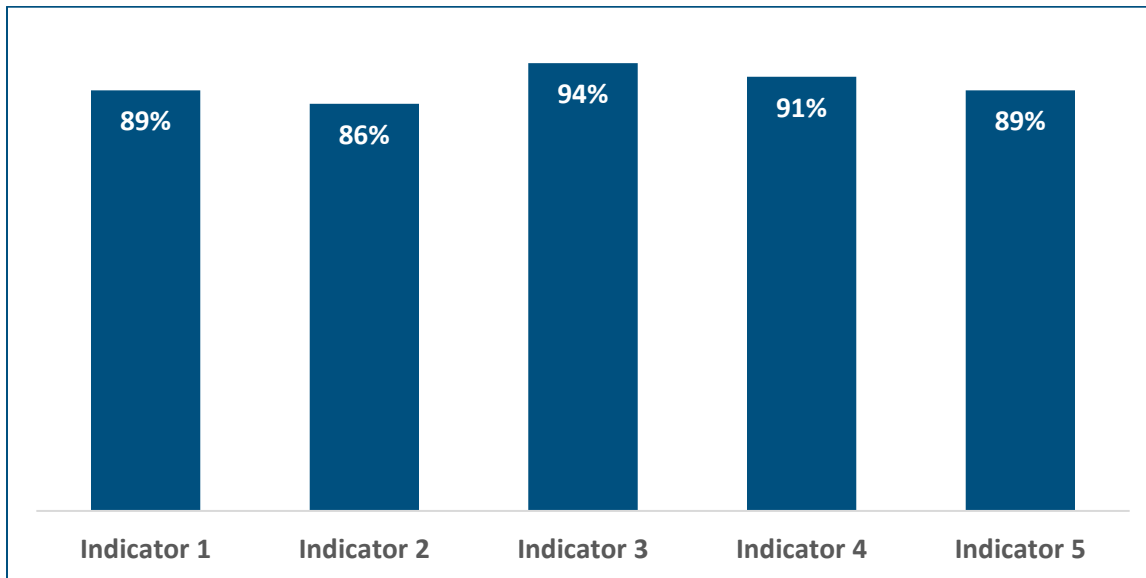
### Exhibit 20: Indicator-Specific Results for Guideline 2.1

CSA Question	CSA Item	Percent Adherence	Percent Revised	Item-rest correlation	KR20 w/out Item
The JDTC eligibility requirements are in writing. (I1)	3a	91.4	11.4	0.251	0.635
Age is always used as a factor in deciding which youth are eligible for JDTC, although those under 14 may be considered on case-by-case basis. (I2)	3b.a;3c.f	80.0	14.3	0.530	0.506
Level of criminogenic risk is always used as a factor in deciding which youth are eligible for the JDTC. (I3)	3b.c	74.3	5.7	0.547	0.489
Level of treatment needed is always used as a factor in deciding which youth are eligible for the JDTC. (I4)	3b.d	82.9	8.6	0.370	0.588
The JDTC assesses participants for risk of reoffending and only accepts youths who have a moderate to high risk of reoffending. (I5)	4a; 4g	60.0	11.4	0.276	0.652
<b>KR20 Coefficient</b>					<b>0.633</b>

**Exhibit 21. Distribution of Adherence Scores for Guideline 2.1**



**Exhibit 22. Distribution of Scores with no Need for Revision for Guideline 2.1**



## Guideline 2.2.

**Using a validated instrument, all program participants should be assessed for the risk of reoffending.**

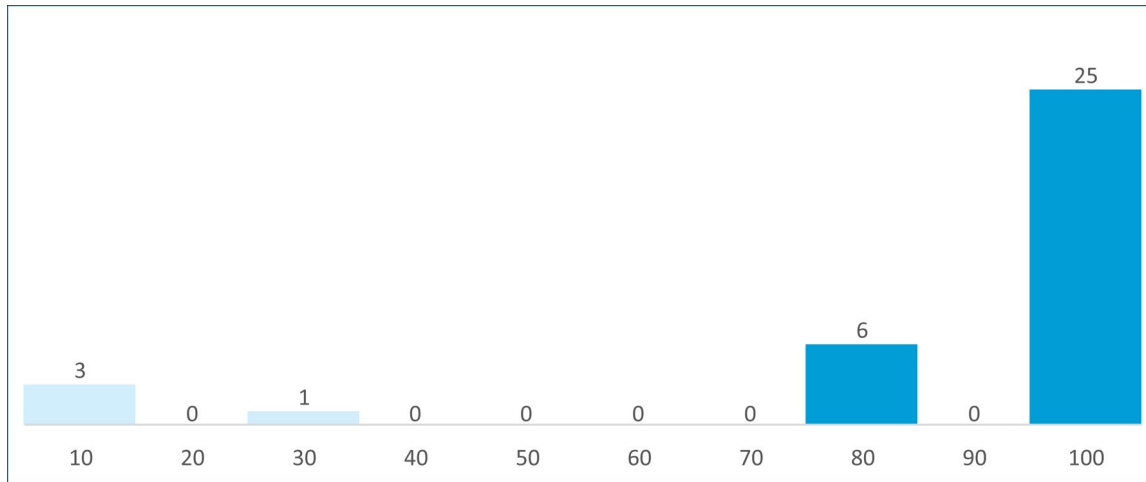
Overall, as shown in Exhibit 23, the indicators were well correlated ( $r = 0.505 - 0.898$ ) and the KR20 coefficient was strong at 0.863. That said, removing Indicator 4 (risk assessment as part of eligibility) would result in an increase of the KR20 coefficient to 0.911. In addition, indicator 4 is ultimately redundant with indicator 1, which we believe better addresses the intent of this guideline. However, indicator 1 may need to be reworded or additional guidance added to the item's introductory text in since one in about five courts in the sample had to revise their answers (see also Exhibit 25). Almost all sample courts had high alignment with only about one in ten courts having low alignment (see Exhibit 24).

**Resulting Changes to Validated Court Self-Assessment:** Given the discussion above, we revised item 4a on the CSA and are no longer including indicator 4 as part of the scoring for Guideline 2.2. So, we decided to streamline these two items, based on the results of our validation analyses. For instance, JDTCs that assessed youth for risk of reoffending almost always did so prior to enrollment of the participants into the program. On the validated CSA those two items are now combined into a single item.

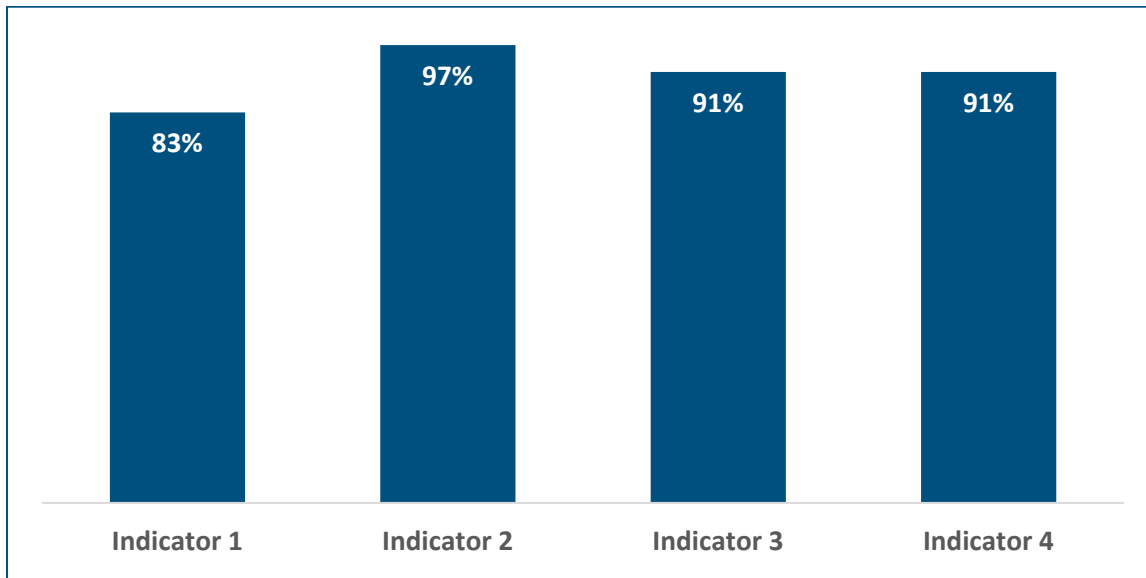
### Exhibit 23: Indicator-Specific Results for Guideline 2.2

CSA Question	CSA Item	Percent Adherence	Percent Revised	Item-rest correlation	KR20 w/out Item
The JDTC assesses participants for risk of reoffending. (I1)	4a	85.7	17.1	0.786	0.795
The JDTC uses a validated risk assessment tool. (I2)	4b; 4bc	88.6	2.9	0.898	0.757
The risk assessment tool has not been edited or modified by JDTC team. (I3)	4d	82.9	8.6	0.707	0.828
The JDTC always conducts the risk assessment as part of eligibility determination. (I4)	4f.a	82.9	8.6	0.505	0.911
<b>KR20 Coefficient</b>					0.863

**Exhibit 24. Distribution of Adherence Scores for Guideline 2.2**



**Exhibit 25. Distribution of Scores with no Need for Revision for Guideline 2.2**



### Guideline 2.3.

All program participants should be screened for substance use using validated, culturally normed screening assessments.

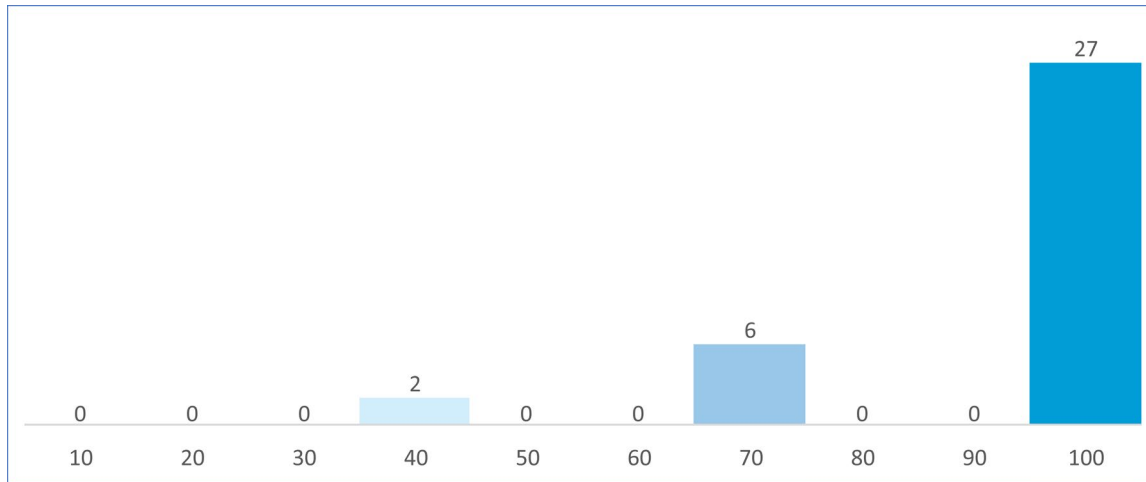
As shown in Exhibit 26, the three indicators for Guideline 2.3 do not fit together as a scale, based on the results of our analyses. The item-rest correlation ranged from  $r = 0.088$  to  $.0.313$  with the overall K20 coefficient an unacceptable  $0.331$ . Yes, almost all JDTCs in the sample had high alignment with the guideline (see Exhibit 27) and few had to revise their answers (see Exhibit 28). Based on the intent of the guideline statement, we believe it is still important to retain all three indicators.

**Resulting Changes to Validated Court Self-Assessment:** We are not reducing the number of indicators, but have revised the wording of indicator 1 to be consistent with changes made to indicator 1 under Guideline 2.2.

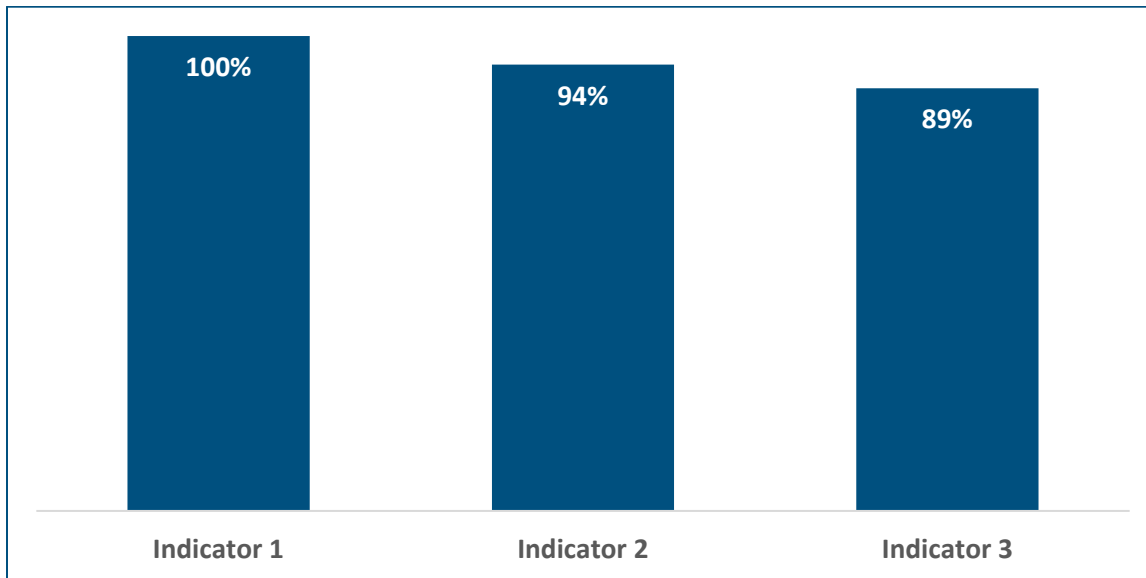
Exhibit 26: Indicator-Specific Results for Guideline 2.3

CSA Question	CSA Item	Percent Adherence	Percent Revised	Item-rest correlation	KR20 w/out Item
The JDTC screens for substance use disorder prior to entry. (I1)	3g	91.4	0.0	0.088	0.436
The JDTC use a validated substance use disorder screening tool. (I2)	3h; 3i	97.1	5.7	0.256	0.224
The substance use disorder screening tool has not been edited or modified by the JDTC team. (I3)	3j	82.9	11.4	0.313	-0.097
<b>KR20 Coefficient</b>					0.331

**Exhibit 27. Distribution of Adherence Scores for Guideline 2.3**



**Exhibit 28. Distribution of Scores with no Need for Revision for Guideline 2.3**





## Guideline 2.4.

If potential program participants do not have a substance use disorder and are not assessed as moderate to high risk for reoffending, they should be diverted from the JDTC process.

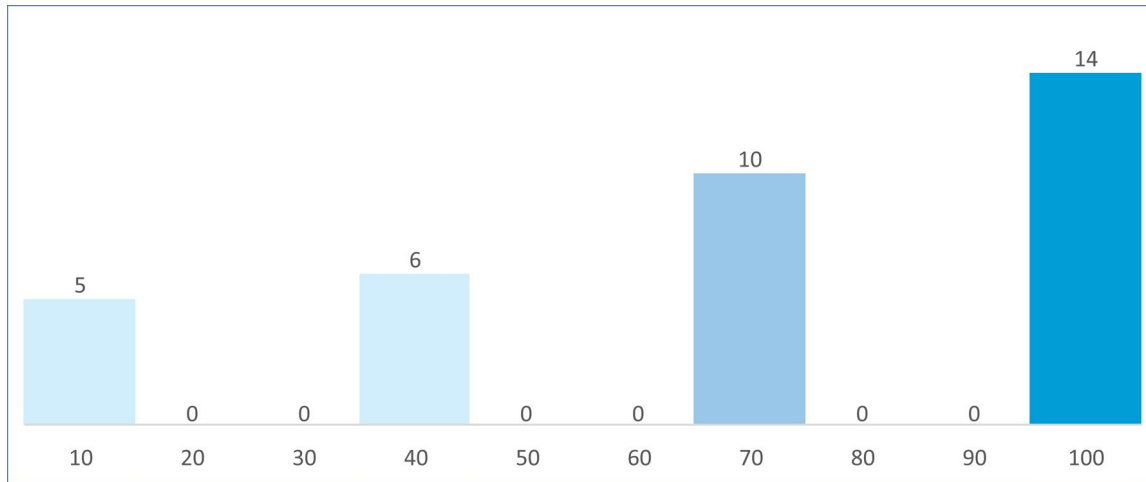
Item-rest correlation for the three indicators that comprise Guideline 2.4 are similar ( $r = 0.496 - 0.575$ ), as seen in Exhibit 29. Given the acceptability of the KR20 coefficient (0.707) and the relatively low revision rate of less than 15% (see Exhibit 31), no changes are recommended to the CSA or the scoring of the items. JDTCs in the sample were split across the three levels of alignment with about a third of courts falling into each category. As seen in Exhibit 30, 31% of the JDTCs had low, 29% had moderate and 40% had high alignment with Guideline 2.4.

**Resulting Changes to Validated Court Self-Assessment:** No changes were made to the CSA based on the results for this guideline.

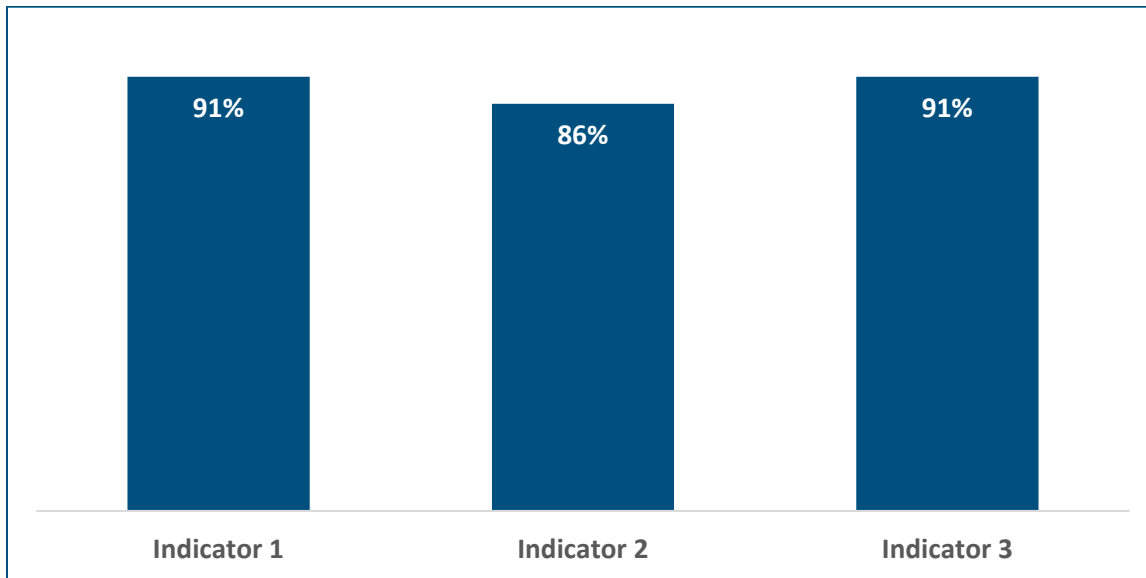
### Exhibit 29: Indicator-Specific Results for Guideline 2.4

CSA Question	CSA Item	Percent Adherence	Percent Revised	Item-rest correlation	KR20 w/out Item
Youth who are referred to the JDTC but do not meet the eligibility criteria are <u>not</u> admitted to the JDTC. (I1)	3k.c	68.6	8.6	0.575	0.550
Youth whose risk of re-offense is low are not admitted to the JDTC. (I2)	4h.e	42.9	14.3	0.496	0.665
Youth who do not appear to have a substance use/mental health disorder are not admitted to the JDTC. (I3)	4n.c	82.9	8.6	0.526	0.631
<b>KR20 Coefficient</b>					0.707

**Exhibit 30. Distribution of Adherence Scores for Guideline 2.4**



**Exhibit 31. Distribution of Scores with no Need for Revision for Guideline 2.4**



## Guideline 2.5.

**JDTCs should ensure that eligibility criteria result in equity of access for all genders; racial and ethnic groups; and youth who are lesbian, gay, bisexual, transgender, queer or questioning, intersex, and gender nonconforming (LGBTQI–GNC) and two-spirit.**

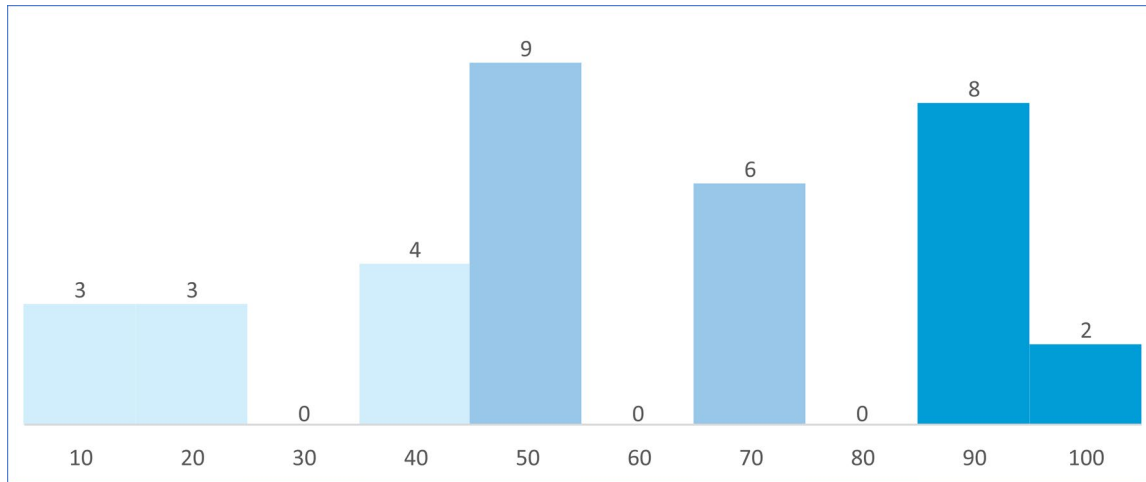
Exhibit 32 shows item-rest correlations ranging from  $r = 0.209 - 0.595$  and a KR20 coefficient of 0.632. However, answers to Indicators 1, 2 and 3 (strategies around equity of access) were revised by sample courts up to a quarter of the time (see also Exhibit 34), suggesting that the items may need to be reworded to better capture the intent of the guideline. Additionally, the CSA manual should include a discussion about what “equity of access” means and what that practice looks like for JDTCs. JDTCs in our sample differed as to how well they were aligned with this guideline. As shown in Exhibit 33, about 29% of courts had low alignment, an equal amount had high alignment, and about 46% had moderate alignment.

**Resulting Changes to Validated Court Self-Assessment:** Indicators 4, 5 and 6 (collecting and reviewing demographic data) are also included in Guideline 7.1 and are a better fit with that guideline. While we are retaining indicators 4, 5 and 6 on the CSA, they will no longer be scored under Guideline 2.5. This will leave three indicators under Guideline 2.5.

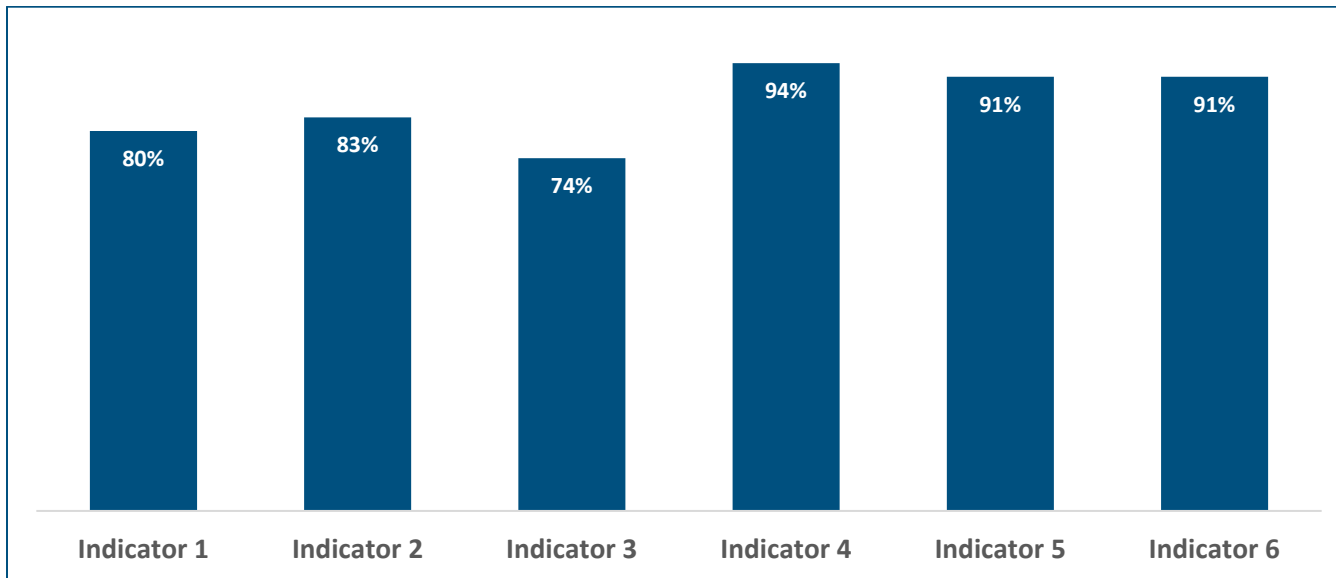
### Exhibit 32: Indicator-Specific Results for Guideline 2.5

CSA Question	CSA Item	Percent Adherence	Percent Revised	Item-rest correlation	KR20 w/out Item
The JDTC has specific outreach strategies geared toward increasing equity of access for all eligible youth. (I1)	3d	65.7	20.0	0.209	0.646
JDTC team members involved in screening participants are provided with training intended to promote equity of access for all eligible youth. (I2)	3e	51.4	17.1	0.217	0.646
The JDTC has a written policy that addresses ensuring equity of access to the program for all eligible youth. (I3)	3f	60.0	25.7	0.380	0.582
The JDTC keeps and reviews data on the gender for each participant. (I4)	14c.a; 14d.a	65.7	5.7	0.595	0.491
The JDTC keeps and reviews data on the race/ethnicity for each participant. (I5)	14c.b; 14d.b	65.7	8.6	0.595	0.491
The JDTC keeps and reviews data on the sexual identity for each participant. (I6)	14c.c; 14d.c	17.1	8.6	0.221	0.634
<b>KR20 Coefficient</b>					0.632

**Exhibit 33. Distribution of Adherence Scores for Guideline 2.5**



**Exhibit 34. Distribution of Scores with no Need for Revision for Guideline 2.5**



### **Guideline 3.1.**

**JDCs should work collaboratively with parents and guardians throughout the court process to encourage active participation in (a) regular court hearings, (b) supervision and discipline of their children in the home and community, and (c) treatment programs.**

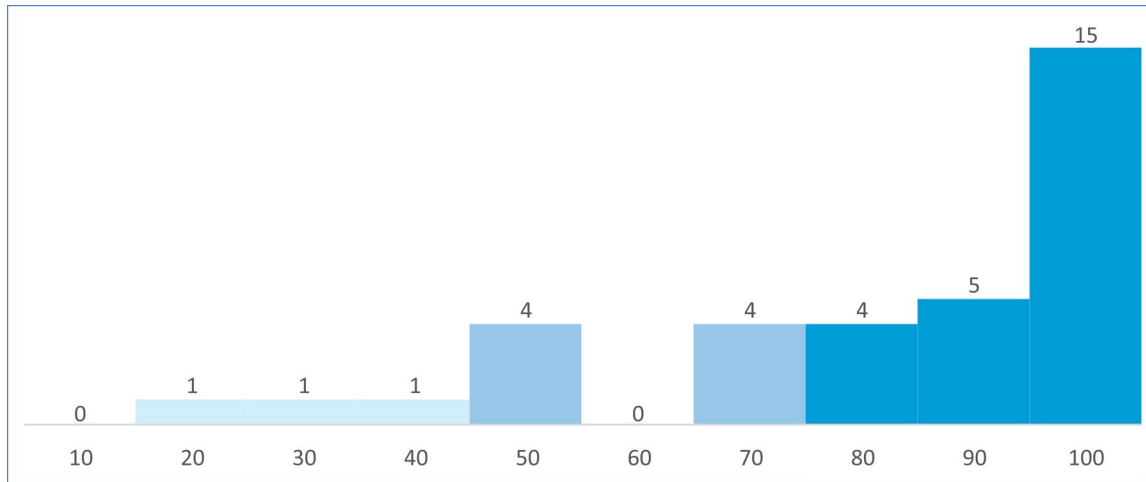
As shown in Exhibit 35, the item-rest correlations were moderate to strong ( $r = 0.384 - 0.715$ ) except for indicator 7 ( $r = .048$ ), which asked about services provided to family members. The K20 coefficient, already good at 0.790, would improve to 0.815 with the removal of indicator 7. Additionally, indicator 8 (requiring family therapy) does not appear to add to the scale in terms of reliability and given its high adherence (97.1%) may have made courts in the sample appear more collaborative than they are. In addition, indicator 8 appears to be redundant to indicator 6. In general, few courts (0.0% to 11.4%) revised their CSA answers (see also Exhibit 37). As seen in Exhibit 36, about two-thirds of sample courts had high adherence to Guideline 3.1 with less than 10% having low alignment.

**Resulting Changes to Validated Court Self-Assessment:** Based on the discussion above, we removed indicators 7 and 8, leaving six indicators for Guideline 3.1.

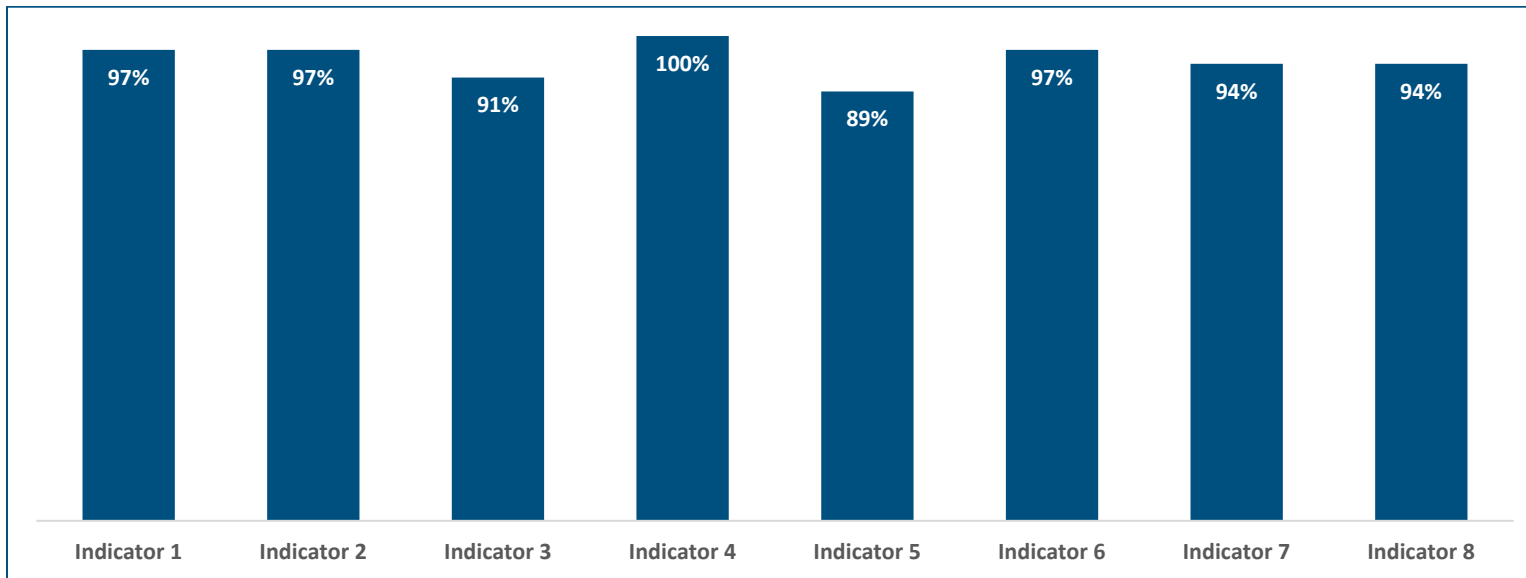
### Exhibit 35: Indicator-Specific Results for Guideline 3.1

CSA Question	CSA Item	Percent Adherence	Percent Revised	Item-rest correlation	KR20 w/out Item
The JDTC participants have a responsible parent/guardian/family member who at least sometimes:					
<ul style="list-style-type: none"> <li>Attends court sessions (I1)</li> </ul>	7c.a	91.4	2.9	0.592	0.760
<ul style="list-style-type: none"> <li>Participates (speaking etc.) during court sessions (I2)</li> </ul>	7c.b	85.7	2.9	0.640	0.746
<ul style="list-style-type: none"> <li>Participates in case planning sessions (I3)</li> </ul>	7c.c	62.9	8.6	0.582	0.754
<ul style="list-style-type: none"> <li>Has a role in identifying appropriate incentives and sanctions for their child (I4)</li> </ul>	7c.d	54.3	0.0	0.715	0.725
<ul style="list-style-type: none"> <li>Participates in case management sessions (I5)</li> </ul>	7c.e	71.4	11.4	0.669	0.735
<ul style="list-style-type: none"> <li>Participates in treatment / therapy sessions (I6)</li> </ul>	7c.f	74.3	2.9	0.384	0.789
The JDTC provides services to family members in addition to the participant at least sometimes. (I7)	7d.d	94.3	5.7	0.048	0.815
The JDTC sometimes or always requires family therapy when indicated by the needs assessment. (I8)	8f.g	97.1	5.7	0.399	0.788
<b>KR20 Coefficient</b>					0.790

**Exhibit 36. Distribution of Adherence Scores for Guideline 3.1**



**Exhibit 37. Distribution of Scores with no Need for Revision for Guideline 3.1**





### Guideline 3.2.

The judge should interact with the participants in a nonjudgmental and procedurally fair manner.

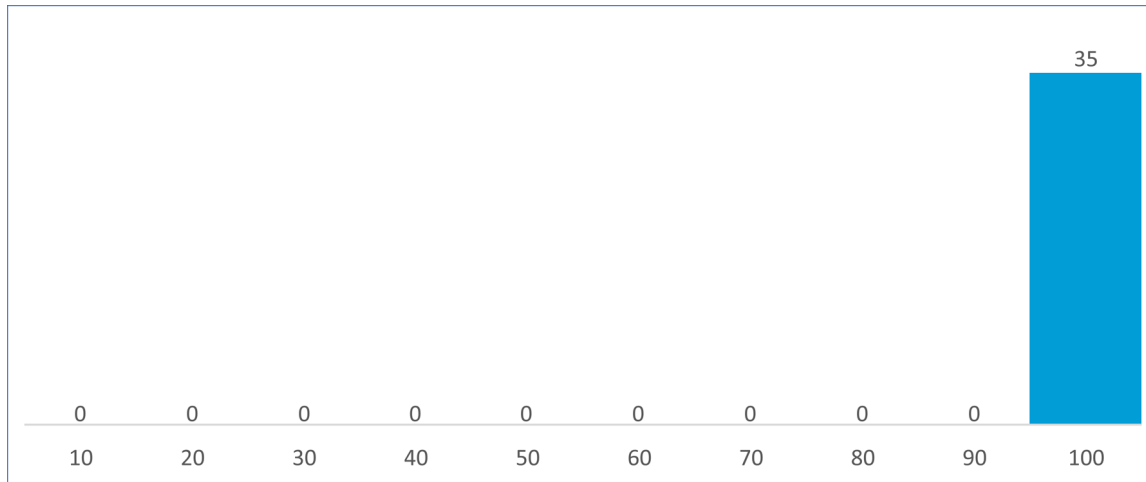
All indicators had 100% adherence and almost no item revisions as shown in Exhibits 38 and 40. All courts in the sample had high alignment with the guideline (see Exhibit 39).

**Resulting Changes to Validated Court Self-Assessment:** No changes to the CSA or scoring of items for this guideline were made.

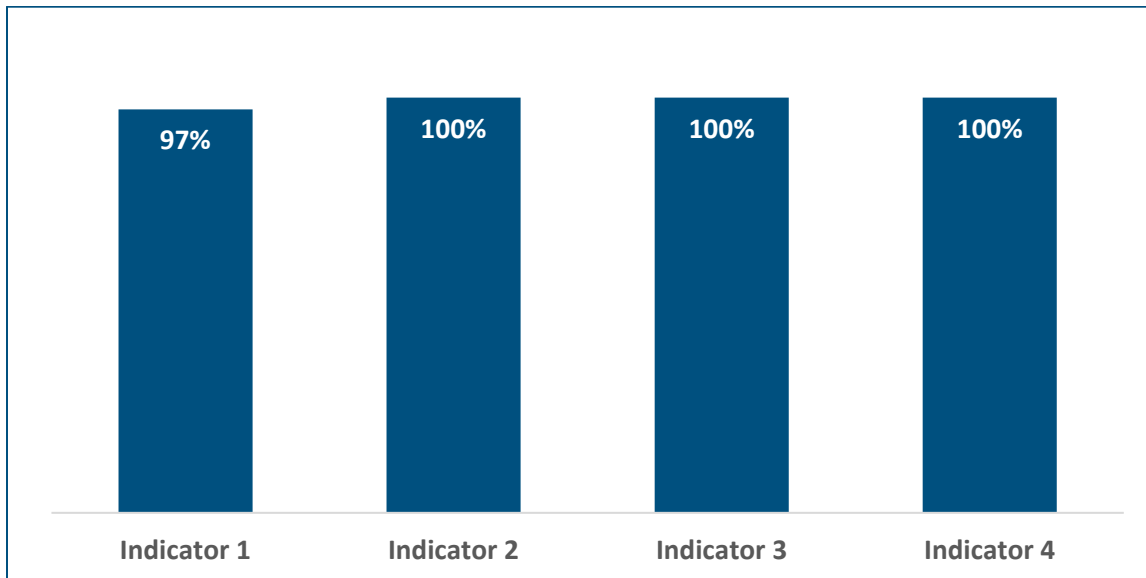
#### Exhibit 38: Indicator-Specific Results for Guideline 3.2

CSA Question	CSA Item	Percent Adherence	Percent Revised	Item-rest correlation	KR20 w/out Item
The judge speaks directly to the participants during JDTC hearings most of the time or always. (I1)	9d.a	100.0	2.9	*	*
The judge addresses participants by name during JDTC hearings most of the time or always. (I2)	9d.b	100.0	0.0	*	*
The judge provides verbal feedback/support to participants regarding their individual goals/interventions during JDTC hearings most of the time or always. (I3)	9d.c	100.0	0.0	*	*
The judge acknowledges participant's accomplishments during JDTC hearings most of the time or always. (I4)	9d.d	100.0	0.0	*	*
<b>KR20 Coefficient</b>					*

**Exhibit 39. Distribution of Adherence Scores for Guideline 3.2**



**Exhibit 40. Distribution of Scores with no Need for Revision for Guideline 3.2**



### **Guideline 3.3.**

**The judge should be consistent when applying program requirements (including incentives and sanctions).**

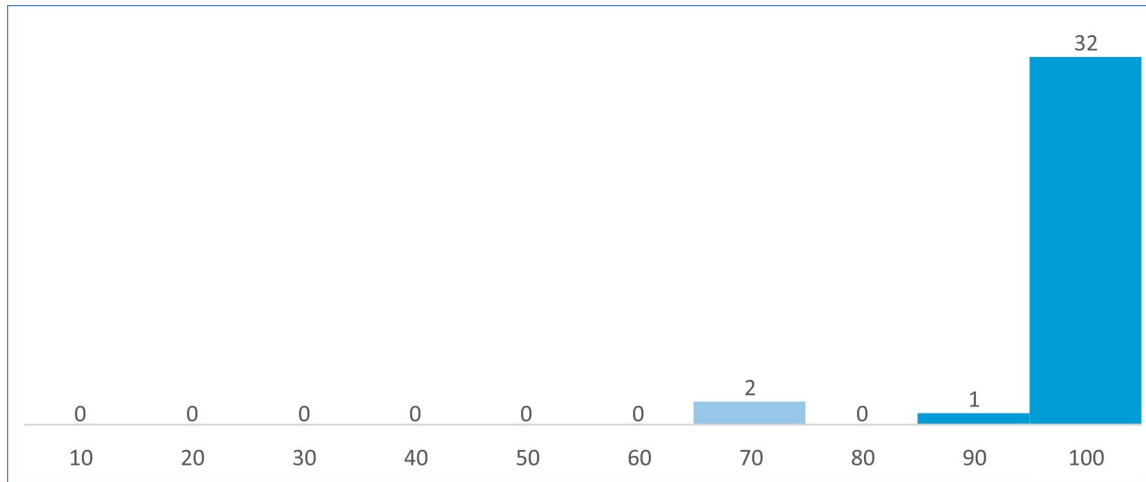
As shown in Exhibit 41, the item-rest correlations, if they could be calculated, were strong except for indicator 1 (consistent judge follow-through), which was negatively correlated. Removal of the indicator would increase the K20 coefficient substantially. Less than 10% of courts in the sample needed to revise their answer to any indicator (see also Exhibit 43), with indicator 2 (judge clearly explains program requirements) and indicator 3 (judge consistently responds to participants) needing no revisions. Almost all JDTCs (n=32) in the sample had high alignment with Guideline 3.3, as shown in Exhibit 42.

**Resulting Changes to Validated Court Self-Assessment:** We are removing indicator 1 from scoring under Guideline 3.3 and from the CSA as well.

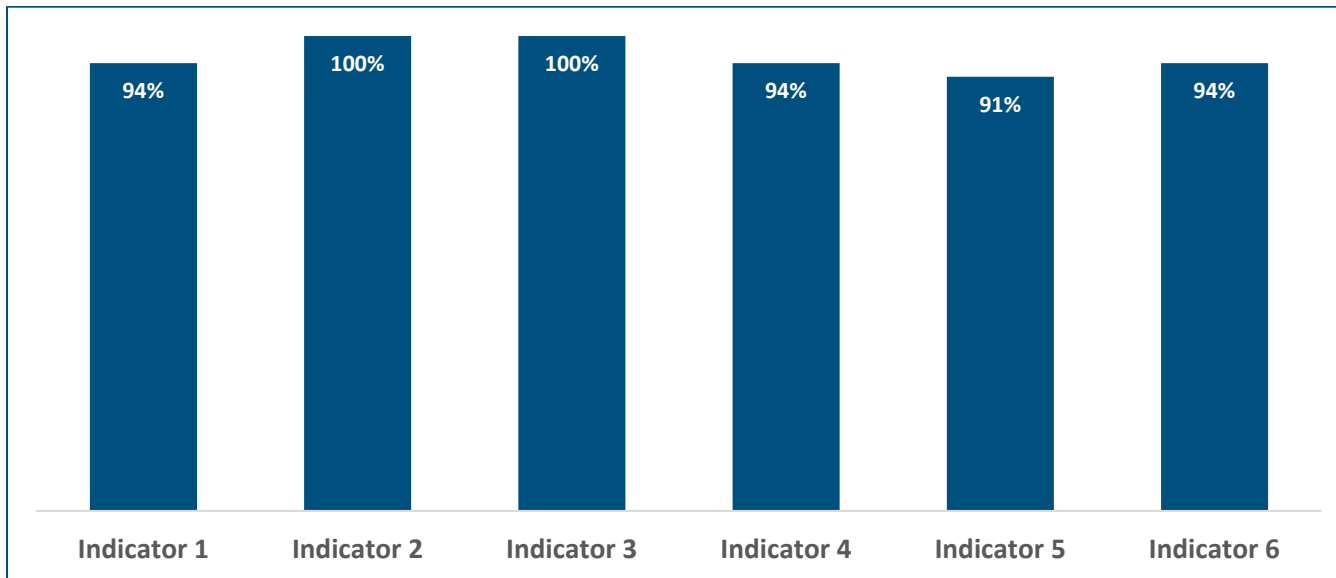
### Exhibit 41: Indicator-Specific Results for Guideline 3.3

CSA Question	CSA Item	Percent Adherence	Percent Revised	Item-rest correlation	KR20 w/out Item
If the judge issues a warning at a JDTC hearing, there is consistently appropriate follow-through in subsequent hearings. That is, the judge or team imposes the response that was part of the initial warning or adjusts response based on updated information most of the time or always. (I1)	10k.a	97.1	5.7	-0.042	1.000
The judge clearly explains program requirements to participants at JDTC hearings (most of the time or always). (I2)	10k.b	100.0	0.0	*	*
The judge consistently responds to the ways that participants are meeting/not meeting program requirements throughout the JDTC process (most of the time or always). (I3)	10k.c	100.0	0.0	*	*
The judge clearly explains potential incentives or sanctions to participants in advance most of the time or always. (I4)	10l.a	100.0	5.7	*	*
The judge rarely or never reverses the team’s decisions regarding incentives, based on interactions during court appearances. (I5)	10l.b	94.3	8.6	0.804	-.083
The judge rarely or never reverses the team’s decisions regarding incentives, based on interactions during court appearances. (I6)	10l.c	94.3	5.7	0.804	-.083
<b>KR20 Coefficient</b>					0.641

**Exhibit 42. Distribution of Adherence Scores for Guideline 3.3**



**Exhibit 43. Distribution of Scores with no Need for Revision for Guideline 3.3**



### **Guideline 3.4.**

**Weekly reports on each participant’s progress across all aspects of the treatment plan should provide input for team meetings that review progress for participants and consider incentives and sanctions.**

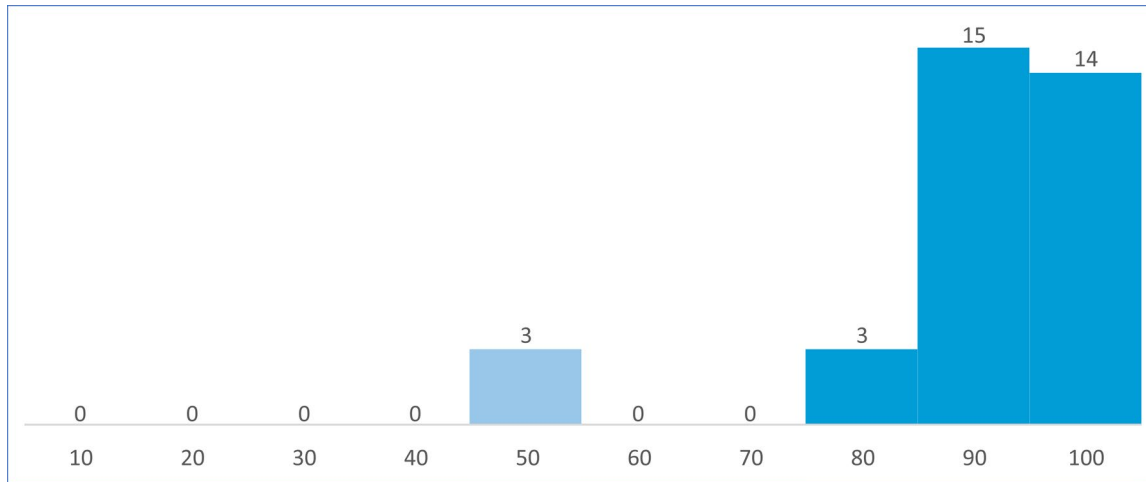
As shown in Exhibit 44, the various indicators had item-rest correlations ranging from 0.054 to 0.471 with an overall KR20 coefficient of 0.457. It became clear based on our analyses and a closer look at the set of indicators that were designated for Guideline 3.4 that the original set of items did not hold together as a single scale but appears to measure two different constructs. The first four indicators refer to the treatment plan, while the remaining indicators are about the regular staffings where participant progress was reviewed. Additionally, indicator 1 (treatment plan addresses risks and needs), indicator 2 (treatment providers works with participant), and indicator 4 (family members provide input to treatment plans) are not aligned with the intent of Guideline 3.4. Almost all courts in the sample (91.4%) had high alignment with this guideline (see Exhibit 45) and indicator 6 appeared to be challenging in terms of how respondents understood the question, requiring revisions based on our data collection activities for 20% of respondents (see Exhibit 46).

**Resulting Changes to Validated Court Self-Assessment:** Indicators 1, 2 and 4 will be removed from scoring Guideline 3.4 and will no longer appear on the CSA. We revised indicator 6 to improve the ease of understanding for the respondents to the CSA. Results from our analyses for this set of indicators will also inform a revision to the wording of Guideline 3.4, with more emphasis on the case plan rather than the treatment plan.

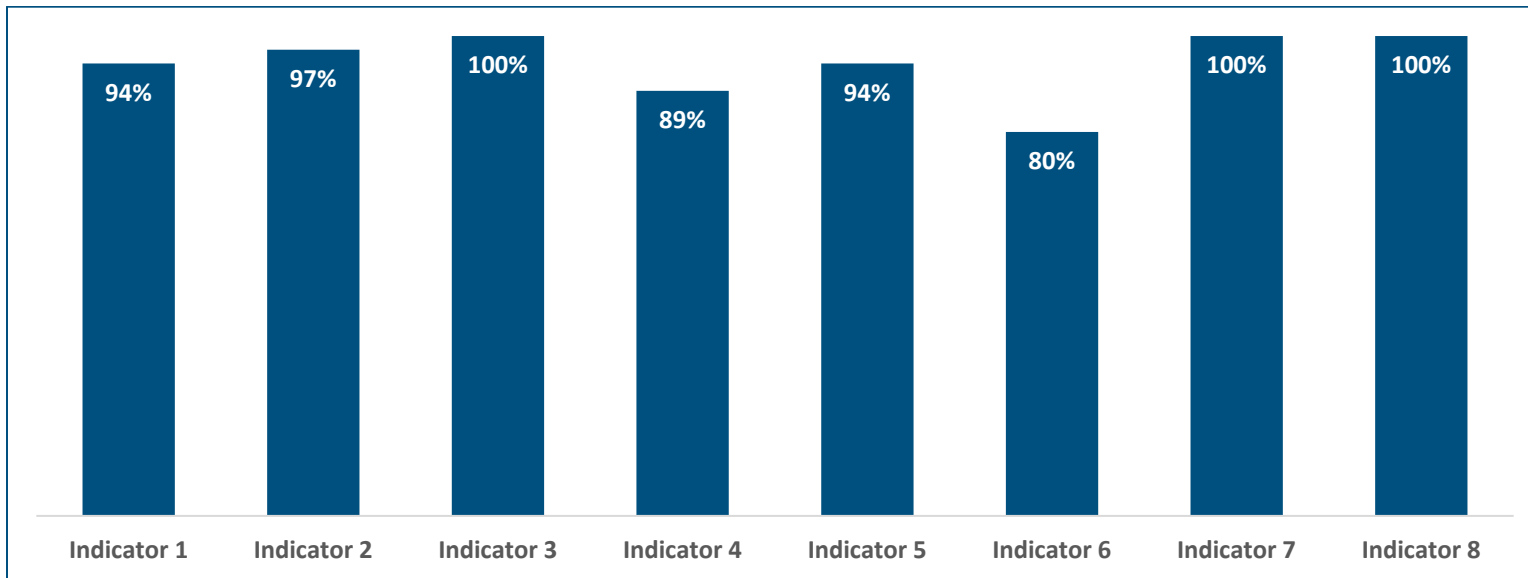
#### Exhibit 44: Indicator-Specific Results for Guideline 3.4

CSA Question	CSA Item	Percent Adherence	Percent Revised	Item-rest correlation	KR20 w/out Item
Treatment plans address risks and needs of the participants. (I1)	8l.a	97.1	5.7	0.340	0.404
The treatment provider is responsible for working with the participant on the treatment plan. (I2)	8l.b	91.4	2.9	0.471	0.310
The entire team discusses progress of the participant related to the treatment plan. (I3)	8l.c	88.6	0.0	0.341	0.358
Participants or parents/guardians/family members provide input into adjustments to treatment plans when they are needed. (I4)	8l.d	80.0	11.4	0.129	0.471
The JDTC holds meetings (staffings) to discuss participant progress at least weekly. (I5)	9a	74.3	5.7	0.054	0.525
All JDTC team members attend regular meetings (staffings) where participant progress is discussed. (I6)	5a; 9b.a-9b.j	77.1	20.0	0.160	0.457
Drug test results are shared among the team to assist in team response to youth behavior. (I7)	9c.a	97.1	0.0	0.340	0.404
Adherence to supervision requirements are shared among the team to assist in team response to youth behavior. (I8)	9c.b	100.0	0.0	*	*
<b>KR20 Coefficient</b>					0.457

**Exhibit 45. Distribution of Adherence Scores for Guideline 3.4**



**Exhibit 46. Distribution of Scores with no Need for Revision for Guideline 3.4**





## Guideline 4.1.

**Needs assessments should include information for each participant on: use of alcohol or other drugs; criminogenic needs; mental health needs; history of abuse or other traumatic experiences; well-being needs and strengths; parental drug use, parental mental health needs, and parenting skills.**

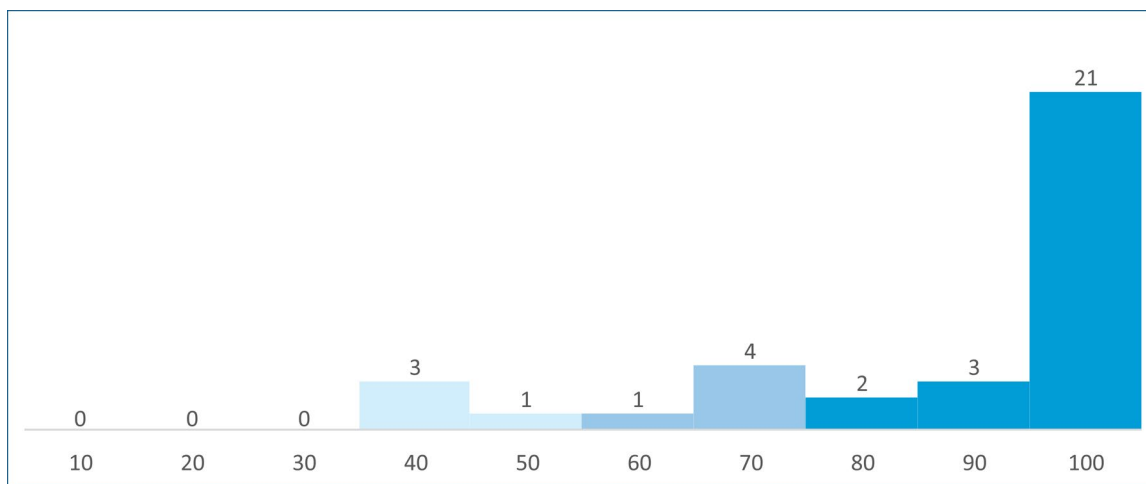
Overall the indicators for Guideline 4.1 have a good fit with a KR20 coefficient of 0.863 and item-rest correlations ranging from 0.251 to 0.813, as shown in Exhibit 47. Almost no courts in the sample had to revise answer they provided on the CSA (see also Exhibit 49). That said, given that the scale has 13 indicators and Indicator 1 (a validated needs assessment tool) and Indicator 2 (no modifications to needs assessment tool) are strongly related to the other indicators, we determined that the intent of the guideline is captured by focusing on the content from indicators 3-13. We also noted that some JDTCs used an external needs assessment process, and by scoring the first two indicators as part of this guideline, it actually disadvantaged those JDTCs using an external needs assessment process. About three-quarters of the courts in the sample had high alignment with the guideline with only 11.4% having low alignment (see Exhibit 48).

**Resulting Changes to Validated Court Self-Assessment:** While they are retained on the CSA, indicators 1 and 2 will no longer be scored as part of Guideline 4.1.

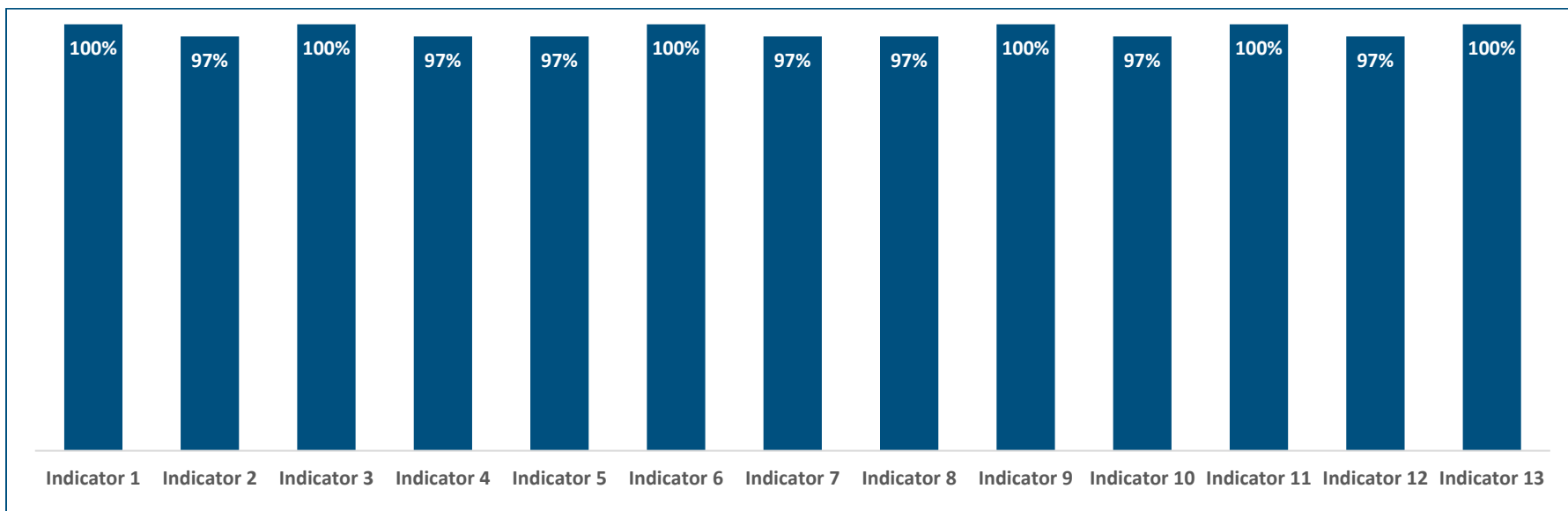
### Exhibit 47: Indicator-Specific Results for Guideline 4.1

CSA Question	CSA Item	Percent Adherence	Percent Revised	Item-rest correlation	KR20 w/out Item
The JDTC uses a validated needs assessment tool. (I1)	4i; 4j	82.9	0.0	0.251	0.871
The needs assessment tool has not been edited or modified in any way. (I2)	4k	71.4	2.9	0.440	0.862
In the needs assessment, the JDTC assesses:					
<ul style="list-style-type: none"> <li>Use of alcohol and other drugs (I3)</li> </ul>	4o.1	100.0	0.0	*	*
<ul style="list-style-type: none"> <li>Mental health issues/needs (I4)</li> </ul>	4o.2	94.3	2.9	0.212	0.868
<ul style="list-style-type: none"> <li>History of physical, sexual, or emotional abuse (I5)</li> </ul>	4o.3	85.7	2.9	0.692	0.843
<ul style="list-style-type: none"> <li>History of other trauma (I6)</li> </ul>	4o.4	85.7	0.0	0.623	0.848
<ul style="list-style-type: none"> <li>Suicidal ideation (I7)</li> </ul>	4o.5	82.9	2.9	0.813	0.834
<ul style="list-style-type: none"> <li>Wellbeing and strengths of the youth (I8)</li> </ul>	4o.6	82.9	2.9	0.552	0.852
<ul style="list-style-type: none"> <li>Wellbeing and strengths of the family (I9)</li> </ul>	4o.7	80.0	0.0	0.617	0.847
<ul style="list-style-type: none"> <li>Parental/guardian/familial drug use (I10)</li> </ul>	4o.8	88.6	2.9	0.607	0.849
<ul style="list-style-type: none"> <li>Parental/guardian/familial mental health (I11)</li> </ul>	4o.9	74.3	0.0	0.697	0.841
<ul style="list-style-type: none"> <li>Parental skills (I12)</li> </ul>	4o.10	60.0	2.9	0.609	0.849
<ul style="list-style-type: none"> <li>Educational needs (I13)</li> </ul>	4o.11	94.3	0.0	0.442	0.860
<b>KR20 Coefficient</b>					0.863

**Exhibit 48. Distribution of Adherence Scores for Guideline 4.1**



**Exhibit 49. Distribution of Scores with no Need for Revision for Guideline 4.1**



## Guideline 4.2.

**Case management and treatment plans should be individualized and culturally appropriate, based on an assessment of the youth’s and family’s needs.**

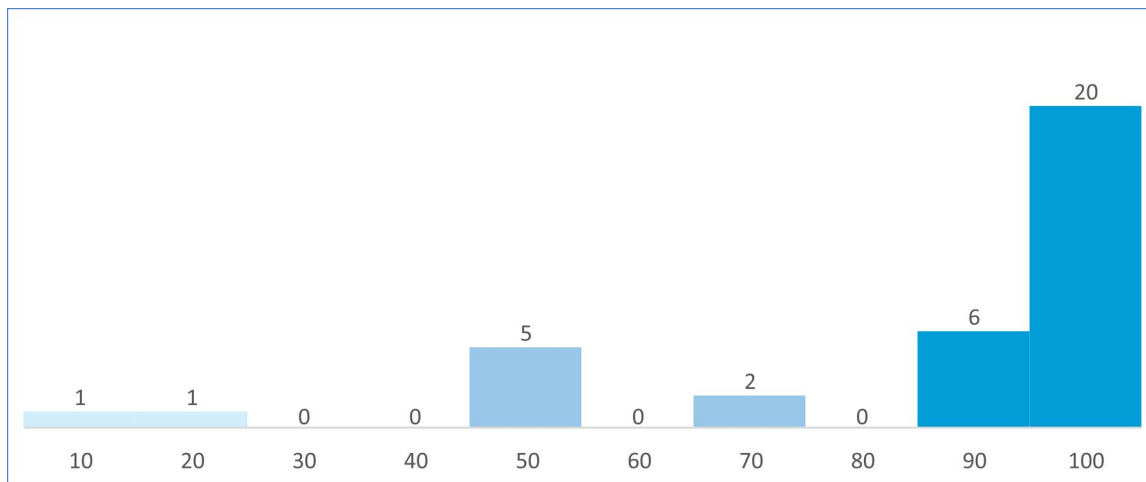
As seen in Exhibit 50, item-rest correlations ranged from 0.392 to 0.649 with an overall KR20 coefficient of 0.769. The reliability would not improved by dropping any indicators. Across all indicators the sample courts had adherence between 80-86%. As shown in Exhibit 50 and 52, the revision rate (14.3%– 20.0%) around case management (Indicators 4 and 5), we recognize that the CSA manual should contain an explicit description of what case management entails. About three-fourths of sample courts had high alignment with the guideline (see Exhibit 51).

**Resulting Changes to Validated Court Self-Assessment:** No changes to the CSA or scoring of items for this guideline were made.

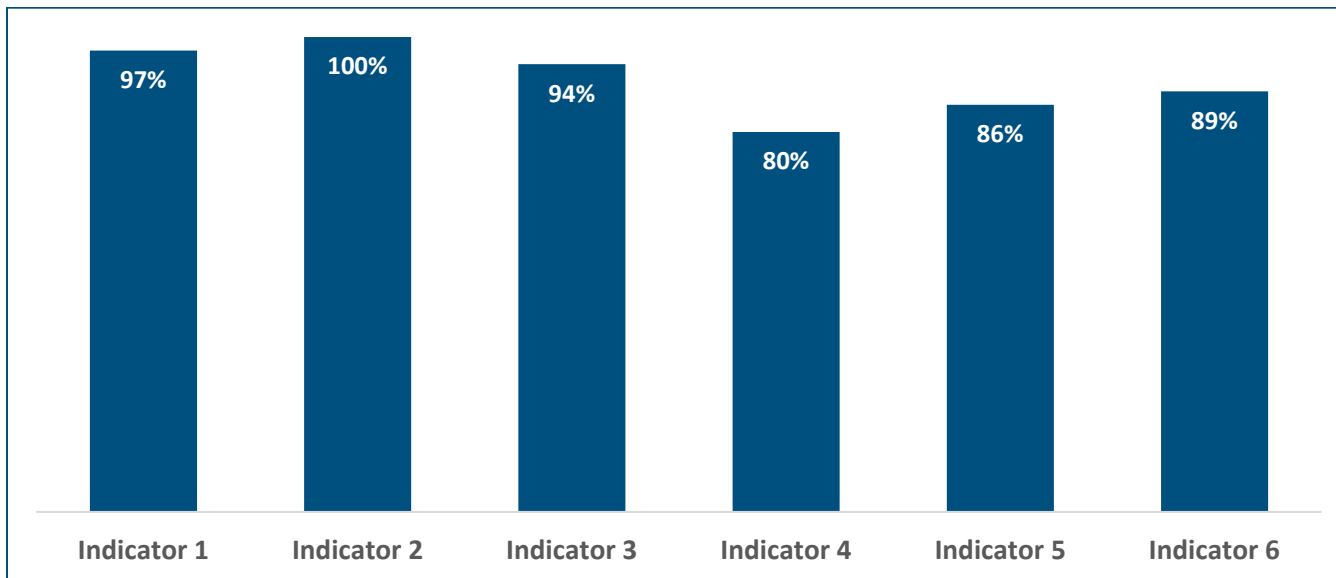
### Exhibit 50: Indicator-Specific Results for Guideline 4.2

CSA Question	CSA Item	Percent Adherence	Percent Revised	Item-rest correlation	KR20 w/out Item
The JDTC uses the information from the needs assessment process to identify which services to provide (or refer to providers). (I1)	4l.b	82.9	2.9	0.512	0.736
The JDTC use the information from the needs assessment process to develop a case plan. (I2)	4l.c	82.9	0.0	0.512	0.736
The JDTC develops an individualized case plan for each participant. (I3)	8a	80.0	5.7	0.506	0.738
Professionals trained in case management provide case management for the JDTC. (I4)	8d.a	82.9	20.0	0.512	0.736
JDTC case management is structured through case management plans created by staff with specific training in developing individualized and culturally appropriate case plans. (I5)	8d.b	82.9	14.3	0.649	0.699
Participants or parents/guardians/family members provide input into adjustments to treatment plan when they are needed. (I6)	8l.d	85.7	11.4	0.392	0.764
<b>KR20 Coefficient</b>					0.769

**Exhibit 51. Distribution of Adherence Scores for Guideline 4.2**



**Exhibit 52. Distribution of Scores with no Need for Revision for Guideline 4.2**



## Guideline 5.1.

**For each participant, the application of incentives should equal or exceed the application of sanctions by the JDTC. Incentives should be favored over sanctions.**

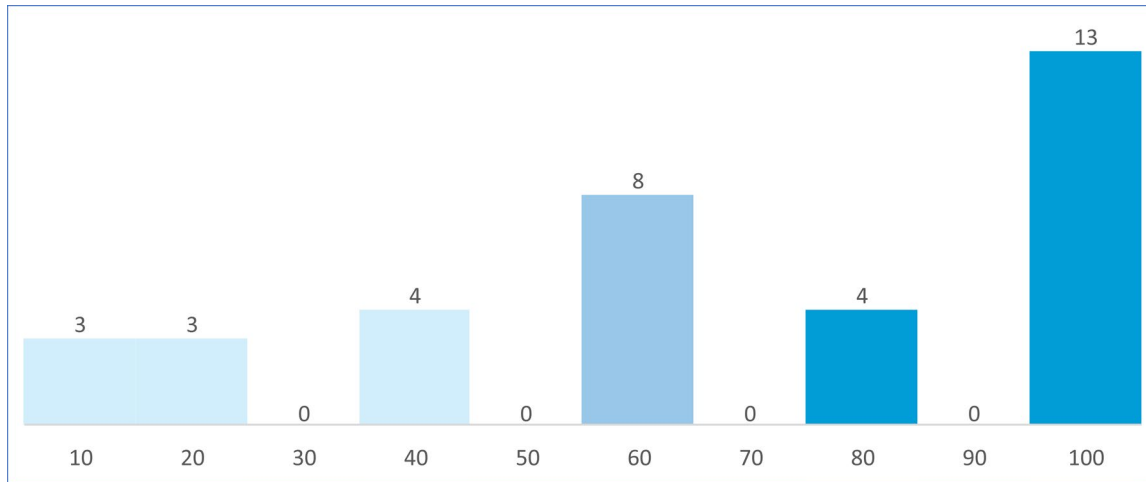
As shown in Exhibit 53, across Indicators 1-4, which describe the data courts collect and review around incentives and sanctions, the item-rest correlations were strong, ranging from 0.600 to 0.726. Indicator 5, which describes assigning sanctions and incentives, had a lower item-rest correlation (0.202) but should be retained because it reflects the key intent of Guideline 5.1. Even with Indicator 5, the KR20 coefficient was good at 0.784. As shown in Exhibit 54, while almost half (49%) of courts in this sample had high compliance with the guideline, more than one in five had moderate alignment (23%) and more than one in four (29%) had low alignment. Finally, as shown in Exhibit 55, these items from the CSA did not require assistance for respondents to provide the response that accurately reflected their current practices.

**Resulting Changes to Validated Court Self-Assessment:** No changes to the CSA or scoring of items for this guideline were made.

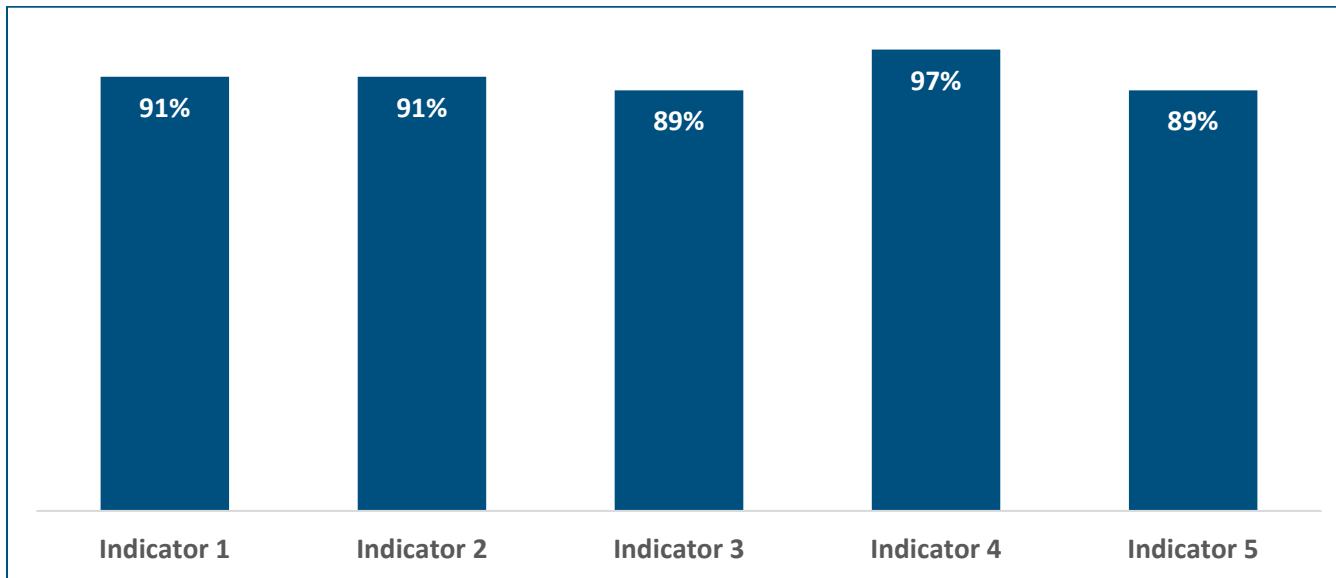
### Exhibit 53: Indicator-Specific Results for Guideline 5.1

CSA Question	CSA Item	Percent Adherence	Percent Revised	Item-rest correlation	KR20 w/out Item
The JDTC keeps data on numbers of incentives for each participant. (11)	10e.a	80.0	8.6	0.600	0.734
The JDTC keeps the data on numbers of sanctions for each participant. (12)	10e.b	82.9	8.6	0.654	0.721
The JDTC reviews the data on numbers of incentives for each participant. (13)	10f.a	48.6	11.4	0.726	0.682
The JDTC reviews the data on numbers of sanctions for each participant. (14)	10f.b	51.4	2.9	0.708	0.689
The JDTC assigns more incentives than sanctions for each participant. (15)	10g	68.6	11.4	0.202	0.855
<b>KR20 Coefficient</b>					<b>0.784</b>

**Exhibit 54. Distribution of Adherence Scores for Guideline 5.1**



**Exhibit 55. Distribution of Scores with no Need for Revision for Guideline 5.1**



## Guideline 5.2.

**Participants should feel that the assignment of incentives and sanctions is fair: Application should be consistent; i.e., participants receive similar incentives and sanctions as others who are in the court for the same reasons; and, without violating the principle of consistency described above, it is also valuable to individualize incentives and sanctions.**

As shown in Exhibit 56, indicators 1-4 had moderate to strong item-rest correlations ranging from 0.576 to 0.742. Indicator 5 (participants can challenge positive drug tests) had a lower item-rest correlation ( $r = 0.114$ ) and its removal from the scale would increase the KR20 coefficient from 0.756 to 0.834. Based on our interviews with JDTC respondents, we found that allowing participants to option to challenge drug tests is standard practice across the JDTCs, and as such, does not add to the capacity of this set of items to distinguish among JDTCs based on degree of alignment with this guideline. As shown in Exhibits 56 and 58, the first four indicators had very low revision rates with only one or two courts in the sample needing to change their answer. Over three-fourths of courts had high alignment with the guidelines with 17% having low alignment (see Exhibit 57).

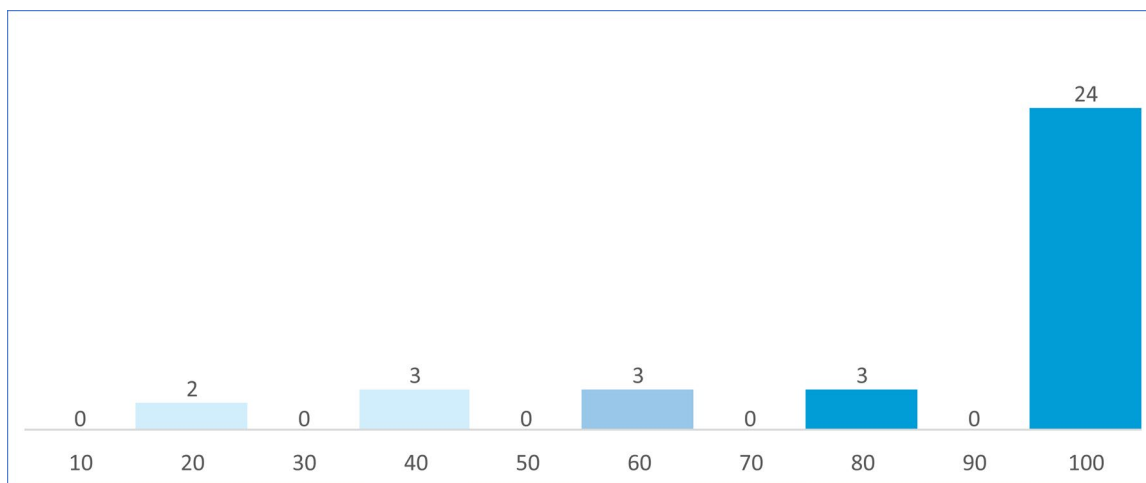
**Resulting Changes to Validated Court Self-Assessment:** Indicator 5 will be removed from scoring Guideline 5.2 and the CSA.



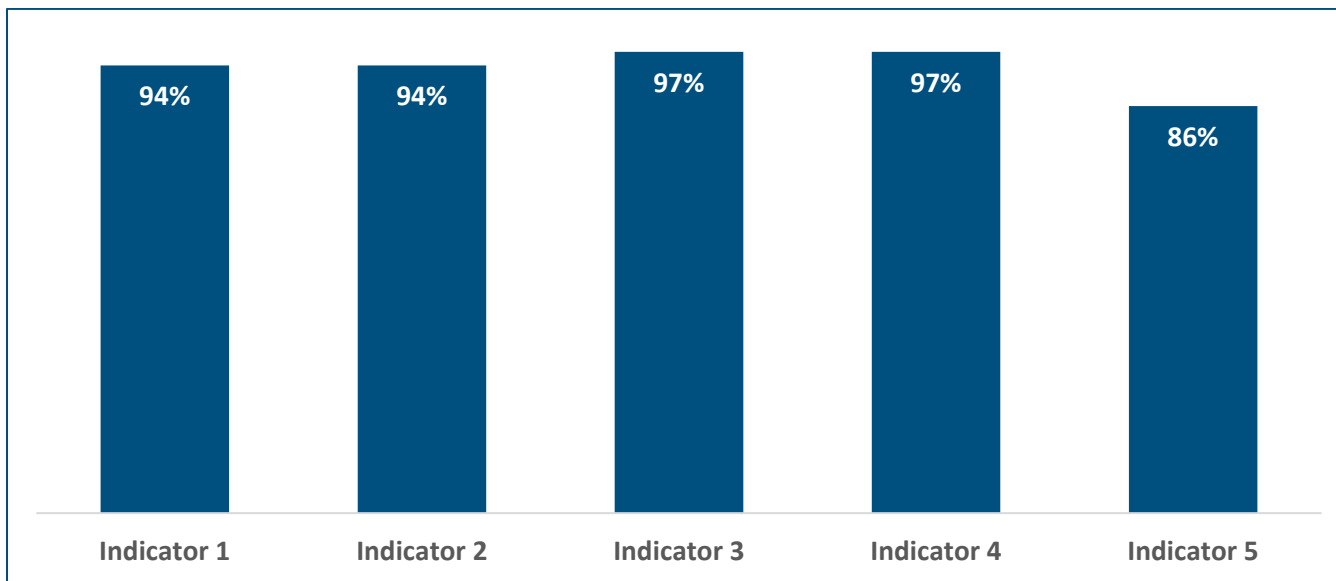
### Exhibit 56: Indicator-Specific Results for Guideline 5.2

CSA Question	CSA Item	Percent Adherence	Percent Revised	Item-rest correlation	KR20 w/out Item
The JDTC sometimes or always gives participants a written list of the behaviors that lead to incentives. (I1)	10a.b	88.6	5.7	0.558	0.703
The JDTC sometimes or always allows participants to identify possible incentives through the case planning process. (I2)	10a.c	80.0	5.7	0.702	0.638
The JDTC sometimes or always gives participants a written list of behaviors that lead to sanctions. (I3)	10b.b	91.4	2.9	0.576	0.703
The JDTC sometimes or always allows participants to identify possible sanctions through the case planning process. (I4)	10b.c	77.1	2.9	0.742	0.618
The JDTC always gives participants the option to challenge the result of positive drug tests. (I5)	10d.f	88.6	14.3	0.114	0.834
<b>KR20 Coefficient</b>					0.756

### Exhibit 57. Distribution of Adherence Scores for Guideline 5.2



**Exhibit 58. Distribution of Scores with no Need for Revision for Guideline 5.2**



### Guideline 5.3.

**Financial fees and detention should be considered only after other graduated sanctions have been attempted. Detention should be used as a sanction infrequently and only for short periods of time when the youth is a danger to himself/herself or the community, or may abscond.**

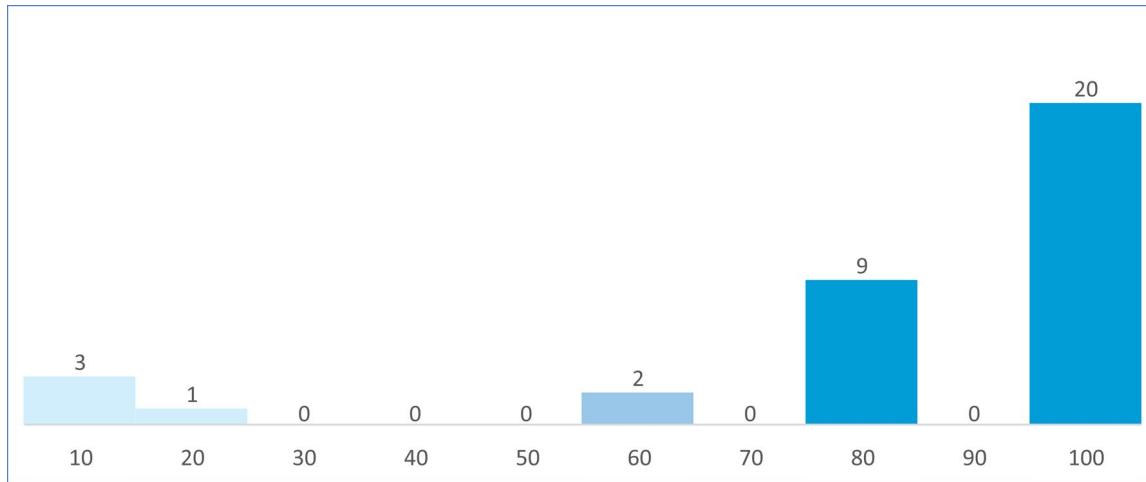
As shown in Exhibit 59, indicators 2, 4, and 5, focusing on the use of detention as a sanction, had strong item-rest correlations ranging from 0.707 to 0.820. In contrast, indicator 1 (use of fees) had a low item-rest correlation ( $r = 0.252$ ) and its removal would increase the KR20 coefficient to 0.914. Indicator 4, which describes using detention when youth may abscond or are a danger to themselves, had one of the highest rates of revision with about one in three courts in the sample needing to change their response after clarification about the question (see Exhibit 61). Most JDTCs in our sample (66%) had low compliance with this guideline, with about one in four having high alignment (see Exhibit 60).

**Resulting Changes to Validated Court Self-Assessment:** Indicator 1 is being removed from the CSA and will no longer be scored as part of Guideline 5.3. Guideline 5.3 will be revised to focus only on the use of detention as a sanction.

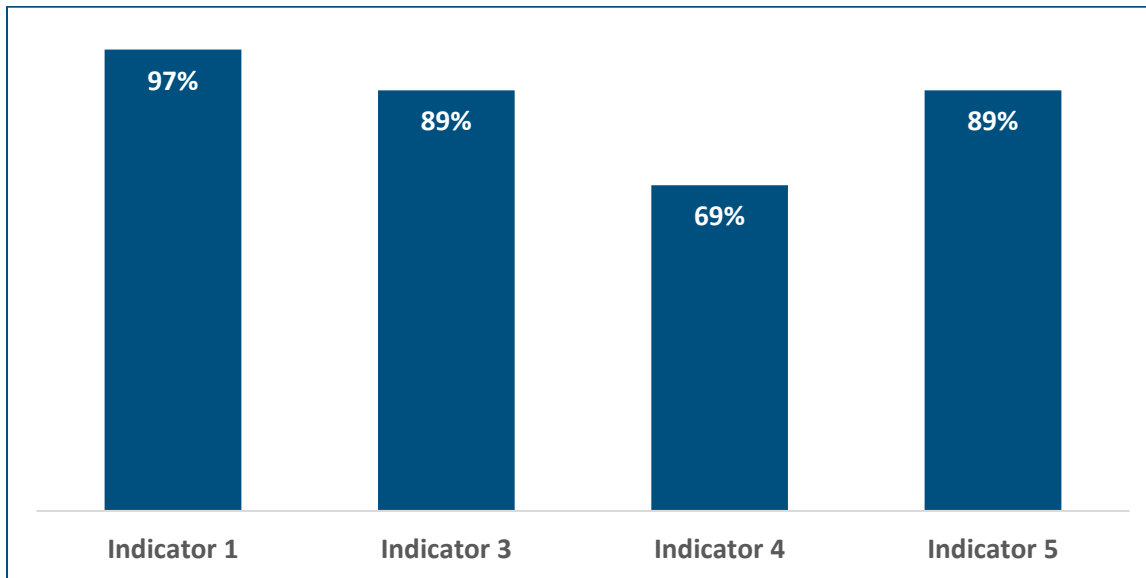
#### Exhibit 59: Indicator-Specific Results for Guideline 5.3

CSA Question	CSA Item	Percent Adherence	Percent Revised	Item-rest correlation	KR20 w/out Item
The JDTC does not use fees as a sanction in response to participant behavior including noncompliance. (I1)	10c	82.9	2.9	0.252	0.914
Detention is not used as a sanction by the JDTC. (I2)	10h	22.9	0.0	0.820	0.682
If the JDTC uses detention as a sanction, it also uses writing essays, sit sanctions, and/or community service as sanctions. (I3)	10h;10c	100.0	11.4	*	*
The JDTC uses detention as a sanction only when youth are a danger to themselves or may abscond. (I4)	10i.a -10i.m	28.6	31.4	0.829	0.670
When a detention sanction is used, it lasts no longer than 1-2 days. (I5)	10j.a-10j.f	34.3	11.4	0.707	0.736
<b>KR20 Coefficient</b>					0.817

**Exhibit 60. Distribution of Adherence Scores for Guideline 5.3**



**Exhibit 61. Distribution of Scores with no Need for Revision for Guideline 5.3**



## Guideline 5.4.

Ongoing monitoring and case management of youth participants should focus less on the detection of violations of program requirements than on addressing youth’s needs in a holistic manner, including a strong focus on behavioral health treatment and family intervention.

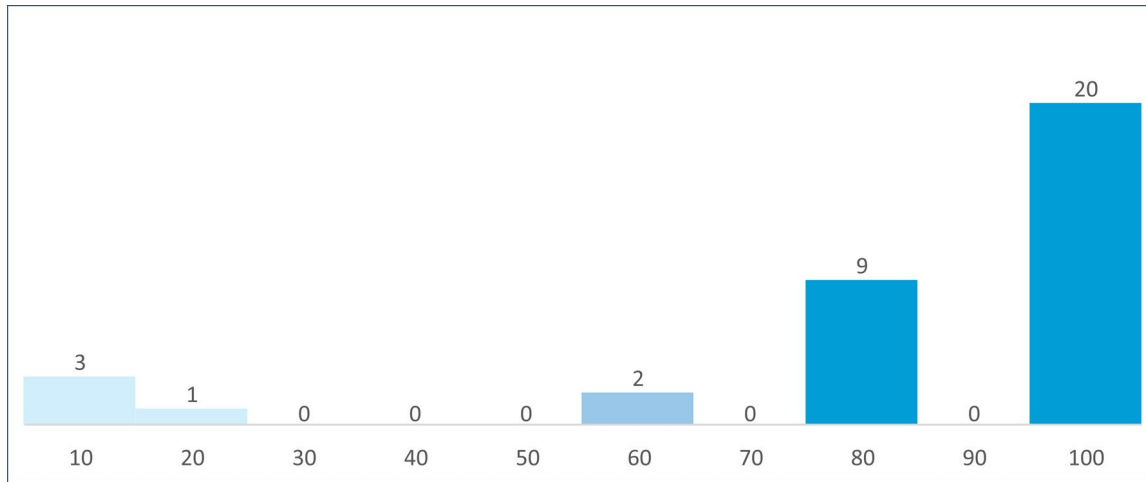
As seen in Exhibit 62, Indicators 1-4 had strong item-rest correlations ranging from 0.650 to 0.873 and overall very low revision rates across courts in the sample (see also Exhibit 64). Indicator 5, which addresses changes in the case plans, had a much lower item-rest correlation ( $r = 0.329$ ) and the K20 coefficient would be improved from 0.845 to 0.912 without it. We believe indicator 5 is focused on key elements of Guideline 5.4, and as such, we are not removing it. Over 80% of sample courts had high compliance with the guideline with only about one in ten having low alignment (see Exhibit 63).

**Resulting Changes to Validated Court Self-Assessment:** No changes to the CSA or scoring of items for this guideline were made.

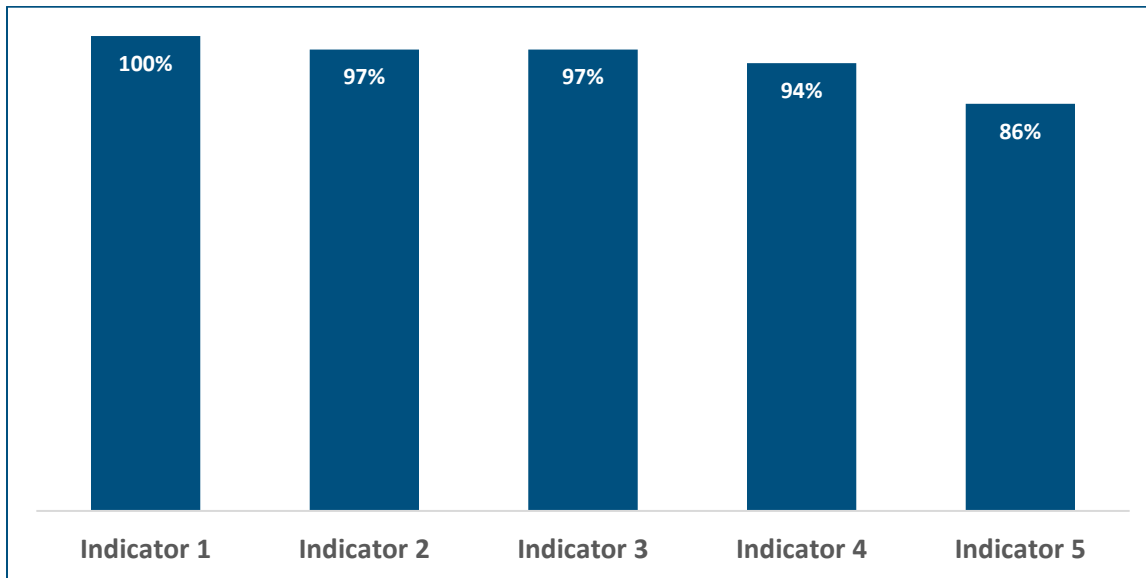
### Exhibit 62: Indicator-Specific Results for Guideline 5.4

CSA Question	CSA Item	Percent Adherence	Percent Revised	Item-rest correlation	KR20 w/out Item
The JDTC develops an individualized case plan for each JDTC participant. (I1)	8a	80.0	0.0	0.650	0.813
The JDTC case plan always includes requirements of participants’ supervision and court program. (I2)	8b.a	82.9	2.9	0.727	0.792
The JDTC case plan always includes treatment requirements. (I3)	8b.b	85.7	2.9	0.828	0.768
The JDTC case plan always (or on a case-by-case basis) includes referrals to programs targeting family needs. (I4)	8b.c	88.6	5.7	0.873	0.765
When the JDTC makes changes to individual case plans, it is more frequently to address youth and family needs, and to connect youth with behavioral health treatment, than it is to address violations of requirements. (I5)	8e.a-d	71.4	14.3	0.329	0.912
<b>KR20 Coefficient</b>					0.845

**Exhibit 63. Distribution of Adherence Scores for Guideline 5.4**



**Exhibit 64. Distribution of Scores with no Need for Revision for Guideline 5.4**



## Guideline 5.5.

**A participant’s failure to appear for a drug test and otherwise tampering with drug test results should be addressed with immediate, graduated sanctions.**

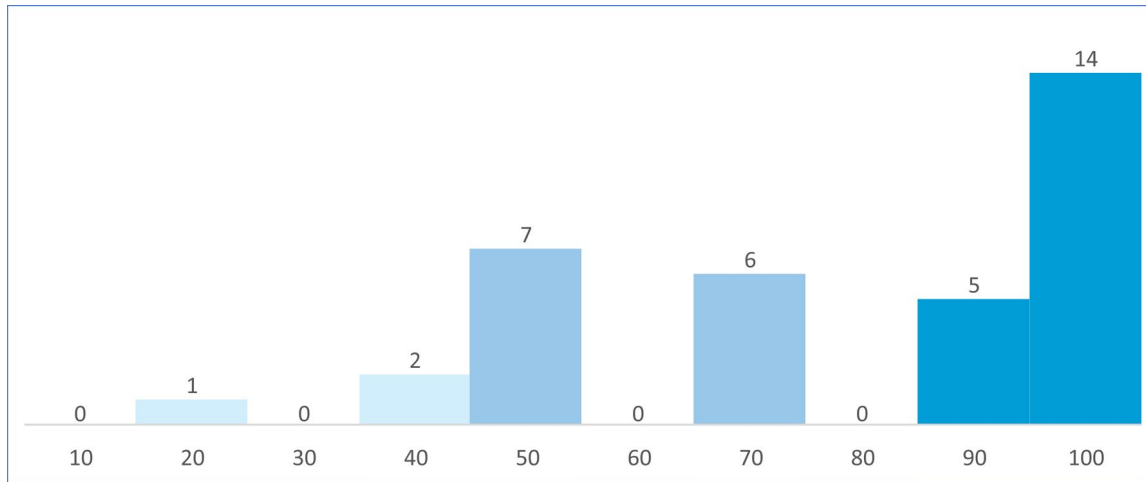
As shown in Exhibit 65, all the indicators had moderate to strong item-rest correlations ranging from 0.315 to 0.671. The KR20 coefficient (0.716) suggests a good fit and dropping any indicator would not substantially improve the reliability. Although revisions for the indicators remained infrequent across the sample courts, defining “immediate” in Indicator 4 (imposing immediate sanctions) would likely improve the 11.4% revision rate (see also Exhibit 67). As shown in Exhibit 66, more than half of JDTCs in our sample had high compliance (57%) with Guideline 5.5, with about 37% having moderate alignment and a few courts (9%) with low alignment.

**Resulting Changes to Validated Court Self-Assessment:** No changes to the CSA or scoring of items for this guideline were made.

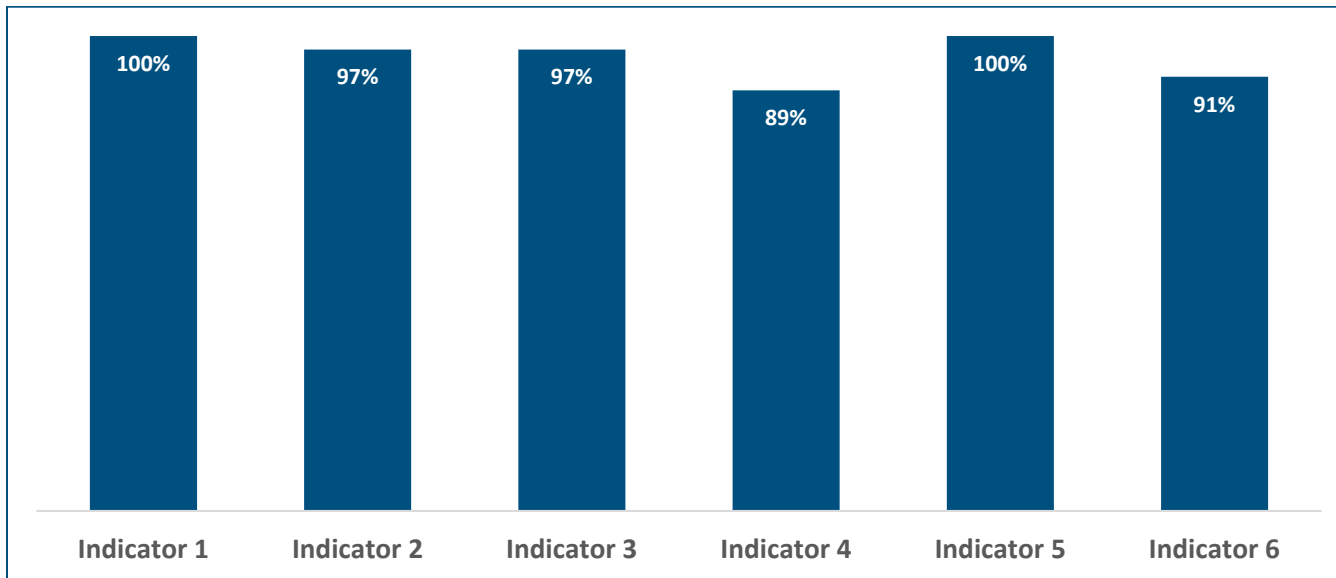
### Exhibit 65: Indicator-Specific Results for Guideline 5.5

CSA Question	CSA Item	Percent Adherence	Percent Revised	Item-rest correlation	KR20 w/out Item
The JDTC team always explains to participants the expectations to show up for drug testing. (I1)	11b.a	100.0	0.0	*	*
The JDTC team always explains to participants expectations for not tampering with the drug test. (I2)	11b.b	97.1	2.9	0.315	0.732
The JDTC team always imposes immediate sanctions (i.e., as soon as possible) for failure to appear for a drug test. (I3)	11b.c	57.1	2.9	0.671	0.575
The JDTC team always imposes immediate sanctions (i.e., as soon as possible) for tampering with a drug test. (I4)	11b.d	80.0	11.4	0.477	0.668
The JDTC team always imposes graduated sanctions for failure to appear for a drug test. (I5)	11b.e	62.9	0.0	0.506	0.657
The JDTC team always imposes graduated sanctions for tampering with a drug test. (I6)	11b.f	57.1	8.6	0.477	0.672
<b>KR20 Coefficient</b>					0.716

**Exhibit 66. Distribution of Adherence Scores for Guideline 5.5**



**Exhibit 67. Distribution of Scores with no Need for Revision for Guideline 5.5**





## Guideline 5.6.

The JDTC team should be prepared to respond to any return to substance use in ways that consider the youth's risk, needs, and responsivity.

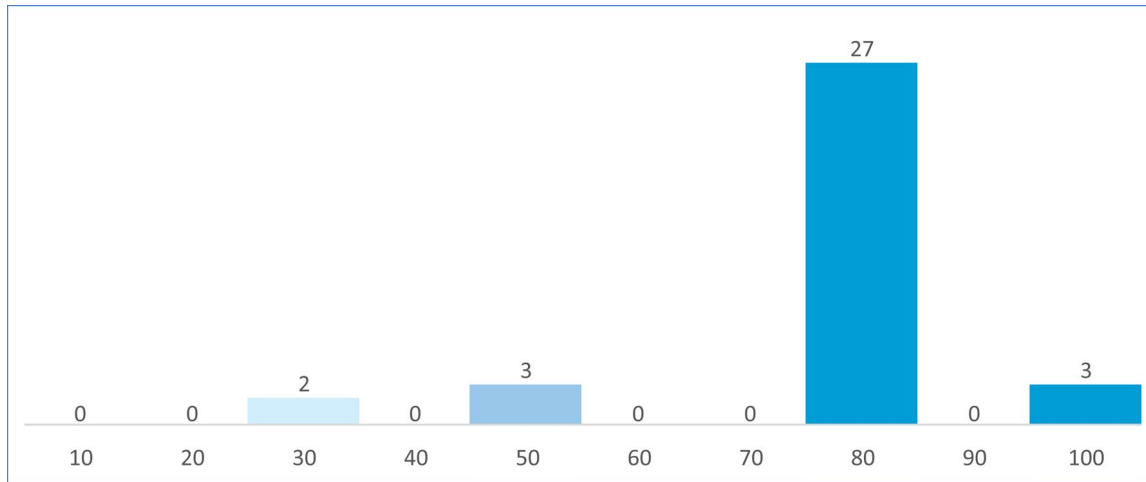
As shown in Exhibit 68, the item-rest correlations generally weak, ranging from 0.205 to 0.283 for all indicators except Indicator 1, which addressed training in the risk-needs-responsivity model. Removing Indicator 1 would improve the reliability, with the KR20 coefficient rising from 0.281 to 0.447. Only three JDTCs in the sample revised their responses to any of the indicators (see also Exhibit 70). Overall, adherence to the guideline was very high, with over 85% of sample courts having strong alignment with Guideline 5.6 (see Exhibit 69).

**Resulting Changes to Validated Court Self-Assessment:** Indicator 1 will no longer be scored as part of Guideline 5.6, although it remains on the CSA as it is scored as part of Guideline 1.4.

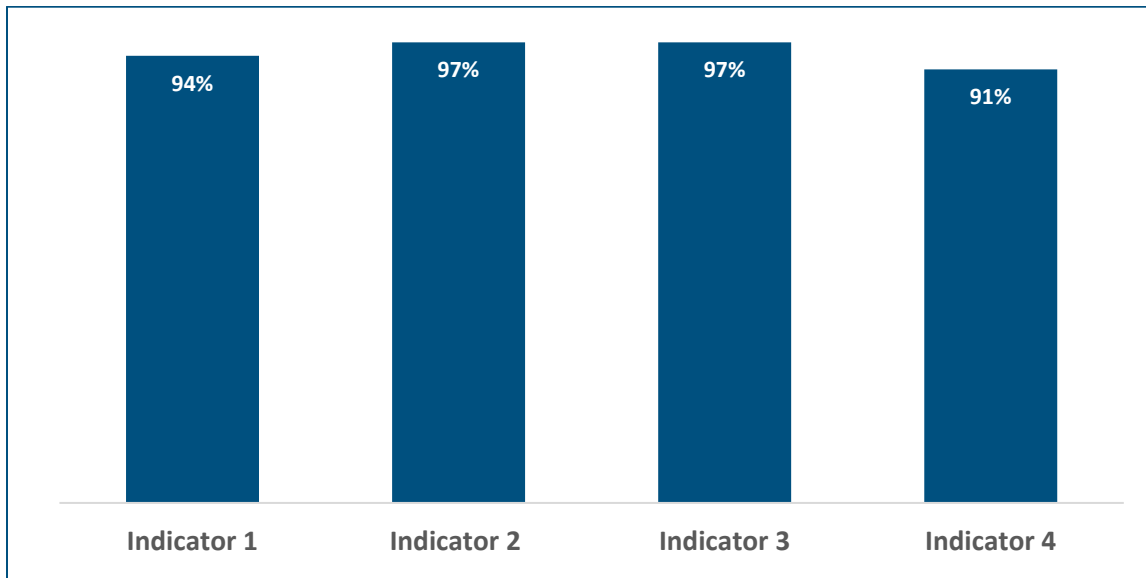
### Exhibit 68: Indicator-Specific Results for Guideline 5.6

CSA Question	CSA Item	Percent Adherence	Percent Revised	Item-rest correlation	KR20 w/out Item
JDTC team members have received formal training in the risk-needs-responsivity (RNR) model. (I1)	6g.k	11.4	5.7	-0.014	0.447
The JDTC responds to the return to substance use by reevaluating the participant's treatment plan. (I2)	10d.b	97.1	2.9	0.283	0.144
The way the JDTC responds to the return to substance use depends on the phase/level of the participant. (I3)	10d.c	94.3	2.9	0.205	0.165
The way the JDTC responds to the return to substance use depends on an assessment of participant's unique risk and needs at that point. (I4)	10d.e	85.7	8.6	0.209	0.123
<b>KR20 Coefficient</b>					0.281

**Exhibit 69. Distribution of Adherence Scores for Guideline 5.6**



**Exhibit 70. Distribution of Scores with no Need for Revision for Guideline 5.6**



## Guideline 6.1.

**The JDTC should have access to and make effective use of a continuum of evidence-based substance use treatment resources—from in-patient residential treatment to outpatient services.**

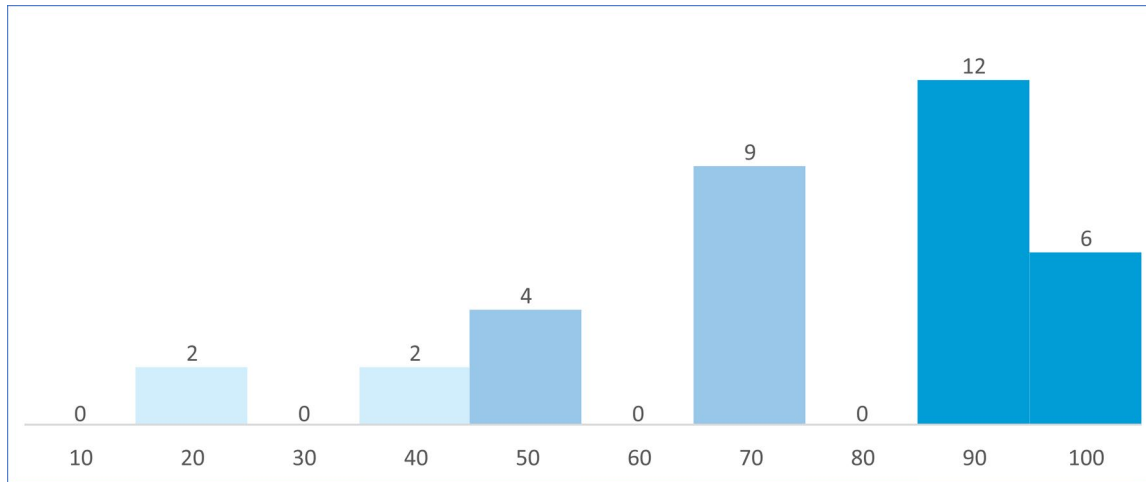
In Exhibit 71, we present the item-rest correlations among the indicators for Guideline 6.1, which range from 0.297 to 0.525. Overall fit is sufficient with the KR20 coefficient of 0.618. As shown in Exhibits 71 and 73, JDTCs in the sample showed a wide range of revision rates from 3% for indicator 3 (outpatient group) and indicator 5 (day treatment) to 26% for indicator 1 (detoxification services). They also varied on adherence to the specific indicators, with almost all JDTCs in the sample (n=34) having access to outpatient services as compared to only about one in three having access to day treatment. About half of the JDTCs in our sample had high alignment with the overall guideline, and about two in five had moderate alignment, and only about one in ten had low alignment (see Exhibit 72).

**Resulting Changes to Validated Court Self-Assessment:** No changes to the CSA or scoring of items for this guideline were made.

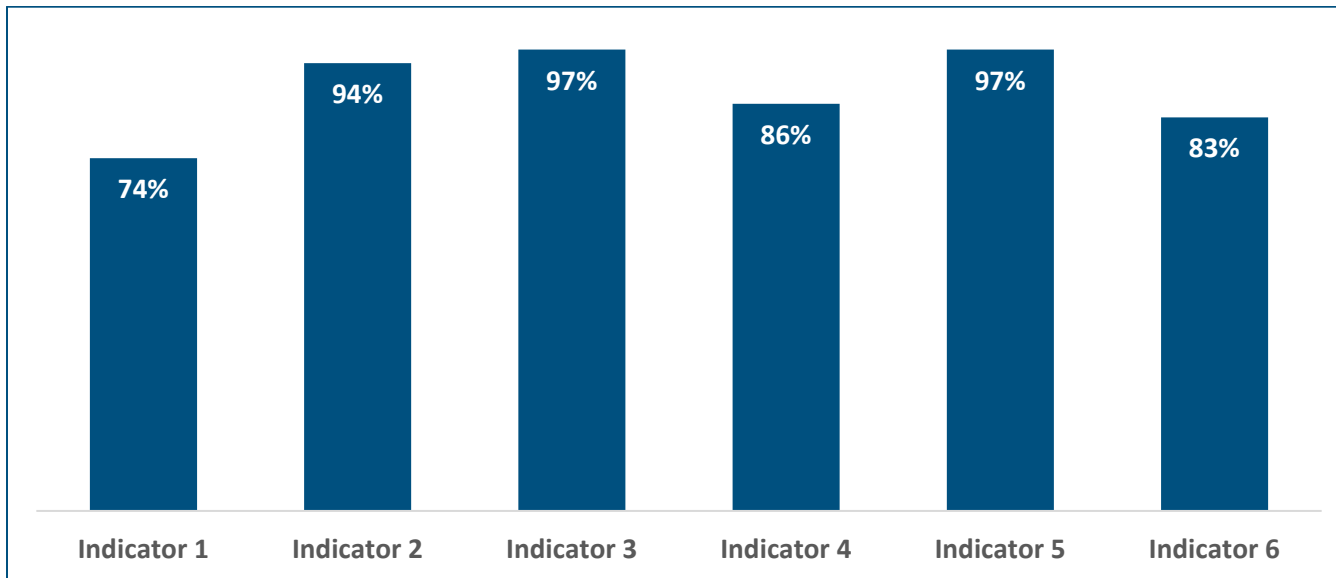
### Exhibit 71: Indicator-Specific Results for Guideline 6.1

CSA Question	CSA Item	Percent Adherence	Percent Revised	Item-rest correlation	KR20 w/out Item
When the following services are indicated by the needs assessment, JDTC participants are required to attend:					
• Detoxification services (I1)	8f.a	45.7	25.7	0.297	0.612
• Outpatient individual treatment sessions (I2)	8f.b	97.1	5.7	0.310	0.606
• Outpatient group treatment sessions (I3)	8f.c	97.1	2.9	0.310	0.606
• Intensive outpatient treatment sessions (I4)	8f.d	82.9	14.3	0.532	0.499
• Day treatment (I5)	8f.e	34.3	2.9	0.306	0.602
• Residential treatment/inpatient care (I6)	8f.f	71.4	17.1	0.525	0.489
<b>KR20 Coefficient</b>					0.618

**Exhibit 72. Distribution of Adherence Scores for Guideline 6.1**



**Exhibit 73. Distribution of Scores with no Need for Revision for Guideline 6.1**



## Guideline 6.2.

**Providers should administer treatment modalities that have been shown to improve outcomes for youth with substance use issues.**

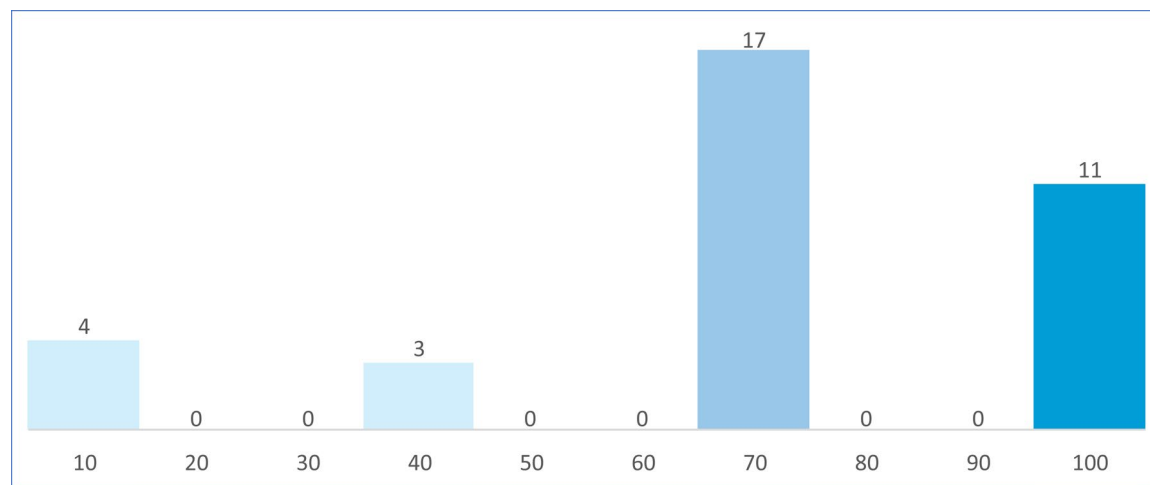
Given that Guideline 6.2 has only three indicators, as shown in Exhibit 74, the lower adherence to Indicator 1 (ACC or ACRA treatment models) as compared to Indicator 2 (CBT and MET) and Indicator 3 (family therapy) likely depressed overall alignment with the guideline. Indicator 1 also had lower item-rest correlation than Indicator 2 and 3, with  $r = 0.222$  as compared to  $r = 0.420$  and  $r = 0.435$  respectively. Almost 70% of courts had low or moderate alignment with the guideline (see Exhibit 75). As shown in Exhibit 76, the revision rates were relatively low for these indicators.

**Resulting Changes to Validated Court Self-Assessment:** To address issues with fit, the treatment models listed in Indicator 1 can be added to Indicator 2. In consideration of the intent of Guideline 6.2, if JDTCs can refer participants to any of the individual treatment options identified in table 8i on the CSA, they would earn one point. If JDTCs can refer participants to any of the family treatment options, then there would be another point earned. If only individual treatment options or family treatment options are available, JDTCs would achieve moderate alignment with the guideline. If both individual and family treatment options are utilized, then the JDTC would achieve high alignment with the guideline.

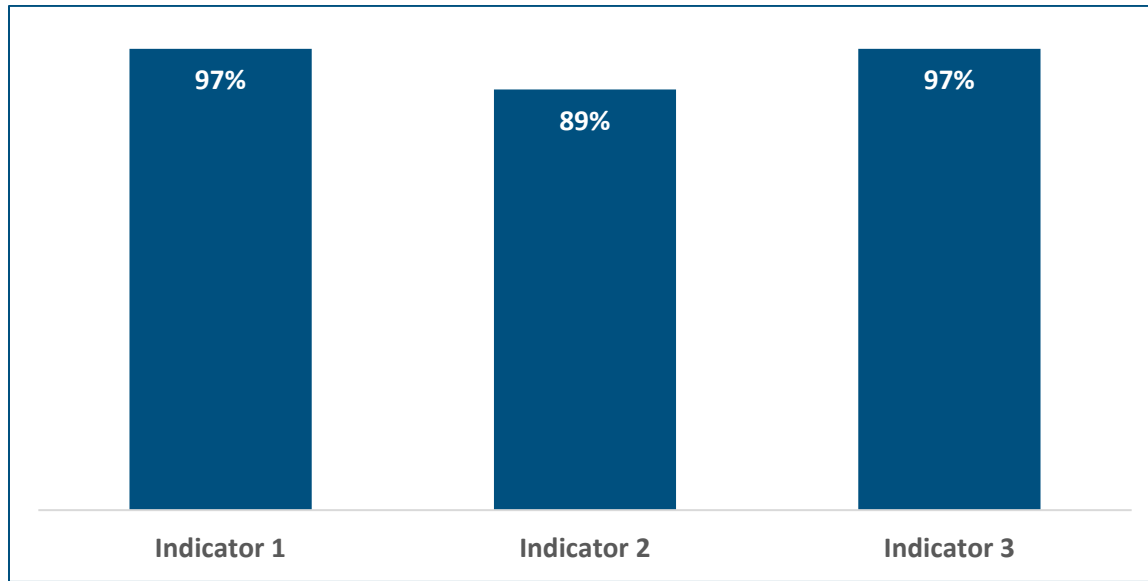
### Exhibit 74: Indicator-Specific Results for Guideline 6.2

CSA Question	CSA Item	Percent Adherence	Percent Revised	Item-rest correlation	KR20 w/out Item
The Assertive Continuing Care or Adolescent Community Reinforcement Approach (ACRA) treatment models are required of JDTC participants. (I1)	8i.a; 8i.j	40.0	2.9	0.222	0.662
Cognitive Behavioral Therapy (CBT), Motivational Enhancement Therapy without Cognitive Behavior Therapy (MET), or Motivational Enhancement Therapy with Cognitive Behavior Therapy (MET/CBT) are treatment models required of JDTC participants. (I2)	8i.b-d	85.7	11.4	0.420	0.350
Brief Strategic Family Therapy (BSFT), Family Behavior Therapy (FBT), Functional Family Therapy (FFT) or Multidimensional Family Therapy (MDFT) are treatment models required of JDTC participants. (I3)	8i.e-i	74.3	2.9	0.435	0.272
<b>KR20 Coefficient</b>					0.531

### Exhibit 75. Distribution of Adherence Scores for Guideline 6.2



**Exhibit 76. Distribution of Scores with no Need for Revision for Guideline 6.2**



### Guideline 6.3.

**Service providers should deliver intervention programs with fidelity to the programmatic models.**

As shown in Exhibit 77, all indicators but indicator 4 (monitoring of treatment fidelity) have strong item-rest correlations ranging from 0.656 to 0.847. Removing Indicator 4 would increase the KR20 coefficient from 0.854 to 0.917. Conversations with JDTC staff during data collection suggested it was not always clear how qualified the JDTC teams are to monitor fidelity of treatment programs. About 77% of sample courts had strong alignment with the guideline (see Exhibit 78). As shown in Exhibits 77 and 79, the JDTCs in our sample rarely needed to change their response to an indicator, with less than one in ten courts needing to revise.

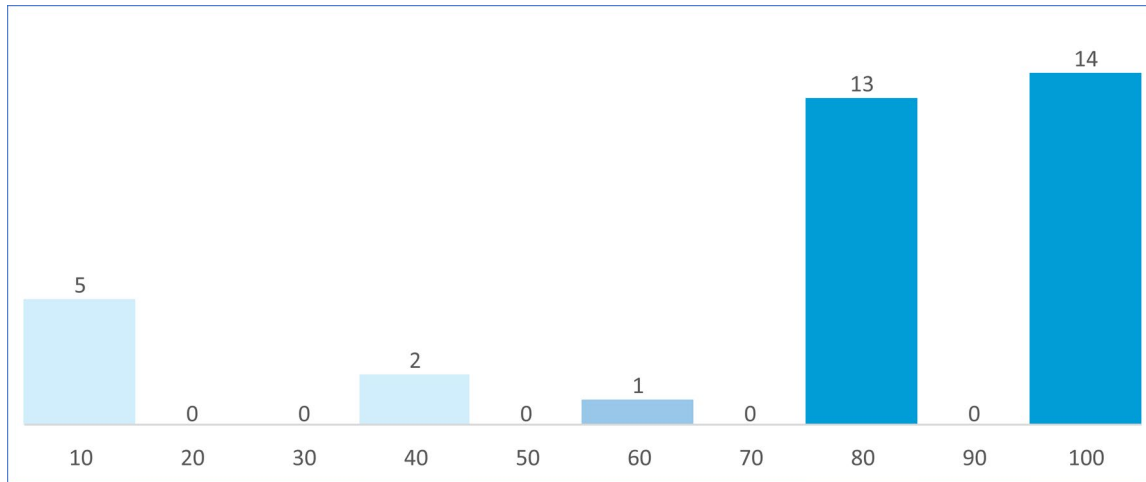
**Resulting Changes to Validated Court Self-Assessment:** Indicator 4 is to be removed from the CSA and will no longer be scored as part of Guideline 6.3. That will leave 4 indicators to be scored for this guideline.

#### Exhibit 77: Indicator-Specific Results for Guideline 6.3

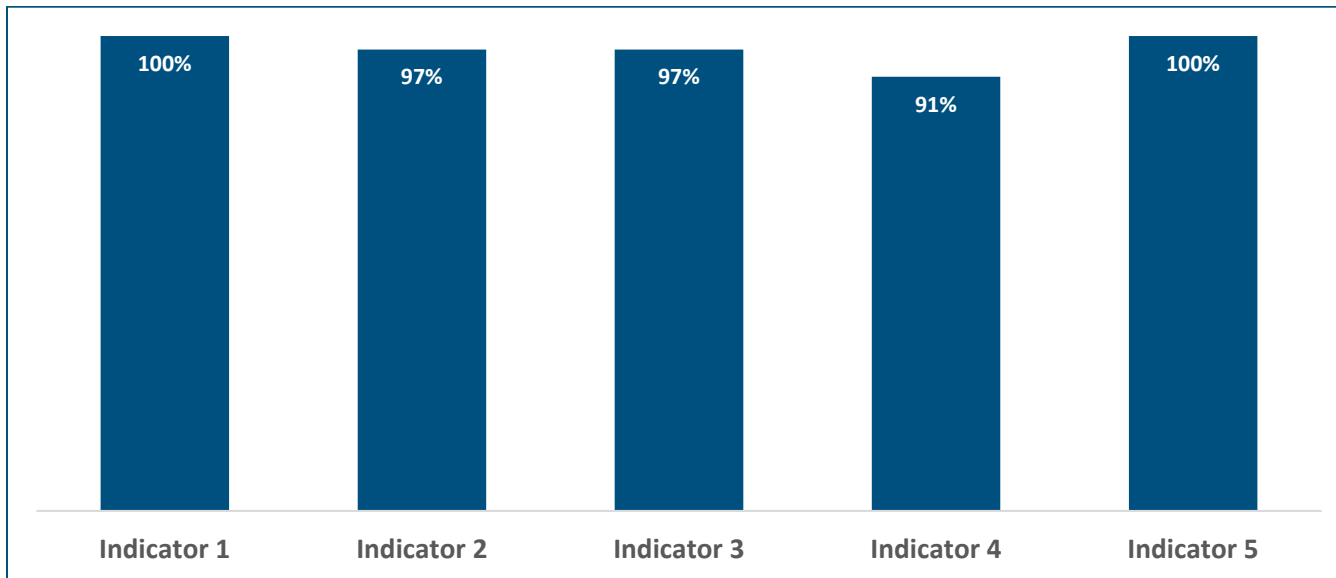
CSA Question	CSA Item	Percent Adherence	Percent Revised	Item-rest correlation	KR20 w/out Item
Treatment staff who partner with the JDTC are trained in the treatment model being used. (I1)	8k.a	82.9	0.0	0.847	0.782
Treatment staff who partner with the JDTC deliver the intervention based on the manual of the treatment model. (I2)	8k.b	82.9	2.9	0.847	0.782
There is ongoing supervision of the clinical staff to monitor their fidelity of implementation of the treatment model. (I3)	8k.c	74.3	2.9	0.761	0.798
The treatment program hosts site visits from the JDTC team to allow for monitoring of fidelity of implementation. (I4)	8k.d	51.4	8.6	0.353	0.917
There is ongoing communication between the treatment providers and the JDTC team about evidence-based treatment programs. (I5)	8k.e	77.1	0.0	0.656	0.826
<b>KR20 Coefficient</b>					0.854



**Exhibit 78. Distribution of Adherence Scores for Guideline 6.3**



**Exhibit 79. Distribution of Scores with no Need for Revision for Guideline 6.3**



## Guideline 6.4.

The JDTC should have access to and make appropriate use of evidence-based treatment services that address the risks and needs identified as priorities in the youth’s case plan, including factors such as trauma, mental health, quality of family life, educational challenges, and criminal thinking.

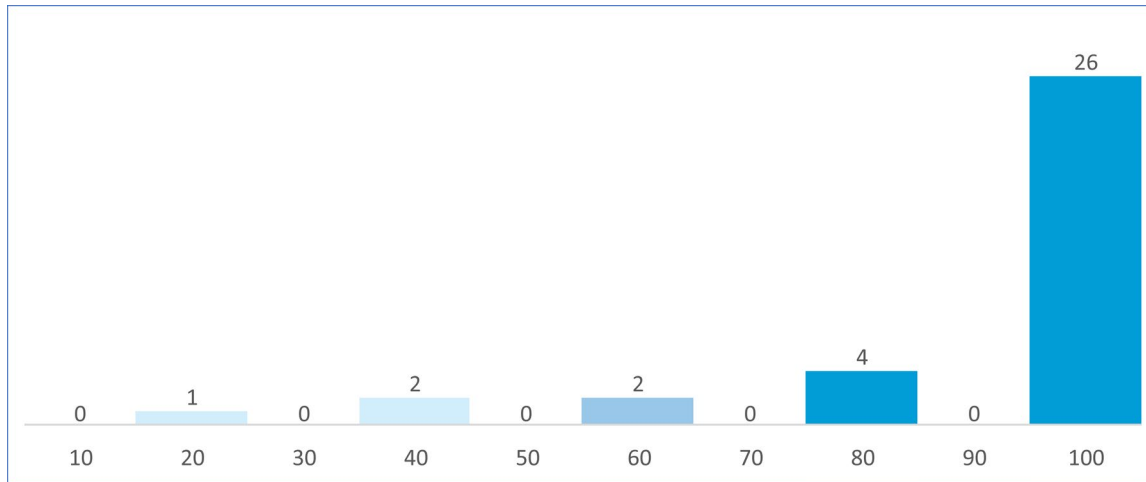
As show in Exhibit 80, item-rest correlations ranged from 0.268 to 0.726, and there was no indication that reducing the number of indicators would substantially improve the KR20. In general, JDTCs in the sample had high adherence to the indicators (80% - 97%) and low revision rates (see also Exhibit 82). More than 85% of JDTCs in our sample had high alignment with Guideline 6.4 (see Exhibit 81).

**Resulting Changes to Validated Court Self-Assessment:** No changes to the CSA or scoring of items for this guideline were made.

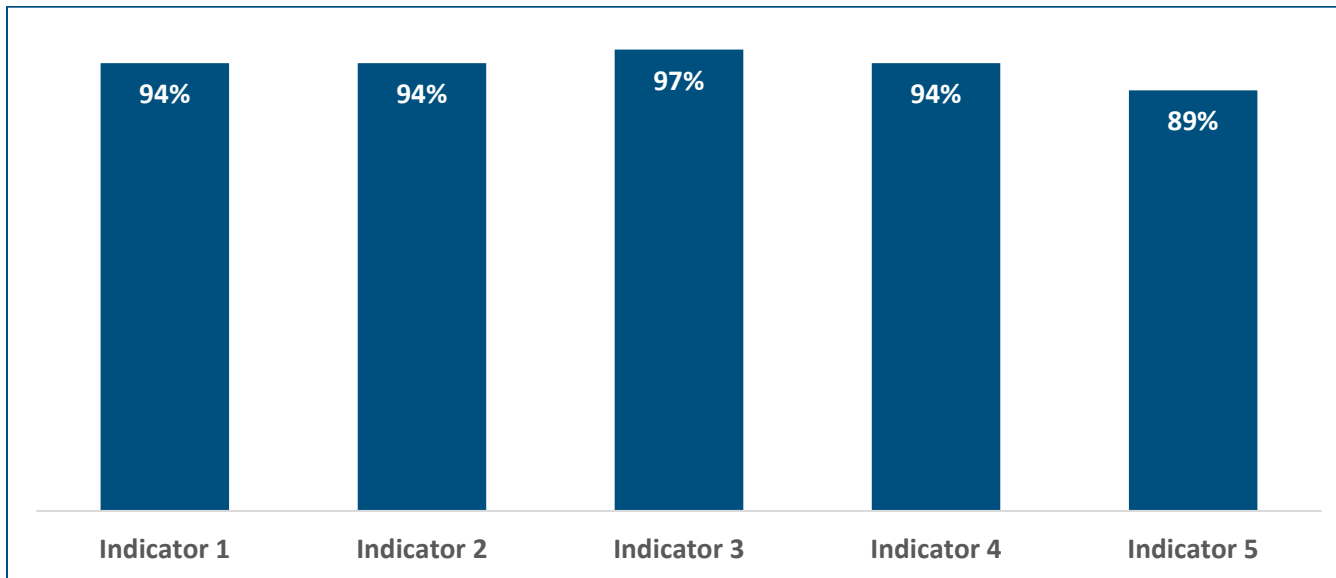
### Exhibit 80: Indicator-Specific Results for Guideline 6.4

CSA Question	CSA Item	Percent Adherence	Percent Revised	Item-rest correlation	KR20 w/out Item
When indicated by the needs assessment, JDTC participants sometimes or always are required to receive evidence-based interventions addressing:					
<ul style="list-style-type: none"> <li>Parenting supervision practices (I1)</li> </ul>	8g.a	80.0	5.7	0.437	0.714
<ul style="list-style-type: none"> <li>Negative peer associations (I2)</li> </ul>	8g.b	88.6	5.7	0.606	0.616
<ul style="list-style-type: none"> <li>Criminal thinking / attitudes (I3)</li> </ul>	8g.c	91.4	2.9	0.726	0.574
When indicated by the needs assessment, JDTC participants sometimes or always are required to receive evidence-based interventions to address:					
<ul style="list-style-type: none"> <li>Trauma experiences (I4)</li> </ul>	8h.a	97.1	5.7	0.268	0.738
<ul style="list-style-type: none"> <li>Mental health disorders (I5)</li> </ul>	8h.b	91.4	11.4	0.435	0.688
<b>KR20 Coefficient</b>					0.719

**Exhibit 81. Distribution of Adherence Scores for Guideline 6.4**



**Exhibit 82. Distribution of Scores with no Need for Revision for Guideline 6.4**



## Guideline 6.5.

**Participants should be encouraged to practice and should receive help in practicing prosocial skills in domains such as work, education, relationships, community, health, and creative activities.**

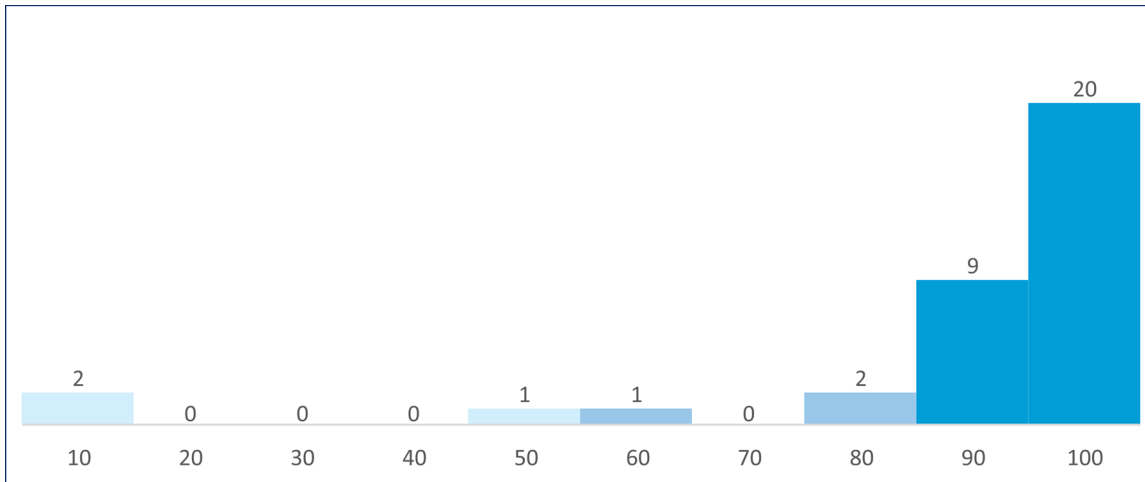
Overall, indicators of Guideline 6.5, as shown in Exhibit 83, had moderate to strong item-rest correlations ranging from 0.523 to 0.836, and a strong K20 coefficient (0.865). As shown in Exhibits 83 and 85, revisions among the JDTCs in our sample were rare (less than 10%) and the majority noted compliance with the various indicators from 71% (health education) to 91% (recreational activities). As we see in Exhibit 84, most of the JDTCs in our sample (83%) had high alignment with Guideline 6.5, with less than 10% having low alignment.

**Resulting Changes to Validated Court Self-Assessment:** No changes to the CSA or scoring of items for this guideline were made.

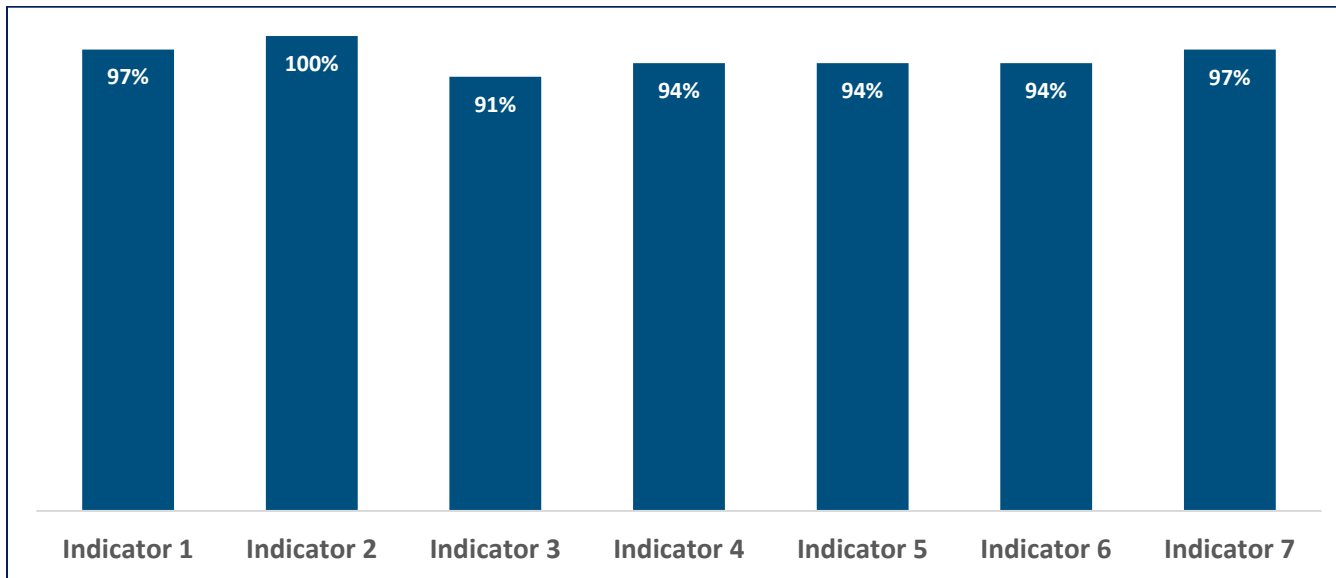
### Exhibit 83: Indicator-Specific Results for Guideline 6.5

CSA Question	CSA Item	Percent Adherence	Percent Revised	Item-rest correlation	KR20 w/out Item
The JDTC incorporates the following tasks into case plans for some, most, or all participants:					
<ul style="list-style-type: none"> <li>Educational goals/educational assistance (I1)</li> </ul>	8m.a	94.3	2.9	0.805	0.835
<ul style="list-style-type: none"> <li>Employment assistance (i.e., job training, vocational programs, career exploration, work readiness) (I2)</li> </ul>	8m.b	88.6	0.0	0.619	0.848
<ul style="list-style-type: none"> <li>Health education (i.e., sexual health/education, AIDS/HIV, nutrition) (I3)</li> </ul>	8m.c	71.4	8.6	0.523	0.874
<ul style="list-style-type: none"> <li>Social emotional intelligence (i.e., communication skills, conflict resolution skills) (I4)</li> </ul>	8m.d	85.7	5.7	0.645	0.845
<ul style="list-style-type: none"> <li>Recreational activities (i.e., safe, healthy, positive activities) (I5)</li> </ul>	8m.e	91.4	5.7	0.836	0.824
<ul style="list-style-type: none"> <li>Creative/expressive activities (i.e., art, music) (I6)</li> </ul>	8m.f	77.1	5.7	0.554	0.864
<ul style="list-style-type: none"> <li>Service learning and civic engagement activities (i.e., volunteering, community events) (I7)</li> </ul>	8m.g	94.3	2.9	0.805	0.835
<b>KR20 Coefficient</b>					0.865

**Exhibit 84. Distribution of Adherence Scores for Guideline 6.5**



**Exhibit 85. Distribution of Scores with no Need for Revision for Guideline 6.5**



## Guideline 7.1.

**Court and treatment practices should facilitate equivalent outcomes (e.g., retention, duration of involvement, treatment progress, positive court outcomes) for all program participants regardless of gender, race, ethnicity, or sexual orientation.**

As shown in Exhibit 86, the item-rest correlations ranged from 0.154 on Indicator 8 (aware of participants who are not heterosexual) to 0.600 on Indicator 3 (reducing disparities for minority youth). With the removal of indicator 8, the KR20 coefficient marginally increases from 0.731 to 0.744. As shown in Exhibits 86 and 88, JDTs in the sample had the highest revision rates (17%) with indicator 3 and indicator 9, both of which ask more generally about reducing disparities and offering responsive services. Adherence to the indicator ranged widely from 17% (indicator 12 measuring courts' review of data on sexual orientation) to 91% (indicator 4 measuring data collection on participant's age at entry). As shown in Exhibit 87, compliance with the guideline fell roughly into thirds with 34% of sample courts with high alignment, 31% with moderate alignment, and 34% with low alignment.

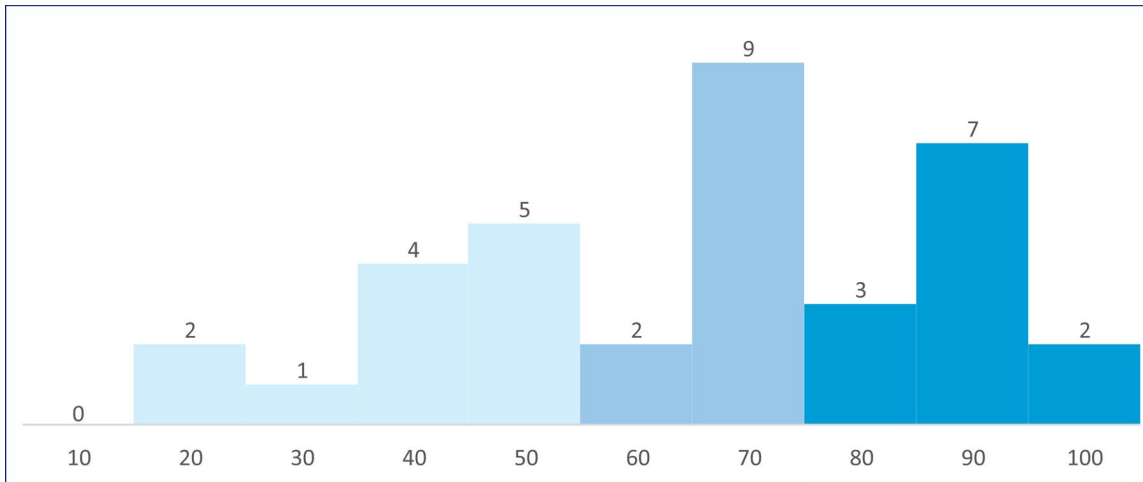
**Resulting Changes to Validated Court Self-Assessment:** Given Indicator 8's low correlation and that the item asked about the court's awareness of not its process to reduce discrimination around non-heterosexual youth, item 14a will be removed from the CSA and no longer scored for Guideline 7.1. This would leave 11 indicators that are still scored under Guideline 7.1.

### Exhibit 86: Indicator-Specific Results for Guideline 7.1

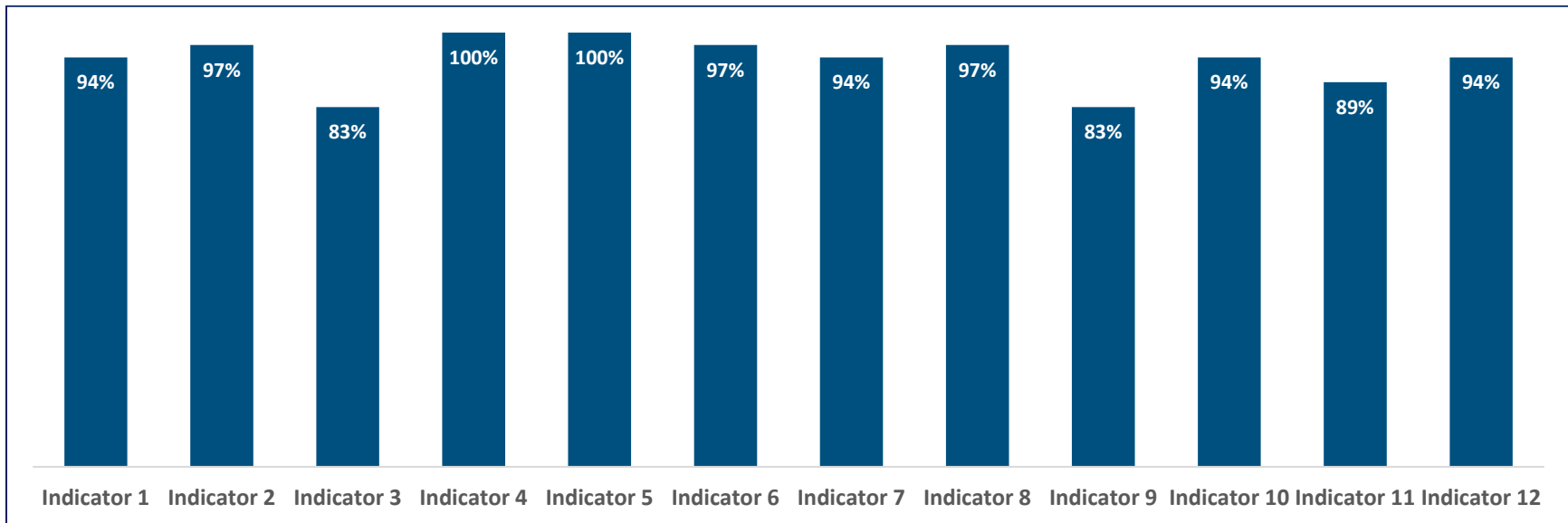
CSA Question	CSA Item	Percent Adherence	Percent Revised	Item-rest correlation	KR20 w/out Item
When indicated by the needs assessment, JDTC participants are required to attend gender-specific treatment programs. (I1)	8f.h	51.4	5.7	0.259	0.730
When indicated by the needs assessment, JDTC participants are required to attend language-specific or cultural-specific programs. (I2)	8f.i	40.0	2.9	0.178	0.741
JDTC case management is aimed at reducing disparities in how minority youth are treated in the juvenile justice system. (I3)	8d.c	68.6	17.1	0.600	0.680
The JDTC collects data on participants' age at entry into JDTC. (I4)	13a.h	91.4	0.0	0.456	0.709
The JDTC collects data on the racial/ethnic demographics of JDTC participants. (I5)	13a.i	82.9	0.0	0.427	0.707
The JDTC collects data on the gender demographics of JDTC participants. (I6)	13a.j	85.7	2.9	0.402	0.711
The JDTC uses the information it collects on participants to assess and monitor whether it is moving towards its program goals. (I7)	13b	82.9	5.7	0.394	0.711
The JDTC is aware of participants who do not identify as heterosexual. (I8)	14a	40.0	2.9	0.154	0.744
The JDTC has services that are responsive to the particular needs of lesbian, gay, bisexual, transgender, queer or questioning, intersex, gender nonconforming, and Two-Spirit youth. (I9)	14b	40.0	17.1	0.251	0.730
The JDTC keeps and reviews data on the gender of each participant. (I10)	14c.a; 14d.a	62.9	5.7	0.519	0.691
The JDTC keeps and reviews data on the race/ethnicity of each participant. (I11)	14c.b; 14d.b	65.7	11.4	0.556	0.686
The JDTC keeps and reviews data on the sexual identity of each participant. (I12)	14c.c; 14d.c	17.1	5.7	0.347	0.716
<b>KR20 Coefficient</b>					0.731



**Exhibit 87. Distribution of Adherence Scores for Guideline 7.1**



**Exhibit 88. Distribution of Scores with no Need for Revision for Guideline 7.1**



## Guideline 7.2.

**A youth should be terminated from the program only after careful deliberation by the JDTC team and only as a last resort after full implementation of the JDTC’s protocol on behavioral contingencies.**

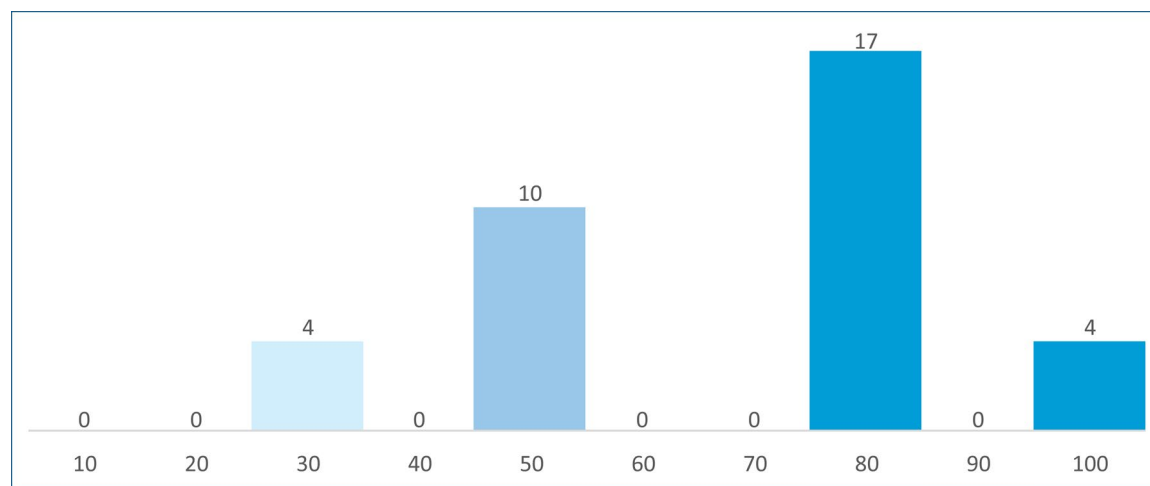
As shown in Exhibit 89, the results from our analyses reveal that these four indicators do not relate to one another in a way that we would expect if they fit together in a single scale. The KR20 coefficient was low at 0.109. The intent of this guideline is focused on removal only as a last resort, yet the indicators are also asking about criteria for removal and those criteria may not always translate into “last resort” in practice. After careful consideration, we elected to keep the current items based on their alignment with the intent of the guideline. As we see from Exhibits 89 and 91, indicator 4 also had a higher rate of revisions with 23% of the JDTCs in our sample amending their answers. Indicator 2 also had a high revision rate suggesting that guidance around the definition of removal criteria be added to the CSA manual. As shown in Exhibit 90, most of the JDTCs in our sample (60%) had high compliance with the guideline, with about one in ten having low alignment.

**Resulting Changes to Validated Court Self-Assessment:** No changes to the CSA were made. Scoring of the indicators for this guideline were adjusted to allow for some case-by-case decision making on the part of the JDTC.

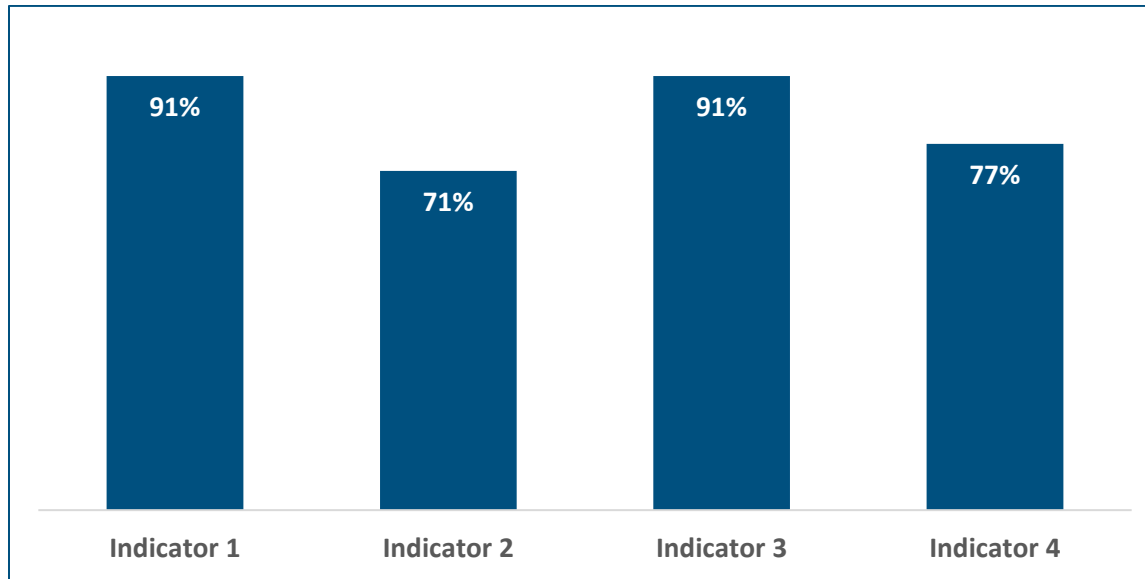
### Exhibit 89: Indicator-Specific Results for Guideline 7.2

CSA Question	CSA Item	Percent Adherence	Percent Revised	Item-rest correlation	KR20 w/out Item
The JDTC has clearly documented criteria for removal of participants from the program. (I1)	12a	80.0	5.7	0.298	-0.353
The removal criteria are always applied to your JDTC participants. (I2)	12b	54.3	28.6	0.188	-0.231
When participants are removed from the JDTC (i.e., exited unsuccessfully) it is always or mostly only after exhaustion of all other options and behavioral contingencies. (I3)	12c.a	97.1	8.6	-0.077	0.170
When participants are removed from the JDTC (i.e., exited unsuccessfully) it is never or rarely the result a participant experiencing a new arrest, new adjudication (including drug possession) or the failure to appear in court with no excuse. (I4)	12c.b-12c.f	28.6	22.9	-0.173	0.438
<b>KR20 Coefficient</b>					0.109

### Exhibit 90. Distribution of Adherence Scores for Guideline 7.2



**Exhibit 91. Distribution of Scores with no Need for Revision for Guideline 7.2**



### Guideline 7.3.

Each JDTC should routinely collect the following detailed data: Family-related factors such as family cohesion, home functioning, and communication; general recidivism during the program and after completion, drug use during the program, and use of alcohol or other drugs after the program ends; program completion and termination, educational enrollment, and sustained employment; and involvement in prosocial activities and youth-peer associations.

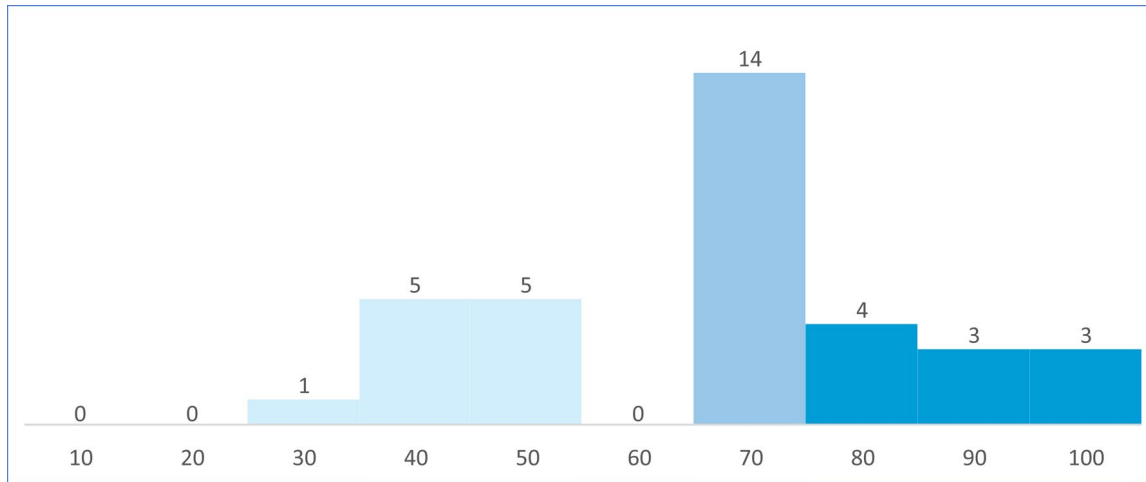
As seen in Exhibit 92, all indicators except indicator 10 (exit interviews with all participants and parents) had positive item-rest correlations ranging from 0.225 to 0.510. Removing that item would improve the KR20 coefficient from 0.699 to 0.733. As we see in Exhibits 92 and 94, revision rates were generally low except for Indicators 11 (contact with all participants who exit the program) and 12 (exit interview information on substance use). As shown in Exhibit 93, about 30% of JDTCs in our sample had high alignment with this guideline, and another 30% had low alignment, with the remaining 40% having moderate alignment.

**Resulting Changes to Validated Court Self-Assessment:** Indicator 10 will be removed from the CSA and is no longer part of the scoring for this guideline. In addition, we edited indicators 12 and 13 so that they are not tied to the exit interviews. We believe exit interviews are one mechanism for collecting follow-up data, but the intent of the guideline is focused on the collection of those data and does not require it be done with an exit interview.

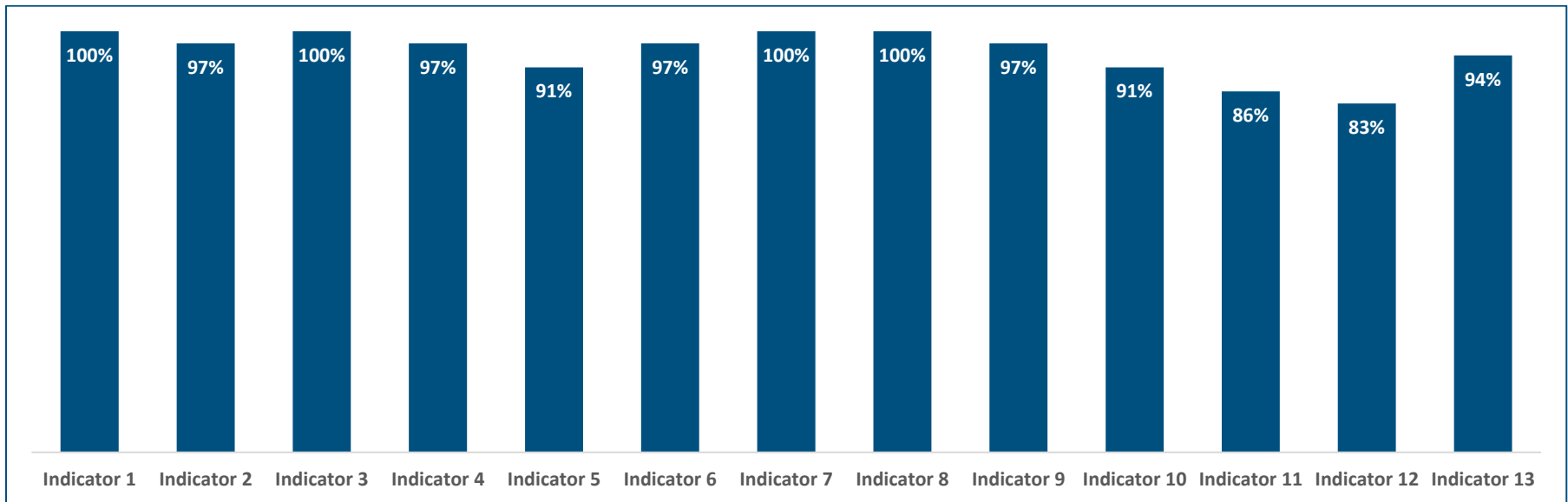
### Exhibit 92: Indicator-Specific Results for Guideline 7.3

CSA Question	CSA Item	Percent Adherence	Percent Revised	Item-rest correlation	KR20 w/out Item
Your JDTC collects data on drug testing (e.g., dates of tests, drug test results). (I1)	13a.b	91.4	0.0	0.412	0.676
Your JDTC collects data on drug use after program completion. (I2)	13a.c	17.1	2.9	0.416	0.670
Your JDTC collects data on successful completion. (I3)	13a.f	94.3	0.0	0.323	0.687
Your JDTC collects data on unsuccessful exit. (I4)	13a.g	88.6	2.9	0.225	0.693
Your JDTC collects data on family-related information, such as family cohesion, home functioning, and communication. (I5)	13a.k	54.3	8.6	0.510	0.651
Your JDTC collects data on recidivism/reoffending during the program. (I6)	13a.l	65.7	2.9	0.393	0.671
Your JDTC collects data on recidivism/reoffending after program completion. (I7)	13a.m	65.7	0.0	0.353	0.677
Your JDTC collects data on educational enrollment. (I8)	13a.n	82.9	0.0	0.252	0.691
Your JDTC collects data on employment. (I9)	13a.o	68.6	2.9	0.494	0.655
Exit interviews are conducted with participants (who successfully complete or unsuccessfully exit JDTC) and their parents. (I10)	12d.a-d	31.4	8.6	-0.035	0.733
The JDTC attempts to contact participants who successfully complete as well as participants who unsuccessfully exit at some point after they exit the JDTC. (I11)	12e.a; 12e.b	65.7	14.3	0.231	0.696
The exit interviews examine whether participants used alcohol or other drugs. (I12)	12f.2	57.1	17.1	0.373	0.674
The exit interviews examine any criminality or contacts with legal system. (I13)	12f.4	71.4	5.7	0.366	0.676
<b>KR20 Coefficient</b>					0.699

**Exhibit 93. Distribution of Adherence Scores for Guideline 7.3**



**Exhibit 94. Distribution of Scores with no Need for Revision for Guideline 7.3**



## Conclusion

In this report, we provided a discussion of findings for each guideline and the associated revisions to the CSA that are reflected in the validated instrument. The validated instrument is included in Appendix A. The revised CSA is appropriate for JDTCs looking to assess the alignment of their current practices with the version of the JDTC Guidelines as of June 2022. The validated CSA includes a set of indicators for each guideline, as shown in Exhibit 95.

**Exhibit 95. Number of Indicators on Court Self-Assessment for each Guideline**

Guideline	Number of Indicators	Guideline	Number of Indicators
Guideline 1.1	4	Guideline 4.1	11
Guideline 1.2	3	Guideline 4.2	5
Guideline 1.3	4	Guideline 5.1	5
Guideline 1.4	17	Guideline 5.2	4
Guideline 1.5	7	Guideline 5.3	5
Guideline 1.6	3	Guideline 5.4	5
Guideline 2.1	4	Guideline 5.5	6
Guideline 2.2	3	Guideline 5.6	3
Guideline 2.3	3	Guideline 6.1	6
Guideline 2.4	3	Guideline 6.2	2
Guideline 2.5	3	Guideline 6.3	4
Guideline 3.1	6	Guideline 6.4	5
Guideline 3.2	4	Guideline 6.5	7
Guideline 3.3	5	Guideline 7.1	11
Guideline 3.4	5	Guideline 7.2	4
		Guideline 7.3	12



## Appendix A. Validated Court Self-Assessment (March 2022)

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## Section 1. Background

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**1a. Who is the primary person coordinating completion of this self-assessment tool?**

- a. Name: \_\_\_\_\_
- b. Email address: \_\_\_\_\_
- c. Phone number: \_\_\_\_\_

*If you are not the program coordinator,*

- d. Program coordinator's name: \_\_\_\_\_
- e. Program Coordinator's email: \_\_\_\_\_

**1b. What is your role in the juvenile court? {Recommended: court staff member fill out when available; Judge completes when no other staff member is available}**

- <sub>1</sub> Judicial Assistant, Court Staff Member
- <sub>2</sub> Judge
- <sub>99</sub> Other (please specify: \_\_\_\_\_ )

**1c. Please list the names and roles of the other team members (anyone involved in any aspect of your JDTC, including the provision of treatment or support to the participants) who will help you (or who you will check with) as you fill out this assessment. If you filled out the assessment on your own (with no help from other team members), please type "none."**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**1d. Has your JDTC received any technical assistance (including phone calls to answer your questions, resources or sample documents emailed or mailed to you, online support and/or training, or in-person support and/or training)?**

- <sub>0</sub> No (*Skip to Section 2*)
- <sub>1</sub> Yes (From whom? \_\_\_\_\_ )
- <sub>-4</sub> Not Sure (*Skip to Section 2*)

**1e. Did your JDTC make any changes as a result of that technical assistance?**

- <sub>0</sub> No
- <sub>1</sub> Yes
- <sub>-4</sub> Not Sure

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## Section 2. JDTC Background/Context

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**2a. Does the court have a written Memorandum of Understanding (MOU) with any partner agencies (such as prosecutor, defense, probation, law enforcement, etc.) or community organizations (such as treatment providers)?**

<sub>0</sub> No (*Skip to item 3a*)

<sub>1</sub> Yes

**2b. Does the MOU define the role and duties expected of each team member?**

<sub>0</sub> No

<sub>1</sub> Yes

**2c. Does your MOU specify what information will be shared between team members?**

<sub>0</sub> No

<sub>1</sub> Yes

**2d. Does your MOU require your team members to commit to the following?**

	No	Yes
a. The JDTC philosophy and/or practice	<input type="checkbox"/>	<input type="checkbox"/>
b. Assist with ongoing system improvement	<input type="checkbox"/>	<input type="checkbox"/>
c. Be collaborative with the team	<input type="checkbox"/>	<input type="checkbox"/>

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### Section 3. JDTC Eligibility, Referral, and Entry

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**3a. Are your JDTC eligibility requirements in writing?**

- <sub>0</sub> No
- <sub>1</sub> Yes

**3b. What factors are used to decide which youth are eligible for the JDTC?**

	Never	Case by Case	Always
a. Age of at least 14 years old	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
b. Type of offense/charge	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
c. Risk of reoffending assessed as moderate or higher	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
d. Indication (from screening or assessment) of substance use disorder	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
e. Indication (from screening or assessment) of mental health treatment needs	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
f. Other criteria (Please specify: _____ )	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>

**3c. Does your JDTC have specific outreach strategies geared toward increasing equity of access for all eligible youth?**

- <sub>0</sub> No
- <sub>1</sub> Somewhat
- <sub>2</sub> Yes
- <sub>-4</sub> Unsure

**3d. Are those JDTC team members involved in screening participants provided with training that is intended to promote equity of access for all eligible youth?**

- <sub>0</sub> No
- <sub>1</sub> Yes – Some have received training
- <sub>2</sub> Yes – All have received training
- <sub>-4</sub> Unsure

**3e. Does your JDTC have a written policy that addresses ensuring equity of access to the program for all eligible youth?**

- <sub>0</sub> No
- <sub>1</sub> Somewhat
- <sub>2</sub> Yes
- <sub>-4</sub> Unsure

**3f. Does your JDTC screen participants for substance use disorder prior to enrollment in the program?**

- <sub>1</sub> Never (*Skip to item 3j*)
- <sub>2</sub> Sometimes
- <sub>3</sub> Always

**3g. Does your JDTC use a substance use disorder screening tool?**

- <sub>0</sub> No (*Skip to item 3j*)
- <sub>1</sub> Yes
- <sub>-4</sub> Not sure (*Skip to item 3j*)

**3h. Which tool do you use?**

- <sub>1</sub> Massachusetts Youth Screening Instrument-2 (MAYSI-2)
- <sub>2</sub> CRAFFT (Car, Relax, Alone, Forget, Friends, Trouble)
- <sub>3</sub> Child and Adolescent Needs and Strengths (CANS)
- <sub>4</sub> Global Appraisal of Individual Needs-Short Screener (GAIN-SS)
- <sub>5</sub> Substance Abuse Subtle Screening Inventory (SASSI)
- <sub>99</sub> Other (please specify: \_\_\_\_\_ )

3i. Has the screening tool been edited or modified in any way (i.e., are you using the original tool or has your team made changes to fit your JDTC)?

- <sub>0</sub> No, it has not been modified
- <sub>1</sub> Yes, it has been modified
- <sub>-4</sub> Not sure

3j. What happens to youth who are referred to your JDTC, but do not meet the eligibility criteria?

	Never	Case by Case	Always
a. They proceed through the traditional juvenile court process	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
b. They are diverted to an alternative program not part of the traditional court process	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
c. They are admitted to the JDTC	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
d. Other (Please specify: _____)	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>

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## Section 4. Risk and Need Assessment

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**4a. Does your JDTC assess participants for risk of reoffending prior to enrollment in the program?**

- <sub>1</sub> Never (*Skip to item 4f*)
- <sub>2</sub> Sometimes
- <sub>3</sub> Always

**4b. Do you use a risk assessment tool?**

- <sub>0</sub> No formal tool is used but participants are assessed for risk (*Skip to 4e*)
- <sub>1</sub> Yes

**4c. Which tool do you use?**

- <sub>1</sub> Positive Achievement Change Tool (PACT)
- <sub>2</sub> Youth Assessment Screening Instrument (YASI)
- <sub>3</sub> Youth Level of Service/Case Management Inventory (YLS/CMI)
- <sub>4</sub> Joint Risk Matrix (JRM)
- <sub>5</sub> North Carolina Assessment of Risk (NCAR)
- <sub>6</sub> Ohio Risk Assessment System (ORAS)
- <sub>99</sub> Other (please specify: \_\_\_\_\_ )

**4d. Has your JDTC risk assessment tool been edited or modified (i.e., are you using the tool as written, or has your team made changes to it to fit your JDTC)?**

- <sub>0</sub> No, it has not been modified
- <sub>1</sub> Yes, it has been modified
- <sub>-4</sub> Not sure

**4e. What may happen to a youth whose risk of re-offense is low?**

	Never	Case by Case	Always
a. They proceed through the traditional juvenile court process	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
b. They are diverted to an alternative program not part of the traditional court process	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
c. They are admitted to the JDTC	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
d. Other (please specify: _____)	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>

**4f. Is there a needs assessment process for all participants? A needs assessment identifies factors about the youth that can be changed through individualized treatment or programming to reduce the likelihood that the youth will reoffend. Such an assessment may be completed by members of the JDTC team or may be completed externally.**

- <sub>0</sub> The JDTC does not assess participants for substance use or mental health diagnoses (*Skip to item 4j*)
- <sub>1</sub> No formal tool is used but participants are screened or informally assessed for substance use (e.g., two or more positive drug tests or positive drug test at the time of intake; asked a small number of questions) (*Skip to item 4i*)
- <sub>2</sub> Yes, a needs assessment is completed on all participants using validated tools.



**4g. Please provide the name of the needs assessment tool(s): (Check all that apply)**

- <sub>1</sub> Substance Abuse Subtle Screening Inventory (SASSI)
- <sub>2</sub> Addiction Severity Index (ASI)
- <sub>3</sub> Minnesota Multiphasic Personality Inventory-Adolescent (MMPI-A)
- <sub>4</sub> Michigan Alcoholism Screening Test (MAST)
- <sub>5</sub> Structured Clinical Interview for DSM-IV (SCID)
- <sub>6</sub> Child and Adolescent Needs and Strengths (CANS)
- <sub>7</sub> Behavioral and Emotional Rating Scale (BERS)
- <sub>8</sub> CAGE (Cut-down, Annoyed, Guilty, Eye-opener)
- <sub>9</sub> Youth Level of Service (YLS)
- <sub>10</sub> Positive Achievement Change Tool (PACT)
- <sub>11</sub> Structured Assessment of Violent Risk in Youth (SAVRY)
- <sub>99</sub> Other (Please specify: \_\_\_\_\_)

**4h. Has the needs assessment tool been edited or modified in any way (i.e., are you using the original tool or has your team made changes to fit your JDTC)?**

- <sub>0</sub> No, it has not been modified
- <sub>1</sub> Yes, it has been modified
- <sub>-4</sub> Not sure

**4i. Does your JDTC use the information from the needs assessment process to:**

	No	Sometimes	Yes	Not Sure
a. Identify which services to provide (or refer to providers)	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>-4</sub>
b. Develop a case plan	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>-4</sub>

**4j. How does the court process/handle youth who do not appear to have a substance use/mental health disorder?**

	Never	Sometimes	Always
a. They proceed through the traditional juvenile court process	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
b. They are diverted to an alternative program not part of the traditional court	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
c. They are admitted to the JDTC	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
d. Other (Please specify: _____ )	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>

**4k. As part of the needs assessment process for the participants in your JDTC, what domains are assessed? Check all that apply.**

- |   |  |
|---|--|
| <input type="checkbox"/> <sub>1</sub> Use of alcohol and other drugs                  | <input type="checkbox"/> <sub>7</sub> Wellbeing and strengths of the family    |
| <input type="checkbox"/> <sub>2</sub> Mental health issues/needs                      | <input type="checkbox"/> <sub>8</sub> Parental/guardian/familial drug use      |
| <input type="checkbox"/> <sub>3</sub> History of physical, sexual, or emotional abuse | <input type="checkbox"/> <sub>9</sub> Parental/guardian/familial mental health |
| <input type="checkbox"/> <sub>4</sub> History of other trauma                         | <input type="checkbox"/> <sub>10</sub> Parental skills                         |
| <input type="checkbox"/> <sub>5</sub> Suicidal ideation                               | <input type="checkbox"/> <sub>11</sub> Educational needs                       |
| <input type="checkbox"/> <sub>6</sub> Wellbeing and strengths of the youth            | <input type="checkbox"/> <sub>99</sub> Other (Please specify: _____ )          |

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## Section 5. Team Members

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5a. Who do you consider to be a JDTC team member (please include anyone involved in any aspect of your JDTC, including the provision of treatment or support to the participants)? (Check all that apply)

- |   |   |
|---|---|
| <input type="checkbox"/> 1 Judge  | <input type="checkbox"/> 7 Defense Attorney                   |
| <input type="checkbox"/> 2 JDTC Coordinator                                   | <input type="checkbox"/> 8 Case Manager(s)                    |
| <input type="checkbox"/> 3 Clinical Treatment Supervisor or Liaison           | <input type="checkbox"/> 9 Probation/Parole Representative    |
| <input type="checkbox"/> 4 Substance Use Treatment Provider Representative(s) | <input type="checkbox"/> 10 School Representative or Liaison  |
| <input type="checkbox"/> 5 Mental Health Treatment Provider Representative(s) | <input type="checkbox"/> 11 Community partner(s)              |
| <input type="checkbox"/> 6 Prosecuting Attorney                               | <input type="checkbox"/> 99 Other (Please specify:<br>_____ ) |

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## Section 6. Team Member Orientation and Training

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6a. Does your JDTC provide an orientation process for new team members to cover the following information?

	No	Sometimes	Yes
a. JDTC model/philosophy	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2
b. JDTC practices	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2
c. Team member roles	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2

6b. Please indicate whether team members have received formal training in any of the following topic areas:

	No – None	Yes – Some team members	Yes – All team members
a. The nature of substance use disorders and the dynamics of recovery	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2
b. The development of treatment plans	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2
c. Adolescent development	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2
d. Developmentally appropriate juvenile justice programming	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2
e. Cultural competency	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2
f. Strategies for family engagement	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2
g. Trauma-informed approaches to working with families	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2
h. The purpose of the treatment and service interventions provided by the JDTC	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2
i. The use of evidence-based practices in substance use treatment	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2
j. The use of incentives and sanctions to modify the behavior of JDTC participants	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2
k. Case management skills	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2
l. The risk-needs-responsivity (RNR) model	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2
m. The treatment court model (i.e., other than on-the-job training)	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2
n. Their specific role on the team	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2
o. Strength-based philosophy and practices (e.g., Motivational Interviewing)	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2

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## Section 7. Family and School Engagement

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**7a. Does your JDTC ensure that at least one family member or other adult is available to participate in discussions to help the court make decisions about each participant?**

- <sub>0</sub> No
- <sub>1</sub> Yes, for a few participants
- <sub>2</sub> Yes, for some participants
- <sub>3</sub> Yes, for most or all participants

**7b. How many JDTC participants have a responsible parent/guardian/family member who at least some of the time:**

	None	A Few	Some	Most	All
a. Attends court sessions	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>
b. Participates (speaking etc.) during court sessions	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>
c. Participates in case planning sessions	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>
d. Has a role in identifying appropriate incentives and sanctions for their child	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>
e. Participates in case management sessions	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>
f. Participates in treatment / therapy sessions	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>

7c. For each of the following items, indicate how often JDTC participants use each service. If the court does not currently offer the service (either directly or through partnerships with other providers), please mark “service not available locally.”

	Service Not Available Locally					
	Never	Rarely	Sometimes	Frequently	Always	
a. The JDTC provides childcare to facilitate responsible parent/guardian/family member and participants involvement in court requirements	<input type="checkbox"/> -8	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
b. The JDTC performs drug testing in the home	<input type="checkbox"/> -8	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
c. The JDTC provides services to family members in addition to the participant	<input type="checkbox"/> -8	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
d. The JDTC offers <u>peer</u> support to family members	<input type="checkbox"/> -8	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

7d. For each of the following items, indicate how often they apply for your JDTC.

	Never	Rarely	Sometimes	Frequently	Always
a. The JDTC allows responsible parent/guardian/family member to call in for court, if they are unable to attend in person	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
b. Court sessions are scheduled at a time that accommodates work and school schedules	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
c. The JDTC conducts case planning meetings at a wide range of hours (including early morning and evening)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

**7e. If it were determined there was a need, how often would your JDTC have the capacity and resources to provide the following services?**

	Never	Sometimes	Always
a. The JDTC provides court-certified or licensed onsite interpreters for participants and parents/guardians/family members with limited English proficiency.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2
b. The JDTC provides court-certified or licensed onsite interpreters for participants and parents/guardians/family members with a hearing deficiency	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2
c. All JDTC public documents are translated into the native language of non-English-speaking youth and parents/guardians/family members	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2

**7f. Have you been able to secure the schools' involvement (such as sharing of school-related information or participation as a team member)?**

- 1 The schools are not involved
- 2 The schools are nominally involved
- 3 Yes, we have most of the involvement we would like
- 4 Yes, we have exactly the involvement we would like

**7g. Does your JDTC work in collaboration with school partners to keep JDTC participants in school?**

- 0 No
- 1 Yes, for some
- 2 Yes, for all



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## Section 8. Treatment, Case Planning, and Other Services Provided to Participants/Families

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**8a. Is an individualized case plan developed for each JDTC participant?**

- <sub>0</sub> No (*Skip to item 8c*)
- <sub>1</sub> Sometimes
- <sub>2</sub> Yes

**8b. Does the case plan include:**

	Never	Case by Case	Always
a. Requirements of their supervision and court program	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
b. Treatment requirements	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
c. Referrals to programs targeting family needs	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>

**8c. Is case management:**

	No	Sometimes	Yes
a. Provided by professionals trained in case management?	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
b. Structured through case management plans created by staff with specific training in developing individualized and culturally appropriate case plans?	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
c. Aimed at reducing disparities in how minority youth are treated in the juvenile justice system?	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>

**8d. When you change individual case plans, how much of the time (across all participants) is it to:**

	Never	A Little of the Time	About Half the Time	Most of the Time	Always
a. Address violations of requirements?	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
b. Address youth needs?	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
c. Connect youth with behavioral health treatment?	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
d. Address family needs?	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>

**8e. When the following services are indicated by the needs assessment, how often are JDTC participants required to attend the indicated services?**

	Not Available in Our Jurisdiction	Never	Rarely	Sometimes	Always
a. Detoxification services	<input type="checkbox"/> -8	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
b. Outpatient individual treatment sessions	<input type="checkbox"/> -8	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
c. Outpatient group treatment sessions	<input type="checkbox"/> -8	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
d. Intensive outpatient treatment sessions	<input type="checkbox"/> -8	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
e. Day treatment	<input type="checkbox"/> -8	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
f. Residential treatment/inpatient care	<input type="checkbox"/> -8	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
g. Gender-specific treatment programs	<input type="checkbox"/> -8	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
h. Language-specific or cultural-specific programs	<input type="checkbox"/> -8	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4

**8f. When the following criminogenic needs are indicated by the needs assessment process, how often are they addressed through evidence-based interventions required of JDTC participants?**

	Not Available in Our Jurisdiction	Never	Rarely	Sometimes	Always
a. Parenting supervision practices	<input type="checkbox"/> -8	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
b. Negative peer associations	<input type="checkbox"/> -8	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
c. Criminal thinking / attitudes	<input type="checkbox"/> -8	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4

8g. When the following factors are identified by the needs assessment process, how often are they addressed through evidence-based interventions required of JDTC participants?

	Not Available in Our Jurisdiction	Never	Rarely	Sometimes	Always
a. Trauma experiences	<input type="checkbox"/> -8	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
b. Mental health disorders	<input type="checkbox"/> -8	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4

8h. How often are each of the following treatment models required of JDTC participants?

	Not Available in Our Jurisdiction	Never	Rarely	Sometimes	Always
a. Assertive Continuing Care	<input type="checkbox"/> -8	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
b. Cognitive Behavioral Therapy (CBT) without MET	<input type="checkbox"/> -8	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
c. Motivational Enhancement Therapy with Cognitive Behavior Therapy (MET/CBT)	<input type="checkbox"/> -8	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
d. Motivational Enhancement Therapy without Cognitive Behavior Therapy (MET)	<input type="checkbox"/> -8	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
e. Brief Strategic Family Therapy (BSFT)	<input type="checkbox"/> -8	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
f. Family Behavior Therapy (FBT)	<input type="checkbox"/> -8	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
g. Functional Family Therapy (FFT)	<input type="checkbox"/> -8	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
h. Multidimensional Family Therapy (MDFT)	<input type="checkbox"/> -8	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
i. Adolescent Community Reinforcement Approach (ACRA)	<input type="checkbox"/> -8	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
j. Other (Please specify: _____ )	<input type="checkbox"/> -8	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4

8i. Do the treatment providers that partner with your JDTC use the following strategies to demonstrate they are implementing services with fidelity to the treatment models being used?

	Not Sure	No	Yes, for Some Providers	Yes, for All Providers
a. Treatment staff are trained in the treatment model being used	<input type="checkbox"/> -4	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2
b. Treatment staff deliver the intervention based on the manual of the treatment model	<input type="checkbox"/> -4	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2
c. There is ongoing supervision of the clinical staff to monitor their fidelity of implementation of the treatment model	<input type="checkbox"/> -4	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2
d. There is ongoing communication between the treatment providers and the JDTC team about evidence-based treatment programs	<input type="checkbox"/> -4	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2

8j. For what proportion of participants in your JDTC are the following tasks incorporated into the case plan?

	None	A Few	Some	Most	All
a. Educational goals/educational assistance (i.e., literacy, GED, tutoring)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
b. Employment assistance (i.e., job training, vocational programs, career exploration, work readiness)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
c. Health education (i.e., sexual health/education, AIDS/HIV, nutrition)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
d. Social emotional intelligence (i.e., communication skills, conflict resolution skills)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
e. Recreational activities (i.e., safe, healthy, positive activities)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
f. Creative/expressive activities (i.e., art, music)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
g. Service learning and civic engagement activities (i.e., volunteering, community events)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
h. Other (Please specify: _____)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

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## Section 9. Staffing and Court Sessions

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9a. How often does your JDTC have regular meetings (staffings) where participant progress is discussed?

- <sub>1</sub> Once per month
- <sub>2</sub> Twice per month/Every two weeks
- <sub>3</sub> Once per week
- <sub>4</sub> Twice per week or more

9b. Please check how often the following people/agencies attend JDTC team meetings (staffings) where participant progress is discussed:

	Never	Sometimes	Always	Not Applicable - Not a Member of the Team
a. Judge	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> -8
b. JDTC Coordinator	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> -8
c. Clinical Treatment Supervisor or Liaison	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> -8
d. Treatment Provider Representative(s)	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> -8
e. Prosecuting Attorney	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> -8
f. Defense Attorney	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> -8
g. Probation/Parole Representative	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> -8
h. School Representative or Liaison	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> -8
i. Community Partner(s)	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> -8
j. Other (Please specify: _____ )	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> -8

9c. Is the following information shared among the team to assist in team response to youth behavior?

	No	Sometimes	Yes
a. Drug test results	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2
b. Adherence to supervision requirements	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2
c. Progress of participant related to the treatment plan	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2

9d. In the JDTC hearings, how often does the judge:

	Never	A Little of the Time	About Half the Time	Most of the Time	Always
a. Speak directly to participants?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
b. Address participants by name?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
c. Provide verbal feedback/support to participants regarding their individualized goals/interventions?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
d. Acknowledge participants' accomplishments?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

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## Section 10. Court Response to Participant Behavior

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**10a. Please indicate the extent to which the following statements about INCENTIVES are true for your JDTC:**

	Never	Rarely	Sometimes	Always
a. Participants are given a written list of the behaviors that lead to incentives	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 0
b. Participants identify possible incentives through the case planning process	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 0

**10b. Please indicate the extent to which the following statements about SANCTIONS are true for your JDTC:**

	Never	Rarely	Sometimes	Always
a. Participants are given a written list of behaviors that lead to sanctions	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
b. Participants identify possible sanctions through the case planning process	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4

**10c. Which of the following responses to participant behavior including noncompliance have you used for participants as a SANCTION? (Check all that apply)**

- <sub>1</sub> Writing essays
  <sub>3</sub> Community service  
 <sub>2</sub> Sit sanctions (sit in court to watch)
  <sub>4</sub> Fees (that are used as a sanction, not to pay for services)

**10d. How often does the JDTC respond to the return to substance use (such as a positive drug test or admitting use) in the following ways?**

	Never	Rarely	Sometimes	Always
a. Impose a sanction	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
b. Re-evaluate the participant's treatment plan	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
c. Response depends on phase/level	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
d. Response depends on how many previous positive tests a participant has	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
e. Response depends on an assessment of the participant's unique risk and needs at that point	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
f. Participants have the option to challenge the result of positive drug tests	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4

**10e. Does your JDTC keep the data on numbers of incentives and sanctions for each participant?**

	No	Sometimes	Yes
a. Incentives	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2
b. Sanctions	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2

**10f. Does your JDTC review the data on numbers of incentives and sanctions for each participant?**

	No	Sometimes	Yes
a. Incentives	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2
b. Sanctions	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2

**10g. What is your estimate of the ratio of incentives to sanctions for each participant?**

- 1 Many more incentives than sanctions
- 2 A few more incentives than sanctions
- 3 About equal number of incentives and sanctions
- 4 A few more sanctions than incentives
- 5 Many more sanctions than incentives
- 6 Not sure

**10h. Is detention used as a sanction in your JDTC?**

- 0 No (*Skip to item 10k*)
- 1 Yes



**10i. How often do you use detention as a sanction:**

	Never	Rarely	Sometimes	Always
a. For positive drug screens?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
b. For continued use?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
c. For noncompliance with JDTC rules?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
d. For failure to appear for court (first time)?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
e. For failure to appear for treatment?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
f. For on-going failure to appear to court?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
g. After the first positive drug test?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
h. After the second positive drug test?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
i. After the third positive drug test?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
j. When youth are a danger to themselves?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
k. When youth are a danger to others?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
l. When youth may abscond?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
m. For tampering with a drug test?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4

**10j. When a detention sanction is used, would you say that the length of the sanction is generally:**

	Never	Rarely	Sometimes	Always
a. 1–2 days	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
b. 3–6 days	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
c. 1 week	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
d. 2 weeks	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
e. Longer than 2 weeks	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
f. Other (Please specify: _____ )	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4

Instructions for 10k: For this table, you should think about how these items apply to the experiences of the individual youth over time.

**10k. In the JDTC hearings, how often is the following true of the judge?**

	Never	A little of the time	About half the time	Most of the time	Always
a. Program requirements are clearly explained to participants.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>
b. Responses to the ways that participants are meeting/not meeting program requirements are consistently applied throughout the JDTC process.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>

Instructions for 10l: For this table, you should think about how these items apply to the experiences of all participants as a group.

**10l. In the JDTC hearings, how often is the following true of the judge?**

	Never	A little of the time	About half the time	Most of the time	Always
a. Potential incentives or sanctions are clearly explained to participants in advance (i.e., participants could predict they would receive incentives or sanctions that they ultimately receive).	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>
b. The judge reverses the team’s decisions regarding incentives, based on interactions during court appearances.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>
c. The judge reverses the team’s decisions regarding sanctions, based on interactions during court appearances.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>

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## Section 11. Drug Testing

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11a. Please indicate the extent to which the following statements about drug testing are true for your JDTC:

	Never	Rarely	Sometimes	Always
a. The team explains to participants the expectations to show up for drug testing.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
b. The team explains to participants expectations for not tampering with the drug tests.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
c. The team imposes immediate sanctions for failure to appear for a drug test.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
d. The team imposes immediate sanctions for tampering with a drug test.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
e. The team imposes graduated sanctions for failure to appear for a drug test.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
f. The team imposes graduated sanctions for tampering with a drug test.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>

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## Section 12. JDTC Successful Completion (Graduation) and Unsuccessful Exit

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**12a. Does your JDTC have clearly documented criteria for removal of participants from the program?**

- <sub>0</sub> No (*Skip to Question 12c*)
- <sub>1</sub> Yes
- <sub>-4</sub> Not sure

**12b. How often are the removal criteria applied for your JDTC participants?**

- <sub>0</sub> Never
- <sub>1</sub> A little of the time
- <sub>2</sub> About half the time
- <sub>3</sub> Most of the time
- <sub>4</sub> Always
- <sub>-4</sub> Not sure

**12c. When participants are removed from the JDTC (i.e., exited unsuccessfully) how often is this:**

	Never	Rarely	Sometimes	Frequently	Always
a. <i>Only</i> after exhaustion of all other options and behavioral contingencies?	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>
b. Because participants experience a new arrest?	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>
c. Because participants experience a new adjudication?	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>
d. Because participants experience a new arrest for drug possession?	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>
e. Because participants experience a new adjudication for drug possession?	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>
f. Because participants experience a failure to appear in court with no excuse?	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>

**12d. Does your JDTC attempt to contact participants at some point after they exit the JDTC?**

	No	Yes, some of them	Yes, all of them	Not sure
a. Participants who successfully complete JDTC	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> -4
b. Participants who unsuccessfully exit JDTC	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> -4

**12e. What do you talk with them about? (Check all that apply)**

- 1 Whether they need any support or assistance
- 2 Whether they have used alcohol or other drugs
- 3 Their current housing, education, and employment status
- 4 Any criminal behavior or contacts with the legal system (police or courts)
- 99 Other (Please specify: \_\_\_\_\_ )

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## Section 13. Data Collection and Evaluation

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### 13a. Which of the following data elements are collected by your JDTC?

If your JDTC does not collect any data elements, check this box and go to item 13b.

	Never	Sometimes	Always
a. Data from the treatment provider (e.g., attendance at treatment, treatment progress)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
b. Drug testing (e.g., dates of drug tests, drug test results)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
c. Drug use after program completion	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
d. Attendance at required activities (e.g., services, meetings, or events specified in the case plan)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
e. Phase progression information	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
f. Successful completion	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
g. Unsuccessful exit	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
h. Participant age at entry into JDTC	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
i. Racial/ethnic demographics of JDTC participants	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
j. Gender demographics of JDTC participants	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
k. Family-related information, such as family cohesion, home functioning, and communication	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
l. Recidivism/reoffending during the program	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
m. Recidivism/reoffending after program completion	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
n. Educational enrollment	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
o. Employment	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
p. Other (Please specify: _____)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3

**13b. Does the JDTC use the information it collects on participants to assess and monitor whether it is moving towards its program goals?**

<sub>0</sub> No

<sub>1</sub> Yes

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## Section 14. JDTC Statistics

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**14a. Do you have any services that are responsive to the particular needs of lesbian, gay, bisexual, transgender, queer or questioning, intersex, gender nonconforming, and Two-Spirit youth?**

- <sub>0</sub> No
- <sub>1</sub> Yes
- <sub>4</sub> Not sure

**14b. Does your JDTC keep data on the following characteristics for each participant?**

	No	Sometimes	Yes
a. Gender	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
b. Race/ethnicity	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
c. Sexual Identity (Note: Sexual identity includes gender identity and sexual orientation)	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>

**14c. Does your JDTC review data on the following characteristics for each participant?**

	No	Sometimes	Yes
a. Gender	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
b. Race/ethnicity	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
c. Sexual Identity (Note: Sexual identity includes gender identity and sexual orientation)	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>



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