WORKING P A P E R

Resource Coordination in Problem Solving Courts of the Los Angeles County Superior Court

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INFRASTRUCTURE, SAFETY, AND ENVIRONMENT

Preface

This report was supported by a contract from the Los Angeles Superior Court Office of Organizational Development and Education. Funds for this research were awarded as a Trial Court Innovations Grant to the Los Angeles Superior Court as part of the Judicial Administration Efficiency and Modernization Fund (JAEMF) enacted by the California state legislature in 1997. The Trial Court Innovations Grants Program is intended to fund research to improve access, efficiency and effectiveness of the courts. This report is intended for use by the client in facilitating strategic planning. The report assumes familiarity with the general workings of the Los Angeles Superior Court system.

At the request of the client, the purposes of this report were twofold: (1) to characterize the ways in which treatment resources are coordinated for offenders within the problem solving courts of the Los Angeles Superior Court system; and (2) to examine the views of various stakeholders within the court system regarding problem solving courts, with particular emphasis on the resource coordination process. Of particular interest were issues such as whether stakeholders regard alternative courts as providing equitable sanctions vis-à-vis traditional courts, whether services-based programs are perceived to work better to prevent recidivism than more traditional sanctions, and the degree to which stakeholders believe that various problems exist with provision of services in these courts.

To address these issues, we conducted interviews with stakeholders. We did not independently corroborate the validity of stakeholder opinions by inspecting official court records or assessing defendant outcomes.

This research was conducted within the RAND Infrastructure, Safety, and Environment (ISE) unit. This new research unit consolidates the work of RAND Public Safety and Justice, RAND Science and Technology, and the RAND Homeland Security Center. ISE encompasses policy research and technical analyses in five areas in which RAND has long experience: homeland security; public safety and justice; occupational safety; environment, energy, natural resources, and economic development; and transportation, telecommunications and information systems. ISE's mission is twofold: to improve the development, operation, use, and protection of society's essential built and natural assets; and to enhance the safety and security of individuals in transit and in their workplaces and communities.

Executive Summary

In recent years, a range of “problem-solving” courts have emerged in California and elsewhere. These specialized courts aim to address underlying issues contributing to criminal behavior. Offenders are sentenced to treatment instead of incarceration, or are diverted from the court system in exchange for completion of treatment. Within such courts, “resource coordinators” match individual defendants with appropriate services. They typically follow a case through the pre-and post-sentencing states, coordinate referrals to treatment agencies, and convey information about a client’s status and progress in a program.

This study describes and evaluates the resource coordinator function in a range of Los Angeles Superior Court programs intended to provide a therapeutic, problem-solving, approach to jurisprudence. Specifically, it describes how several different “problem-solving” courts manage resource coordination, investigates perceptions of strengths and weaknesses in these processes, and identifies potential areas for improvement.

For this evaluation, the research team requested interviews with 56 stakeholders, including judges, public defenders, prosecutors, resource coordinators, and treatment providers. The 42 persons who agreed to be interviewed included representatives of the following court programs: (a) the mental health court, (b) drug court, (c) Proposition 36 court, (d) community court, and (e) homeless court.

The overwhelming consensus of the individuals we interviewed was that these court programs are extremely valuable and should be expanded. All classes of stakeholders shared a strongly favorable opinion of these programs, although prosecutors were slightly less positive in their evaluations. Perceptions of strengths and weaknesses varied by program; Proposition 36 courts were seen as having the most room for improvement. Respondents also indicated that, with the possible exception of the mental health court program, all of these programs could be improved by expanding the availability of treatment for defendants with mental illness.

Both our data and extant literature indicate current procedures provide inadequate access for clients in need. The system lacks a uniform screening process for detecting and channeling defendants with social service needs who may be eligible for alternative sentencing programs. Admission to a program is frequently contingent upon criteria other than true need or legal

eligibility. These programs may not, for all practical purposes, be available to most “clinically eligible” people who are charged with crimes in Los Angeles County. The narrow focus of some programs may also be inconsistent with the ultimate goals of problem-solving courts that attempt to view criminal behavior in a social and psychological context.

In addition, some problems may exist in communication among certain stakeholders. Participants mentioned that treatment providers frequently reject clients even after they initially promise them a spot in the program. This indicates that misunderstandings may exist between resource coordinators and treatment providers regarding available services and the types of clients that are eligible for them. Treatment providers need to clearly articulate their eligibility requirements and resource coordinators should adhere to these rules when developing a disposition for their clients. This may reduce the chances of clients being rejected and dropping out of an alternative sentencing program.

Stakeholders may benefit from a centralized directory providing a comprehensive, consistently updated list of available social services. Increased sharing of program information can help stakeholders in different types of courts and resource coordination processes better address their clients’ psychological, social, and legal needs.

Some limitations regarding our conclusions should be noted. There are several limitations due to the sample we studied. We interviewed only current stakeholders. To the extent that former stakeholders may have different views, these are not represented in our data. Moreover, we did not interview court or service-provider personnel not directly involved in these programs. Although we attempted to select interviewees at random from the available pool of stakeholders, study participants may not be representative of all stakeholders. For example, it is possible that those who agreed to be interviewed were more vested in these programs than the broader population of stakeholders. In addition to these limitations of our sample, there are inherent limitations of our methodology. Most importantly, we did not collect data relevant to program or participant outcomes. Overwhelming approval by stakeholders of the resource coordination processes may not actually correspond to improving outcomes to defendants or reducing recidivism.

In summary, the interviews we conducted revealed that the stakeholders had very positive impressions about the problem solving courts. In addition, the interviews revealed considerable diversity in the policies and procedures employed by the various therapeutic jurisprudence

programs implemented across the Los Angeles Superior Court System. This diversity is likely a product of the fact that these programs were developed independently, often championed by a single individual, rather than the result of central planning. We believe that that the Los Angeles Superior Court may be able to improve the outcomes to defendants and to society by addressing several system-wide questions about the priorities, policies and procedures used in problem-solving courts. Having a slightly more integrated system may increase the number of defendants who have access to these resources, distribute resources more equitably, and provide treatments that are better tailored to defendants' needs.

INTRODUCTION

Overview of Problem-Solving Courts

In the past decade, a range of “problem-solving” courts have emerged across California and throughout the nation. These specialized courts (or specialized court calendars) aim to address social and psychological problems contributing to criminal behavior in order to promote effective case outcomes for victims, communities, and defendants (Casey and Rottman, 2003). Drug court, which offers drug-involved offenders treatment rather than incarceration, is the most widely recognized type of problem-solving court. Other problem-solving courts include domestic violence courts that emphasize victim safety and defendant accountability, community courts and homeless courts that target low-level quality of life crimes (e.g., loitering, riding the bus without paying the fare) and mental health courts that provide treatment to mentally ill offenders.

The integration of treatment services with judicial case processing is a unifying core principle of such courts (Conference of Chief Justices and Conference of State Court Administrators, 2000). Offenders are sentenced to treatment instead of incarceration or are diverted from the court system upon completion of treatment. Coordination of these services typically begins early in the judicial process, often shortly after an individual’s arrest, with determination of program eligibility (Casey and Hewitt, 2001). Problem-solving courts emphasize a collaborative approach involving other community entities such as health and social service agencies (Casey and Hewitt, 2001). Generally, the judge, prosecutor, and defense attorney work as a team with a resource coordinator to develop a case plan and to closely monitor defendant compliance with it. Certain courts are pre-adjudicatory and diversion oriented, others require a plea before a treatment plan is implemented.

In this document, we review background information on problem-solving courts, describe their current functioning in the Los Angeles Superior Court, and present findings from interviews with 42 persons including judges, public defenders, prosecutors, resource coordinators, and treatment providers, on social service resource coordination in problem-solving courts.

Therapeutic Jurisprudence

Problem-solving courts are based on the concept of therapeutic jurisprudence. Therapeutic jurisprudence considers the “role of the law as a therapeutic agent” by focusing on its impact on emotional life and psychological well-being (Wexler and Winick, 1996). This orientation integrates a “rights” perspective emphasizing justice, rights, and equality issues, with an “ethic of care” perspective, focusing on care, interdependence, and response to need (Janoff, 1991). It explores how the knowledge, theories, and insights of mental health and related disciplines can help shape the legal response to crimes (Wexler and Winick, 1996) and asserts that effective case outcomes are achieved by attending to the individuals as well as the issues involved in a case (Janoff, 1991).

Therapeutic jurisprudence attempts to transform the traditional court process while encouraging the innovative use of judicial authority. Some of the specific ways this orientation has been suggested to differ from traditional court processes are depicted below.

Traditional Process	Transformed Process
<ul style="list-style-type: none">• Focus on legal outcome• Adversarial process• Claim- or case-orientation• Emphasis on outcome of adjudication• Process based entirely on application of law• Formal process	<ul style="list-style-type: none">• Focus on therapeutic outcome• Collaborative process• People-orientation• Emphasis on postadjudication behavior• Process applies laws in context of the medical and social sciences• Informal process

Table adapted from Rottman and Casey (1999)

Principles of Problem-Solving Courts

Though varying by target population and problem, eligibility criteria, necessity of a plea for services, court monitoring requirements, and other aspects (Casey and Hewitt, 2001), these courts share a number of common features (Berman and Feinblatt, 2001), including:

1. *Nature of case outcomes*, including the goal of achieving “tangible outcomes for victims, for offenders and for society.”
2. *Focus on system change*, including the re-engineering of “how government systems respond to problems like addiction, mental illness and child neglect.”

3. *Emphasizing judicial authority* to solve problems and change the behavior of litigants, rather than following rote sentencing guidelines.
4. *Collaboration* among government and non-profit partners (criminal justice agencies, social service providers, community groups and others) to help achieve the courts' goals.
5. *Non-traditional roles* for altering the dynamics of the courtroom, including certain features of the adversarial process.

Forces Contributing to the Rise of Problem-Solving Courts

The rise of problem-solving courts has been attributed to breakdowns in social and community institutions that have traditionally addressed problems like addiction, mental illness, domestic violence, and quality of life crimes (Berman and Feinblatt, 2001). This state of affairs has contributed to an increase in the nation's incarcerated population and a resulting prison overcrowding (Abram & Teplin, 1991; Langan, 1991; Teplin, 1994). In particular, increasing caseloads, and frustration, regarding the large number of cases that "cycle through the system" repeatedly without any apparent deterrence to repeat offending, have led stakeholders to seek alternatives to the traditional system. At the same time, trends emphasizing the accountability of public institutions, as well as advances in the quality and availability of therapeutic interventions, may have given many in the criminal justice system greater confidence and motivation for using therapeutic approaches (Goldkamp and Irons-Guynn, 2000; Rottman and Casey, 1999).

Criticisms of Problem-Solving Courts

The rapid expansion of problem-solving courts and the associated transformation of traditional legal processes have been met by several criticisms. Drug courts, the most widely recognized problem-solving court, have been the most frequently questioned. The most serious concerns regard the undocumented effectiveness of problem-solving courts, blurred separation of government powers, and the endangerment of a defendant's right to due process.

Regarding empirical outcome data, Hoffman (2000) claims that although many formal and informal studies have examined these novel courts, e.g., Belenko (1998; 1999) none has demonstrated reliably that this alternative approach actually works to reduce recidivism. In particular, he notes that while drug courts expedite cases, they have no more than a marginal effect in reducing recidivism. In response to proponents claiming that the "purpose" of drug

court is the cost-effective curtailment of drug abuse, he contends that no court should seek to curtail a problem, but instead should enforce the law of legislators and executives who “have the imprimatur of public consensus” to curtail public problems.

Similarly, Boldt (1998) contends that problem-solving courts may interfere with due process for defendants, particularly when “informality, indeterminacy, and broad discretionary decision making” replace the traditional adversarial system. The push to initiate drug treatment as soon as possible after arrest, for example, may prevent defense attorneys from finding the time or motivation to conduct a thorough factual or legal investigation of a case. Hence, a defendant may be deprived of the opportunity to exercise genuine choice in making the decision as to whether to enter a drug treatment program.

Berman and Feinblatt (2001) summarize additional concerns that have been directed at problem-solving courts. They mention the worry that “this new brand of jurisprudence” may give judges the power to rule based on their own idiosyncratic views rather than the law. They also report that skeptics are concerned that judges may be unduly deferential to social science experts and clinicians. Finally, they ask whether court-ordered treatment represents a paternalistic and inappropriate expansion of governmental control into the private lives of defendants.

In sum, the success and utility of problem solving courts are still a matter of vigorous debate. In spite the ongoing controversy, new problem solving courts are being established and most existing ones are continuing or even expanding. Thus, investigations into how existing programs are administrated on a practical level are essential, even though questions about the effectiveness of these programs are not definitively answered. Knowledge about the management of problem-solving courts, as well as their common and dissimilar features, can provide valuable information to assist in their evaluation and improvement.

Resource Coordination in Problem-Solving Courts

Different types of problem-solving courts all share certain important features, although they may have evolved to address slightly different problems. At the most basic level, all problem-solving courts have some process to link appropriate defendants with social services or treatment in lieu of traditional sanctions, i.e., a process of *resource coordination*. In general, resource coordination has the following goals: (a) identifying defendants who would benefit from social services, and (b) matching admitted clients with appropriate, available services.

Persons familiar with both the legal and social service systems facilitate these goals. In certain court programs, e.g., the mental health court program and the community court program in the Los Angeles Superior Court system, these professionals are *resource coordinators*. In other programs, they may be called “court liaisons” or “court advocates.” These individuals may be employees of the court or of service agencies. They are responsible for facilitating the exchange of information and individuals across boundaries within courts themselves and between courts or other agencies (e.g., health, mental health, income assistance, etc.; Casey and Hewitt, 2001). They typically follow a case through the pre- and post-sentencing stages, coordinate referrals to treatment agencies, and transmit information about a client’s status and progress in a program. The specific elements and processes involved in resource coordination vary by jurisdiction and type of problem-solving court. Typically, these processes have been developed in an ad hoc manner to address the particular needs of individual courts.

Research on the diverse methods used for resource coordination across different problem-solving courts constitutes an important prelude to understanding how such courts should be operated to efficiently maximize positive outcomes such as reduced recidivism. As such, study of the resource coordination process may provide valuable information for the improvement of existing specialty courts. Moreover, as resource coordination is a core feature across programs, it represents a potential target for comprehensive efforts to enhance the quality of problem-solving courts. Information on the similarities and differences among resource coordination processes, as well as the advantages and disadvantages associated with them, may inform such court-wide initiatives.

RESOURCE COORDINATION IN PROBLEM-SOLVING COURTS OF LOS ANGELES COUNTY

The present study examines resource coordination in several different problem-solving court models within the Los Angeles Superior Court system: (a) the mental health court program, (b) drug court, (c) Proposition 36, (d) community court, and (e) homeless court based on interviews with representatives from various stakeholder groups involved in the resource coordination process, i.e., judges, prosecutors, defense attorneys, treatment providers, and resource coordinators themselves. We describe the role of resource coordinators in each of these programs and the access to and process of services that they offer to defendants. We also

investigate stakeholders' perceptions of strengths and weaknesses in these processes and identify potential areas for improvement.

Methods

Sample Selection

We randomly selected for analysis ten court programs from a master list of 44 Los Angeles countywide specialty courts provided by the Los Angeles Superior Court Office of Organizational Development and Education. Courts selected included community, homeless, Proposition 36, drug, and domestic violence courts. The Superior Court also provided contact information for program stakeholders, i.e., resource coordinators or persons essentially serving this function, judges/commissioners, prosecutors, defense attorneys, and treatment providers. We attempted to interview stakeholders from the community court, the homeless court, one randomly selected Prop. 36 court, one randomly selected Prop 36 *and* drug court, one randomly selected drug court, and one randomly selected domestic violence court. From a list of 7 Department of Mental Health resource coordinators, we also randomly selected 5 resource coordinators for interviews. These coordinators also provided contact information for other mental health court stakeholders (e.g., judges, prosecutors, defense attorneys, treatment providers). Since mental health resource coordinators work on an as needed basis in several courtrooms within multiple courthouses, we concluded that this strategy was the most efficient and practical method of obtaining the names and contact information of stakeholders who had worked with mental health resource coordinators.

Interview Sample

Potential interviewees (i.e., persons listed on the master list of stakeholders) received a letter from Presiding Judge Robert A. Dukes. This letter introduced the study and asked for stakeholders' participation in the event that a member of the RAND research team contacted them. We called 56 stakeholders, inviting each of them to participate in interviews. Of these, we interviewed 42; 13 persons never responded to our repeated requests for an interview, thus passively opting not to participate. Approximately 3-5 phone messages were left with each of the 13 persons. One individual actively declined to participate in the interview, yielding an overall response rate of 75%. Because we were only able to interview one domestic violence

court stakeholder, we are unable to offer any generalizations regarding that court. For that reason, we did not include the results of this interview in our analysis.

Procedures and Analysis

With each stakeholder, we conducted a semi-structured phone interview of approximately 30 to 90 minutes. (See Appendix for a copy of the interview instrument). RAND staff developed the interview questions in collaboration with the Los Angeles Superior Court Office of Organizational Development and Education to best meet client objectives. Interviews included open- and close-ended questions regarding program strengths and weaknesses and possible areas for improvement. A common set of questions were addressed to all participants, with some exceptions: (1) homeless court stakeholders were asked a limited set of questions because certain questions did not apply to their program, (2) treatment providers were not asked the question (Q10) which evaluated the quality of the treatment providers, and (3) only resource coordinators were asked to provide a detailed description of the resource coordination process in their courts. All interviews were audiotape recorded, except for interviews with two participants who requested that their responses not be taped.

We used interviews with the respondents to describe the resource coordination process in each court. These descriptions included information about:

- (1) The general program
- (2) The process by which clients obtain access to the program.
- (3) The resource coordination process.
- (4) The treatment involved in the program.

For each close-ended question, we computed overall mean ratings for different groups of program participants. We sought to characterize the views of stakeholders using responses to close-ended questions. We also examined differences in perceptions across stakeholder groups and court programs. In comparing across stakeholder ratings, we do not attempt to generalize to a hypothetical population of possible stakeholders and, therefore, do not report the statistical significance of apparent group differences (i.e., the likelihood that an observed difference might be attributable to sampling variability). We believed such inferential statistics would be inappropriate insofar as the study was not designed to draw inferences from our sample to broader populations. In several instance, for example, all eligible persons within a given

stakeholder class were interviewed. Inferential statistics are not meaningful in this context. In other instances, too few persons were interviewed to form a solid basis for reliance on inferential statistics. Rather than rely on statistical significance as such, we elected to focus on group differences observed in our sample that were of such magnitude that they might reflect practically meaningful patterns. We used an effect size of .50, regarded by Cohen as moderate in size, as a benchmark against which to evaluate whether a group difference might be of practical significance (Cohen, 1988).

As a final step, we examined interviewees' open-ended responses, spontaneous comments, and suggestions for improving the programs.

Descriptions of Court Programs

Prior to characterizing the views of various stakeholders with regard to specific issues, it is important to briefly review key features of resource coordination for each court program using oral descriptions provided to us during interviews. The table below summarizes the similarities and differences across the problem-solving courts investigated in this study.

Court Programs	Access to Program		Location		Treatment Type	
	Determined by Legal Criteria	Determined by Clinical Criteria	In-Court Resource Coordinator	Off-Site Resource Coordinator	Target Single Problem Domain	Target Multiple Problem Domains
Mental Health Court		X	X			X
Prop. 36	X			X	X	
Drug Court	X	X	X	X		X
Community Court	X		X		X	
Homeless Court	X		N/A	N/A	N/A	N/A

Mental Health Court Program

Designated mental health resource coordinators, who are employees of the Los Angeles County Department of Mental Health (DMH), currently provide services to 23 courthouses. Resource coordinators typically divide their time among two to four assigned courthouses. Their

responsibilities include conducting a clinical assessment of defendants who are identified as being potentially mentally ill and assisting the court in recommending appropriate dispositions for clients with mental health conditions. Resource coordinators characterized their roles variously as “gate-keepers for alternative sentencing programs,” “consultants to the court” and as providing “linkages to treatment providers.” In addition to these official functions, resource coordinators frequently provide ad hoc informal assistance to judges, prosecutors, and defense attorneys regarding acute psychological issues that occasionally arise in the courtroom. For example, resource coordinators may be asked to assist distressed family members of a defendant facing the death penalty or to recommend social services for battered women.

Access to the Program

Resource coordinators learn of potentially eligible clients from many sources. Family members, defense attorneys, and community clinics may request the involvement of a resource coordinator when they learn that a mentally ill relative or client was arrested. In addition, resource coordinators often learn of a client who may need their assistance from judges, defense attorneys, or sheriff’s department officials who suspect that a person is mentally ill by observations of unusual behavior during the arrest or questioning in court. The client’s defense attorney must request the services of the resource coordinator. Resource coordinators may get involved in the judicial process at several points, including during arraignment or trial.

Resource Coordination

Resource coordinators conduct face-to-face assessments with potential clients to ascertain whether a client suffers from a mental illness and to determine the services that may be required. These assessments typically take place either in jail or at the courthouse. Resource coordinators use a structured interview instrument (the “Intake Assessment, Los Angeles County Department of Mental Health/Jail Mental Health”) to evaluate, among other issues, the client’s particular problem; degree of impairment; psychosocial, medical, and treatment history (including outpatient treatment and psychiatric hospitalizations); current and past medications; substance abuse; and mental health status, including risk for suicide or homicide. As part of this process, the resource coordinator notes whether a client qualifies for a formal psychiatric diagnosis. Recommendation of treatment does not depend on a formal diagnosis; the resource coordinator

frequently suggests psychosocial services for “sub-diagnostic-threshold” clients (e.g., clients with milder forms of depression and anxiety). During these interviews, resource coordinators also assess an individual’s willingness and motivation to participate in mental health treatment as well as the likelihood of success in treatment. An unmotivated client with an extensive history of repeated violence may, for example, be deemed an inappropriate candidate for treatment. In addition to face-to-face interviews, resource coordinators, with appropriate releases regarding confidential information, gather information on clients from other sources, such as DMH records and information from previous treatment providers (e.g., regional centers providing services to persons with developmental disabilities, Veterans Administration).

Upon conclusion of the assessment process, the resource coordinator reports to the defense attorney, prosecutor, and judge whether the defendant suffers from a mental illness and is an appropriate candidate for treatment. If the client is mentally ill and amenable to treatment, the resource coordinator recommends a treatment option. Resource coordinators reported that their treatment recommendations are typically followed, although, on occasion, judge or prosecutor is unwilling to go along with an alternative sentencing plan. Whether a client is sent to treatment after charges are dismissed (e.g., if a client gets a conservator who assures that the client is no risk to the public) or treatment is court-ordered in lieu of custody time tends to vary by case as well as by judge and prosecutor.

Treatment

Resource coordinators arrange referrals for inpatient or outpatient treatment. Treatment providers include DMH outpatient clinics and residential programs, the Veterans Administration, in-jail mental health services, and regional centers. In addition to clinical need, client eligibility for certain funding, e.g., SSI or general relief, often determines specific treatment services. Some resource coordinators periodically visit treatment programs that directly contract with DMH to check on their clients.

In order to monitor a client’s adherence and progress in the treatment program, judges typically require progress reports from treatment providers (if the client is in a locked program) and/or court appearances of the client (if the client receives outpatient treatment). Depending on the case, these reports and appearances may initially be relatively frequent (e.g., every 30 days) and then decrease in frequency (e.g., every 3 months) as treatment progresses.

Judges have discretion regarding how to handle non-compliance with treatment. Typically, non-compliant clients receive a few chances to correct their behavior. In certain cases, the judge may ask a resource coordinator, if a program is not an appropriate match for a client, to find an alternative treatment program. If non-compliance continues, a bench warrant may be issued to have the client appear in court or the client may even be remanded to jail. In some cases, when a client has served most of his or her time in a treatment program, a judge may decide to release a non-compliant client from treatment.

Proposition 36

In contrast to the other models described in this report, the Substance Abuse and Crime Prevention Act, also known as Proposition 36 (Prop. 36), is not a specialty court program per se. An initiative passed by California voters in 2000, this law provides qualifying defendants convicted of non-violent felony and misdemeanor drug offenses with the opportunity of probation and drug treatment. The law also applies to parole violators who have committed a nonviolent drug possession offense or have violated any drug-related condition of parole. Persons convicted of a simultaneous non-drug-related charge are not eligible for the provisions of Prop. 36, nor are those with a history of violent crimes and imprisonment in the past five years. Defendants' participation in Prop. 36 is voluntary; they may also opt for routine criminal justice processing.

Access to the Program

A convicted defendant deemed eligible to receive drug treatment services under Prop. 36 is referred to a Community Assessment Service Center (CASC) where the client's clinical eligibility is certified (i.e., where it is established that the client indeed suffers from drug addiction and is willing to receive treatment) and a referral to treatment is issued. CASC's are community-based organizations that possess special contracts with the Court to act as Prop. 36 drug assessment and referral sites. Typically, clients call a local CASC to schedule an assessment. Certain courthouses have their own designated CASC assessment specialist on-site, allowing for a more rapid assessment process. These on-site CASC assessment specialists will also conduct assessments in jail for clients who are in custody.

Resource Coordination

CASC assessment specialists use a shortened version of the Addiction Severity Index (ASI; McLellan et al., 1992), a semi-structured face-to-face interview designed to address patient medical status, employment and support, drug use, alcohol use, legal status, family and social status, and psychiatric status. Typically, the involvement of the CASC assessment specialist ends once a client is placed with a substance abuse treatment provider. In courthouses with designated on-site CASC professionals, however, representatives may receive follow-up information regarding a client's adherence and progress in a treatment program and forward this information to the judge. They may also meet with a client during court appearances.

Treatment

Based on an assessment of the client's severity of addiction the CASC assessment specialist determines the level of intensity of treatment (e.g., inpatient vs. outpatient) and refers the client to a substance abuse treatment provider. If the client has needs in other areas, the assessment specialist may occasionally provide referrals to additional services, e.g., vocational training, mental health treatment, housing. However, clients are not required to follow-up and attend any services other than court-ordered drug treatment services. In order to monitor a client's adherence and progress in the treatment program, judges typically require clients to appear in court at least once per month. Judges also receive progress reports from treatment providers. Clients who do not adhere to treatment are given three additional opportunities to comply before the judge imposes additional sanctions (e.g., incarceration).

Drug Court

Like Prop. 36, drug courts also provide court-ordered treatment for non-violent felony drug defendants, but under more stringent legal criteria. Defendants with a prior conviction for a violent offense or drug trafficking, manufacturing, or sales are ineligible. Unlike Prop. 36, which requires the client to plead "no contest" and has the client sentenced to treatment instead of incarceration, drug court offers pre-trial diversion. Charges are put "on hold" for a period of 12 months, during which the client has to complete drug court-ordered treatment. If the client completes the program then charges are dismissed and purged from the client's record. If the client does not complete the program, charges are reinstated.

Access to the Program

Many defendants who participate in drug court are initially suggested by their attorneys for Prop. 36. One interviewee who is involved with both drug court and Prop. 36 mentioned that although drug courts have existed for a longer time, they are relatively unknown compared to Prop. 36. Upon review of the case, the defense attorney, prosecutor, and judge may decide that a client fulfills the legal criteria to be eligible for drug court. Once legal eligibility and client willingness is established, a drug court resource coordinator called “drug court liaison” assesses the individual’s clinical suitability for the drug court program.

Resource Coordination

Drug court resource coordinators are employees of drug treatment facilities that contract directly with the drug courts. They may provide assessment services in their treatment agency or on-site at the drug court. In a structured interview (the “Suitability Assessment for Drug Court” provided by the Los Angeles County Department of Health Services - Public Health Alcohol & Drug Program Administration), clients provide background demographic information and their history of drug addiction, prior treatment, and of any overdoses or suicide attempts. Based on this information, resource coordinators determine the level of care (i.e., inpatient vs. outpatient) required. Clients who are deemed appropriate for the level of care offered by the liaison’s agency are directly referred to that agency. Otherwise, an alternative referral site is located.

Treatment

Treatment providers are generally funded through the Los Angeles County Department of Health Services - Public Health Alcohol & Drug Administration Program. Intensity of treatment depends on the client’s individual needs and adjustments are made to allow for coincidental issues, including, for example, referral for mental health treatment. Because there are a limited number of “slots” in each drug court, judges have a high level of oversight regarding a client’s progress in treatment. Some judges maintain close contact with treatment providers, visit treatment programs, and get to know the counselors involved. Clients are typically required to appear in court every 30 days to show progress and adherence; required court appearances may become less frequent (e.g., every 60 days) as treatment progresses. Non-adherence with

treatment is addressed on a case-by-case basis, first by the treatment staff, who may require attendance at additional 12-step meetings or completion of various assignments at the treatment facilities, and later eventually by the judge. Serious violations, such as failing a drug test or leaving a residential treatment site, as well as “attitude problems” are reported to the judge. Should attempts to convince the client to comply with treatment be unsuccessful, judges may terminate participation in the drug court program and reinstate charges against the defendant.

Community Court

The community court we examine in the present study considers persons who commit “quality of life” offenses, such as public drunkenness, painting graffiti, loitering, or petty theft. Instead of punishing these low-level crimes with traditional sanctions, community court matches defendants with social services addressing underlying causes that contributed to the offenses. In exchange for completion of the prescribed program, charges against the defendant are dropped.

Access to the Program

In the particular community court examined in this study, eligibility is determined by the location in which the crime occurred (the Van Nuys region) and the nature of the crime itself. Defendants are automatically considered for community court if they are arrested and these two criteria are met. Defendants are not required to participate in community court and may choose a more traditional sanction, such as paying a fine or proceeding to trial.

Resource Coordination

Once the legal criteria for community court are met, a community court resource coordinator meets with the defendant and conducts an interview to learn about the client’s unique needs and life circumstances leading to the arrest. The resource coordinator also assesses the defendant’s motivation for entering the community court program and the likelihood of successful program completion. Based on this interview information, as well as the nature of the charge leading to the arrest, the resource coordinator develops an appropriate disposition for the client. The public defender, city attorney, and judge must approve this recommendation.

Treatment

Treatment providers are various non-profit community organizations, none of which are funded directly by the court. As noted, treatment is matched with the nature of the offense. For example, substance abuse services may be suggested for an individual arrested for public drunkenness and housing services may be suggested for a homeless person arrested for loitering. Treatment must be completed by a certain date imposed by the court. The client must report to the resource coordinator evidence of treatment completion. If treatment was completed in accordance with the court's stipulations, then charges are dropped. Initial non-compliance may elicit an extension by the judge to complete treatment, but continued non-compliance may result in additional sanctions.

Homeless Court

The homeless court program examined in this study provides homeless persons who committed low-level quality-of-life misdemeanors a chance to have outstanding warrants and tickets dismissed in exchange for having completed a social service treatment program. Offenses that are eligible for dismissal must not involve a victim, a weapon, or drug possession. Clients who are able to show evidence that they have participated in 90 days of continuous involvement in a treatment program and have not received any tickets for the past 6 months are eligible to have their charges dismissed through the homeless court program. Prior to a homeless court session, Public Counsel, a pro bono law firm, submits an application for the program on behalf of the homeless person to the city attorney's office. The city attorney reviews the case and determines if the client indeed qualifies for homeless court, i.e., shows sufficient evidence of participation in 90 days of continuous treatment. If the client is deemed eligible for the program, then the outstanding warrant of interest is dismissed and charges are dropped. Homeless court participants then attend a homeless court session, which takes place approximately once per month in different homeless shelters in Los Angeles County. A judge presiding over these sessions formally confirms the dismissal of the charges.

Access to the Program

Homeless persons gain access to the homeless court program either through outreach activities initiated by Public Counsel or through the efforts of their case managers at agencies

serving the homeless. Public Counsel representatives visit homeless shelters and outdoor places where homeless persons congregate to inquire about their legal needs. If they determine that a person has outstanding warrants for low-level offenses and has completed at least 90 days of continuous treatment, then a homeless court application will be opened. As part of their application, clients are asked to submit evidence of treatment participation (e.g., a letter from the treatment program). Alternatively, a homeless person's case manager at a social service agency, who has knowledge of the homeless court program, may determine that a client could potentially be eligible for homeless court based on treatment participation. If the client consents, the case manager may consequently initiate the homeless court process with Public Counsel.

Resource Coordination

The homeless court program does not entail any conventional court resource coordinator function. While homeless persons are referred to services by their case managers in shelters and other agencies, the purpose of the treatment qualifying them for homeless court was not to fulfill a court order. In fact, clients in this program often select treatment without awareness that completion of treatment may impact their outstanding warrants. Nevertheless, if the completed treatment renders a client eligible for the homeless court program, it appears to be a welcome added benefit. This process is markedly different than the other programs studied, which require clients to complete treatment either as a condition of their probation or to have charges dismissed. The homeless court model, by contrast, *rewards* individuals for treatment completed *in the past*.

Treatment

A variety of services qualify as evidence of “treatment” for the purpose of homeless court. The particular treatment does not have to be directly related to the nature of the offense. For example, an eligible treatment for a person who was riding the metro without a fare could be participation in vocational training activities. The 90 days of continuous treatment may consist of a combination of treatment-related activities, for example, 30 days in a detox facility, 30 days in a recovery program, and 30 days in job training.

Stakeholder Perception of Resource Coordination

General Findings

How well do stakeholders think resource coordination is functioning? In this section we report interviewee responses to close-ended questions of our survey. We include stakeholders from the mental health court program, Prop. 36, drug court, and community court. Stakeholders from the homeless court were excluded because it contains no formal resource coordinator function. We report certain general perceptions regarding the homeless court model in a separate section below.

Overall, interviewees reported that the resource coordination process worked well (Table 1, Q20). In response to a follow-up question to item 20, interviewees from different stakeholder categories (i.e., judges, prosecutors, defense attorneys, etc.) and court models (i.e., mental health court program, drug court, Prop. 36, community court, and homeless court) commented on the high level of experience, dedication, and caring of the staff involved. They had especially high praise for resource coordinators who are located in the court at least part-time (i.e., mental health and community court resource coordinators; resource coordinators in certain drug and Prop. 36 courts). Stakeholders felt that having these professionals on-site brings a “wealth of knowledge to the court.” Several stakeholders mentioned that they “cannot picture life” in the court without their resource coordinator.

Most interviewees also reported that linking defendants with social services, instead of providing traditional sanctions, is serving the interests of the public (Table 1, Q17), the defendant (Table 1, Q18) and the justice system (Table 1, Q19). There was also broad agreement that social service resource coordination processes should be expanded to increase the number of defendants admitted to existing programs (Table 1, Q15) and to address additional types of problems (Table 1, Q16).

Prosecutors interviewed were slightly less enthusiastic than interviewees from other stakeholder groups, and were neutral with respect to expanding programs (Table 2, Qs 15 and 16). Still, there was no indication that interviewees felt that that resource coordination processes let offenders “get off with a slap on the wrist” (Table 1, Q14), nor did many believe that these programs are hampered by a perception that they do not seriously punish offenders (Table 1, Q12). In fact, a majority believed that services-based programs that include resource

coordination processes work better to prevent recidivism than do more traditional sanctions (Table 1, Q13).

In response to follow-up questions, stakeholders noted that such programs “stop the cycle of crime” by “changing defendants at the deepest level.” There was a strong sense that procedures are in place to adequately monitor a defendant’s treatment adherence and progress in social service programs (Table 1, Q6). Most respondents believed that communication was adequate among the different stakeholders involved in the resource coordination process, i.e., among prosecutors, judges/commissioners, public defense attorneys, and treatment providers (Table 1, Q7).

Opinions varied as to whether the resource coordination process provides access to services for all or almost all defendants who need social services (Tables 1 and 2, Q2). Prosecutors and resource coordinators interviewed were more likely than judges and defense attorneys to think that adequate access to services is provided. One public defender mentioned the lack of awareness by stakeholders of various social service programs, which in turn may mean they services are never offered to eligible defendants. A resource coordinator also commented that some defense attorneys may advise their clients not to enter a social service program, even though the client may likely benefit from it, because program participation may require more time to complete than actual incarceration. Some interviewees attributed the problem of access to a lack of adequate social services in the community. These interviewees noted, for example, a shortage of short-term detox and residential facilities, as well as an absence of programs that treat clients with multiple problems, such as coinciding substance abuse and mental health disorders. In such cases, a client may be deemed ineligible for the alternative sentencing program not because of legal requirements but because there are no services that adequately meet the client’s level of need.

Most interviewees agreed that the process of linking clients with social services in lieu of traditional sanctions does not work for certain types of clients (Table 1, Q1). Persons with multiple problems (e.g., substance abuse and other mental health problems, immigration issues) were frequently mentioned as the most difficult candidates. Interviewees attributed this to a lack of services for “more complicated clients.” In particular, according to our participants, there appears to be lack of locked inpatient facilities attending to more severely disabled clients, who may instead be sent to programs that do not adequately address their needs. Interviewees also

reported that in some cases the nature of client problems might adversely affect motivation for and compliance with treatment. Interviewees mentioned that some defendants simply “do not want any help” or are not interested in participating in a structured program, while others fail in the programs because they regard it as an easy way out and take advantage of the system. In addition, certain defendants needing social services are ineligible due to their criminal background or the specific nature of the current charge.

Nevertheless, most interviewees believed that resource coordinators were effective in assessing the specific needs of legally eligible clients (Table 1, Q4). This is noteworthy given the lack of funding interviewees perceived for coordinating services (Table 1, Q8) and needed treatment (Table 1, Q9).

Overall, stakeholders interviewed were divided on whether there were problems with eligibility requirements for access to the programs (Table 1, Q3). Because in most cases, e.g., Prop. 36, drug court, and community court, the main eligibility requirements are determined by law; this appeared to be a non-issue for some interviewees. Even in the mental health court program, where eligibility criteria are less clear-cut, there was little concern about this issue. Almost two-thirds of respondents indicated that there were no problems with eligibility requirements. Overall, follow-up responses indicated that the rules were perceived as relatively unambiguous and could be easily applied. Several stakeholders, however, voiced concern about the adequacy of the rules themselves. For example, prosecutors and judges in Prop. 36 courts mentioned dissatisfaction with the broad eligibility rules, contending that these rules may lead to the inclusion of defendants who are “legally eligible” but “clinically unsuitable.” Interviewees from the community court reported dissatisfaction that eligibility for the program is contingent upon the geographic location of the offense.

Most interviewees were satisfied with the quality of the services defendants receive, although many did indicate problems (Table 1, Q10). Some interviewees, particularly prosecutors and judges, said they were not in a position to evaluate treatment programs. Most stakeholders interviewed agreed that there are problems delivering social services to clients once they have been referred to treatment providers (Table 1, Q5). Several interviewees mentioned that treatment providers appear to prefer less severe cases and automatically reject referred clients with more complex clinical presentations.

Homeless Court

As noted, because homeless court does not include resource coordinators, questions put to homeless court stakeholders did not address resource coordination. Thus, the following section describes some of the views of stakeholders about features of the homeless court, but does not address the issue of resource coordination.

Most homeless court interviewees reported that the homeless court program worked well (Q20). They strongly agreed that the homeless court program is serving the interests of the defendant (Q18), the public (Q17), and the justice system (Q19). They were divided on whether the number of defendants admitted to the program should be increased (Q15). They also disagreed whether additional types of problems should be addressed (Q16). They did agree that services-oriented programs, like the homeless court program, work better to prevent recidivism than do more traditional sanctions (Q13). They did not feel that offenders are allowed to “get off with a slap on the wrist” (Q14) and they rejected the notion that the program is hampered by a perception that it does not seriously punish offenders (Q12).

Overall, stakeholders interviewed were satisfied with the social services homeless clients receive (Q10). They did not think that the effectiveness of the program was hampered by the presence of too many eligible defendants (Q11). Communication among different stakeholders involved in the homeless court program was deemed adequate as well (Q7). Homeless court stakeholders interviewed did agree that the program has significant funding problems and that funding is extremely inadequate both for coordinating services for eligible defendants (Q8) and for providing treatment (Q9).

Comparing Mental Health Court, Drug Court, and Prop. 36

Stakeholder opinion varies by program. Stakeholders in mental health court and drug court evaluated the resource coordination process more positively than did their counterparts in Prop. 36 court (Table 3, Q20). Stakeholders interviewed from the mental health court program were most likely to strongly believe that their program was serving the interests of the public (Table 3, Q17). Stakeholders in the Prop. 36 and drug court programs were not quite as strong in their endorsement. Similarly, participants from the mental health court program again felt most

strongly that the resource coordination process was serving the interests of the justice system (Q19).

Interviewees in the drug court program strongly agreed that the social service resource coordination process should be expanded to increase the number of defendants admitted to the existing program (Table 3, Q15), as did nearly all interviewees from mental health court program. By contrast, Prop. 36 stakeholders were comparatively less enthusiastic. Opinions also differed regarding whether the social service resource coordination process should be expanded to address additional *types* of problems (Table 3, Q16). Interviewees in the drug court strongly endorsed the idea of expanding the program to address additional problems. Although generally agreeing with the notion of expanding services, interviewees in the mental health court program and Prop. 36 were less likely than their drug court counterparts to endorse strong agreement. This difference in opinion may reflect the perception that Prop. 36 and the mental health court program are already broader than the drug court program in the scope of problems addressed. The mental health court program addresses a wide variety of problems, providing referrals not only to mental health treatment but also to other social services, such as housing, vocational, and medical services. Some interviewees voiced concern that Prop. 36 may be too inclusive, admitting too many defendants who are ill suited for drug-treatment despite their legal eligibility. There is also some concern that “hard core criminals” and “perpetual liars” use Prop. 36 as a “get out of jail free card,” which leads to a “waste of resources.” While Prop. 36 interviewees disagreed that the social service resource coordination process lets offenders get off with a “slap on the wrist” (Table 3, Q14), they did not reject this notion as strongly as did interviewees from the other two programs. Interviewees from the drug and mental health court program also felt more strongly than did their counterparts in the Prop. 36 program that services-based programs like the social service resource coordination process work better to prevent recidivism than do traditional sanctions (Table 3, Q13).

Drug court program stakeholders reported that monitoring defendants’ treatment adherence and progress is particularly important (Table 3, Q6). Drug and mental health court program stakeholders were more likely than Prop. 36 stakeholders to believe that that communication among the different parties involved in the resource coordination process was adequate (Table 3, Q7). Many Prop. 36 stakeholders mentioned, in particular, the ill-defined role of the probation department, which may occasionally lead to difficulties in the timely delivery of

treatment progress reports. Prop. 36 interviewees also said that treatment reports must occasionally be “chased down” from treatment providers.

Interviewees from the mental health and drug court programs were generally pleased with the quality of the services defendants receive (Table 3, Q10), in contrast to Prop 36 interviewees. Prop. 36 interviewees voiced concern that standard drug treatment programs do not help all drug-involved offenders. They reported a lack of high-quality programs for treating clients with multiple problems in addition to substance abuse. They felt that substance abuse is strongly related to other problems in a person’s life and cannot be treated in a vacuum. Prop. 36 interviewees also held the view that employees at treatment agencies may not be sufficiently trained to detect mental illness. Prop. 36 stakeholders attributed to this lack of training to communication difficulties (e.g., submission of incomplete reports or difficulty receiving reports in a timely fashion) previously mentioned. They also reported that insufficient detection of mental illness often contributed to clients “falling through the cracks” even after referral.

Prop. 36 interviewees were also more likely than their counterparts in Mental Health Court or Drug Court to report that problems existed in getting social services to clients after referral to treatment providers (Table 3, Q5). In open-ended questioning, these interviewees mentioned that treatment providers often disqualify dually diagnosed clients after referral. They reported being concerned that this often contributes to clients “falling through the cracks” even after the establishment of a treatment disposition. Because defendants themselves are responsible for scheduling and showing up for their assessment appointments at a CASC, there was also some concern that many “run” as soon as they are released from jail. Interviewees mentioned that the presence of on-site CASC resource coordinators, who conduct assessments for eligible clients in custody, significantly improves client retention.

Suggestions for Improvements

The interviewees had various suggestions for improving the resource coordination process in their individual court programs. Our analysis of these suggestions revealed three major themes: (1) increasing funding for treatment services, (2) improving awareness of program availability among stakeholders, and (3) increasing the number of resource coordinators.

First and foremost, several interviewees across different court programs emphasized the need to increase funding for treatment services. They reported that the lack of a sufficient

number of programs matching client needs significantly impedes to the process of linking defendants with appropriate social service sentences. Stakeholders interviewed perceived a lack of programs catering to clients with complex multiple problems, including persons with dual diagnoses, severe mental illness, brain injuries, physical disabilities, immigration issues, and homelessness. They attributed this paucity of programs to funding problems and suggested that more money be allocated to establish services and to expand existing programs targeting more severely disabled clients.

Second, many participants mentioned the need to improve awareness within the system concerning alternative sentencing programs. They reported that usually only the stakeholders directly involved with a program know about these programs. Persons new to the alternative sentencing process (e.g., new public defenders, prosecutors, judges), even if they have previously heard of a program, are frequently misinformed about its benefits and limits. Interviewees believed that the legal community could benefit from more education about how the process works as well as the advantages and disadvantages of alternative sentencing programs. As one judge noted, “We need better PR within the system.”

Third, stakeholders in court programs with “in-house” resource coordinators (i.e., mental health court program, certain Prop. 36 and drug courts, community court) mentioned the need to hire more resource coordinators. They noted that resource coordinators, at present, may not have sufficient time to devote to each courtroom or case. Increasing the number of resource coordinators would allow for more comprehensive evaluations and more time for follow-up and monitoring of cases. As one defense attorney noted, “Having a social worker in the courtroom is a great idea. There should be more mental health and social workers in courtrooms.”

In addition to the common themes reported above, interviewed stakeholders commented on several issues pertaining to their particular programs.

Homeless Court

- Homeless court sessions should be administered more frequently.
- The program may benefit from a “resource coordination” function that allocates services for clients.
- Clients completing the homeless court program should be tracked over time.

Mental Health Court Program

- Stakeholders from the mental health court program especially supported more resource coordinators and increased time for each resource coordinator to devote to a particular court.

Community Court

- Interviewees mentioned the need to increase the severity of punishments for clients who do not adhere to treatments.
- Interviewees raised concerns about the appropriateness of the “geographical catchment area” of an offense as a criterion for eligibility. They regarded the current geographical limits as arbitrary and prone to leaving out clients who commit offenses on “the wrong side of the street.”

Prop. 36

- Interviewees mentioned the need to increase the severity of punishments for clients who do not adhere to treatments.
- Participants from Prop. 36 courts without on-site CASC assessment specialists expressed dissatisfaction with the current procedure that requires clients who have been released from custody to travel large distances for assessment. They proposed that eligible defendants get assessed in the courthouse. Alternatively, they suggested implementing other solutions (e.g., providing transportation to CASC assessment sites) to ensure that clients actually keep their appointments.
- Interviewees stated that clients should receive a more comprehensive assessment and should subsequently be referred to appropriate treatment services addressing a wide spectrum of needs. In other words, they believed that traditional substance abuse services are insufficient for certain defendants with problems in addition to drug abuse. Interviewees believed that a mechanism should be in place to routinely link such clients with additional treatment services.
- Several stakeholders proposed narrowing the legal eligibility requirements for the program to make the program less inclusive. These interviewees mentioned the need to carefully assess defendants’ “clinical appropriateness” in addition to their legal eligibility.

Drug Court

- Stakeholders reported that they would welcome an increase in the number of slots in their drug court in order to admit more defendants to the program.

DISCUSSION

Summary and Conclusions

This study had two broad goals: (1) to describe the roles of resource coordinators who operate within Los Angeles Superior Court programs that are intended to provide a therapeutic, problem-solving approach to jurisprudence; and (2) to characterize the views of diverse stakeholders within these courts with respect to social service resource coordination. For this evaluation, the research team conducted interviews with 42 stakeholders, including judges, public defenders, prosecutors, resource coordinators, and treatment providers.

The overwhelming consensus of all classes of stakeholders interviewed was that these court programs are extremely valuable and should be expanded, although prosecutors were slightly less positive in their evaluations. Perceived strengths and weaknesses varied by stakeholder program. Proposition 36 stakeholders appear to see the need for the most improvements due to the narrow range and intensity of treatment options. With the possible exception of the mental health court program, stakeholders in all of these programs believe they could be improved by expanding the availability of treatment for defendants with mental illness.

Based on our data and the existing literature on problem-solving courts, a number of additional conclusions can be drawn. First, stakeholders believe that current procedures provide inadequate access for clients in need. As it exists in the Los Angeles Superior County, the system appears to lack a uniform screening process for detecting and channeling defendants with social service needs who may be eligible for alternative sentencing programs. Admission to a program is frequently contingent upon criteria other than true need or legal eligibility. For example, whether or not a defendant gains access to a program may depend on the location of the arrest (e.g., community court), the type of disorder (e.g., drug abuse or dependence in the case of Prop. 36 and drug court), the familiarity of the judge, prosecutor, or defense attorney with alternative sentencing models, and the advocacy of defendants' friends and family members. Consequently, one individual interviewed concludes that these programs are not currently

available, as a practical matter, to most “clinically eligible” people who are charged with crimes in Los Angeles County.

In addition to highlighting the need for expanded services, this may point toward the value of improved “screening procedures” for potentially eligible defendants. At present, little policy guidance exists with regard to who should be screened for psychological or social problems or what types of problems should qualify for diversion or alternative sentencing programs. Our interviews suggest that education about the availability of social service sentencing programs within the Los Angeles Superior Court system may be one strategy to increase defendants’ access to these programs. Currently, stakeholders may not make use of existing options for alternative sentencing various reasons including scarcity and lack of awareness of availability.

Furthermore, according to our interviewees, it appears that the narrow focus of some programs may be inconsistent with the ultimate goals of problem-solving courts. Therapeutic jurisprudence, and the court models based on this approach, tries to view criminal behavior in a social and psychological context. The relatively narrow focus of some programs may contribute to a failure to achieve its benefits. For example, instead of considering drug addiction in a larger context of maladaptive behaviors and life circumstances (e.g., mental illness, homelessness, domestic violence) – and attempting to provide solutions for these problems – certain programs focus exclusively on providing substance abuse services.

Our interviews also revealed that potential problems may exist regarding communication among certain stakeholders. For example, participants mentioned that treatment providers frequently reject clients even after they initially promise them program slots. This may indicate that miscommunication exists between resource coordinators and treatment providers with regard to the services that are offered and the types of clients that are eligible for these services. To the degree that this suggestion is accurate, treatment providers need to clearly articulate their eligibility requirements and resource coordinators should adhere to these rules when developing a disposition for their clients. This clarification may reduce the chances of clients being rejected or dropping out of the program.

The various resource coordination programs that exist within the Los Angeles Superior Court system may benefit from a centralized directory that provides stakeholders with a comprehensive, consistently updated list of social services available in the community.

Currently, a resource coordinator's repertoire of referral services depends, for the most part, on the extent to which the coordinator seeks information about services or the extent to which agencies employing resource coordinators (e.g., the Department of Mental Health) provide this information. Increased sharing of information across different types of resource coordination processes and court models may increase stakeholders' awareness of programs and help them better address their clients' psychosocial and legal needs.

Limitations and Suggestions for Future Research

Several limitations of the current study should be noted. We interviewed only current stakeholders. Former stakeholders who may have different views are not represented in our data. We did not conduct interviews with court or service provider personnel not directly involved in alternative sentencing programs. We did not gather the potentially important opinions of former stakeholders who may have decided to leave the programs or those who choose not to utilize these services. Furthermore, we are unable to offer insight on why other stakeholders may not use these services. It is also important to note that we interviewed persons who may have a vested interest in these programs, i.e., resource coordinators and treatment providers. We attempted to balance their opinions by including prosecutors and judges who might be expected to hold different views. Still, future studies should include a more representative sample of interviewees, including court personnel not directly affiliated with alternative sentencing programs. Similarly, our findings may not be generalizable beyond the small sample of participants who were interviewed. Future research should include a larger, more representative sample of stakeholders.

Although the interviewees were selected at random from the available pool of stakeholders, there are several potential sources of bias that may result in our study failing to identify problems with these courts. For example, it is possible that there are problems about which none of the stakeholders were aware (e.g., poor quality treatments or unreported noncompliance with treatment). Similarly, stakeholders may have censored their criticisms of the programs in order to portray them in a favorable light. Although our protocol ensured confidentiality to the greatest extent possible, future research should focus on increasing it still further. This strategy may increase participants' willingness to disclose controversial opinions.

The type of data we collected also places limits on the implications that can be drawn from this study. The fact that stakeholders reported an overwhelming approval of the resource coordination processes does not indicate that these programs effectively reduce recidivism. The existing empirical literature has not found large or convincing effects of problem-solving courts on recidivism (see Hoffman, 2000, for this view), so the effectiveness of these programs requires additional research. In a similar vein, additional research is needed to assess the quality of the treatments provided and the impact of coercion on treatment effectiveness. Future research is also needed to address the cost-effectiveness of these specialty courts. Although these programs would save money otherwise used for incarceration, alternative costs would be incurred. As yet, there is no general consensus concerning whether problem-solving courts are more or less costly than traditional sanctions.

Finally, additional research should focus on issues concerning the implementation or expansion of therapeutic jurisprudence throughout the Los Angeles Superior Court System. Based on interviewees' descriptions of the resource coordination processes in each of the studied programs, it appears that there is no general system of resource coordination that functions throughout the court system, and that there exist few, if any, official policies regarding the integration of treatment into the judicial process. Instead, there are many separate programs that use a very diverse set of procedures, policies, and services to address a common set of problems. This diversity is likely a product of the fact that these programs were developed independently, often championed by a single individual, rather than the result of central planning. Although this lack of coordination and consistency across programs is not unique to the Los Angeles Superior Court, this situation often puts judges and lawyers in the position of making clinical judgments about defendants and about the treatments that might be effective for them. System wide policies that offer guidance on a number of relevant clinical and social science questions may improve outcomes throughout the court. Questions of potential relevance to furthering the successful implementation of therapeutic jurisprudence include: What are the psychological or behavioral problems that are good candidates for treatment rather than traditional sanctions? What are the minimum training requirements for the individuals who do the eligibility assessments and who match the defendants with the most appropriate treatment options? Under what circumstances should the court use a diversion program to encourage treatment rather than require treatment as part of an alternative sentence? What procedures should be used throughout the Los Angeles

Superior Court to ensure that defendants who need psychological treatment are evaluated for program eligibility? And, what is an appropriate level of oversight of the treatment providers to insure high-quality treatments that meets the needs of the defendants who are court mandated to participate? Although it would be difficult to craft system-wide policies that guide the application of therapeutic jurisprudence, such policies would reduce disparities across various the specialty courts and geographic regions, would encourage utilization of the programs that are currently available, would provide treatments that are better tailored to defendants' needs, and would place the Los Angeles Superior Court at the forefront the movement to improve judicial outcomes.

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Table 1: Descriptive Statistics for Each Close-Ended Question: Entire Sample

Item	Response Option	Percent*
Q1: The process does not work for certain types of defendants	Strongly Agree	43.2
	Agree	29.7
	Disagree	21.6
	Strongly Disagree	5.4
Q2: The process provides access to services for all or almost all defendants who need social services	Strongly Agree	27.0
	Agree	32.4
	Disagree	18.9
	Strongly Disagree	21.6
Q3: There are problems with the eligibility requirements for the program	Strongly Agree	22.2
	Agree	19.4
	Disagree	33.3
	Strongly Disagree	25.0
Q4: There are problems assessing the specific needs of eligible defendants	Strongly Agree	10.5
	Agree	18.4
	Disagree	50.0
	Strongly Disagree	21.1
Q5: There are problems getting social services delivered to def. once they have been referred to treatment providers	Strongly Agree	34.2
	Agree	28.9
	Disagree	28.9
	Strongly Disagree	7.9
Q6: There are procedures in place that make it possible to monitor a defendant's treatment adherence and progress	Strongly Agree	63.2
	Agree	34.2
	Disagree	2.6
	Strongly Disagree	0
Q7: There are problems with communication among different parties involved in the process.	Strongly Agree	21.1
	Agree	10.5
	Disagree	44.7
	Strongly Disagree	23.7

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Q8: Adequate funding is available for the process of coordinating services for eligible defendants		
	Strongly Agree	10.3
	Agree	12.8
	Disagree	20.5
	Strongly Disagree	56.4
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Q9: Adequate funding for needed treatment is available		
	Strongly Agree	5.1
	Agree	10.3
	Disagree	28.2
	Strongly Disagree	56.4
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Q10: There are problems with the quality of the services that def. receive		
	Strongly Agree	17.9
	Agree	14.3
	Disagree	50.0
	Strongly Disagree	17.9
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Q11: There are too many eligible def. for the process to work effectively		
	Strongly Agree	23.7
	Agree	21.1
	Disagree	31.6
	Strongly Disagree	23.7
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Q12: The social service resource coordination process is hampered by a perception that it does not seriously punish offenders		
	Strongly Agree	17.9
	Agree	15.4
	Disagree	30.8
	Strongly Disagree	35.9
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Q13: Services-based programs like the social service resource coordination process work better to prevent recidivism than more traditional sanctions		
	Strongly Agree	64.9
	Agree	21.6
	Disagree	10.8
	Strongly Disagree	2.7
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Q14: It is fair to say that the social service resource coordination process lets offenders get off with a slap on the wrist		
	Strongly Agree	5.1
	Agree	2.6
	Disagree	23.1
	Strongly Disagree	69.2
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Q15: The social service resource coordination process should be expanded to increase the number of defendants that get admitted to the existing program		
	Strongly Agree	61.5

	Agree	20.5
	Disagree	12.8
	Strongly Disagree	5.1
Q16: The social service resource coordination process should be expanded to address additional types of problems		
	Strongly Agree	52.6
	Agree	18.4
	Disagree	18.4
	Strongly Disagree	10.5
Q17: The social service resource coordination process is serving the interests of the public		
	Strongly Agree	63.2
	Agree	28.9
	Disagree	2.6
	Strongly Disagree	5.3
Q18: The social service resource coordination process is serving the interests of the defendant		
	Strongly Agree	59.0
	Agree	35.9
	Disagree	2.6
	Strongly Disagree	2.6
Q19: The social service resource coordination process is serving the interests of the justice system		
	Strongly Agree	59.0
	Agree	33.3
	Disagree	5.1
	Strongly Disagree	2.6
Q20: Overall evaluation of the program: do you think it works poorly or well?		
	Extremely Poorly	5.4
	Poorly	2.7
	Well	35.1
	Extremely Well	56.8

Notes. *Numbers represent valid percent of total number of interviewees who provided answers to each question.

Table 2: Items Revealing the Largest Differences Across Stakeholder Groups

Item	Stakeholder Group	N	Mean	Std. Deviation
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Q2. The process provides access to services for all or almost all def. who need social services

Resource Coordinator	11	2.09	1.05
Judge/Commissioner	8	2.88	1.36
Defense Attorney	9	2.89	.93
Prosecutor	7	1.86	.69

Q15. The social service resource coordination process should be expanded to increase the number of defendants that get admitted to the existing program.

Resource Coordinator	11	1.46	.69
Judge/Commissioner	8	1.38	1.06
Defense Attorney	9	1.22	.44
Prosecutor	8	2.50	.93

Q16. The social service resource coordination process should be expanded to address additional types of problems.

Resource Coordinator	10	2.00	1.25
Judge/Commissioner	8	1.25	.71
Defense Attorney	9	1.67	1.12
Prosecutor	8	2.50	.54

Notes. Response options: 1 = strongly agree; 2 = agree; 3 = disagree; 4 = strongly disagree.

Table 3: Items Revealing Largest Differences Across Court Programs

Item	Court Program	N	Mean	Std. Deviation
Q5. There are problems getting social services delivered to def. once they have been referred to treatment providers				
	Mental Health Court	14	2.29	.83
	Prop 36	8	1.63	.74
	Drug Court	6	2.50	1.38
Q6. There are procedures in place that make it possible to monitor a defendant's treatment adherence and progress				
	Mental Health Court	15	1.60	.64
	Prop 36	8	1.38	.52
	Drug Court	6	1.00	.00
Q7. There are problems with communication among different parties involved in the process				
	Mental Health Court	15	3.13	.64
	Prop 36	7	2.14	1.22
	Drug Court	6	3.00	1.10
Q10. There are problems with the quality of the services that defendants receive				
	Mental Health Court	12	2.75	.97
	Prop 36	7	2.29	.76
	Drug Court	3	4.00	.00
Q13. Services-based programs like the social service resource coordination process work better to prevent recidivism than more traditional sanctions				
	Mental Health Court	14	1.43	.65
	Prop 36	8	2.13	1.13
	Drug Court	6	1.00	.00
Q14. It is fair to say that the social service RC process lets offenders get off with a slap on the wrist.				
	Mental Health Court	15	3.67	.49
	Prop 36	8	3.13	1.13
	Drug Court	6	4.00	.00
Q15. The social service RC process should be expanded to increase the number of def. that get admitted to the existing program.				
	Mental Health Court	15	1.47	.74
	Prop 36	8	2.00	1.20
	Drug Court	6	1.00	.00

Q16. The social service RC process should be expanded to address additional types of problems.

Mental Health Court	14	2.21	1.19
Prop 36	8	1.75	1.17
Drug Court	6	1.00	.00

Q17. The social service resource coordination process is serving the interests of the public

Mental Health Court	14	1.29	.47
Prop 36	8	2.00	1.07
Drug Court	6	1.83	1.17

Q19. The social service resource coordination process is serving the interests of the justice system

Mental Health Court	15	1.27	.46
Prop 36	8	1.88	.99
Drug Court	6	1.50	.84

Q20. Overall evaluation of the program: do you think it works poorly or well?**

Mental Health Court	14	3.64	.50
Prop 36	8	2.75	1.17
Drug Court	6	3.67	.52

Notes. Response options: 1 = strongly agree; 2 = agree; 3 = disagree; 4 = strongly disagree.

**Response options: 1 = extremely poorly; 2 = poorly; 3 = well; 4 = extremely well.

APPENDIX

INTERVIEW QUESTIONS

Thank you again for participating in this interview. The information we obtained from the Los Angeles Superior Court, Office of Organizational Development and Education, indicates that you are a _____ (*resource coordinator, public defense attorney, prosecutor, judge/commissioner, social service treatment provider*). Is this correct?

YES

NO

1. Description of Process (*questions for resource coordinators only*)

Introduction: First, I would like to find out some information about the structure and processes involved in your social service resource coordination program.

Questions:

- Describe your job in the justice system?
- What is your background?
- What are the types of psychological or social problems that are addressed by the social service resource coordinator program?
- Tell me about the screening procedure by which clients gain access to this program. *Who* decides that a certain defendant is admitted to this program?
- What is the *method* used to decide who is admitted?
- Once a defendant is admitted to the program, *who* decides what types of social services the defendant gets?
- What is the *method* used to make decisions about the types of social services the defendant gets? *If specific instrument is mentioned:* Would it be possible to fax a copy of this instrument to us? Our fax number is (310) 393-4818.
- In your opinion, does your office have up-to-date information about available social service resources in the community?
- Approximately how many cases do you handle on a daily basis?
- I would like to get a sense of the different stages or phases a defendant proceeds through once he or she is admitted to the social service resource coordinator program. Please walk me through the entire process of the social service resource coordinator program, starting with the time a defendant is admitted to the program.

Potential follow-up questions in case client does not answer these in the context of above question:

1. Who are the treatment providers?
2. How are treatment providers funded?
3. How is treatment adherence monitored?
4. What types of penalties are in place for non-adherence?

2. Evaluation/Best Practices *(questions for all stakeholders)*

Introduction. I would like to ask you some questions about your impressions of the social services resource coordination process [*for treatment providers: ...of the court that refers defendants to you.*]

Questions:

- We are interested in getting your thoughts on the strengths and weakness of the social service resource coordination process. Afterwards, I will also ask for your suggestions for improving the system. To begin, I am going to read a list of statements about the resource coordination process in your court. I would like you to rate the extent to which you agree or disagree with each of the following statements.

1. “The process does not work for certain types of defendants.” Do you agree or disagree with this statement? Strongly? → *follow-up in the end in case agree*

FU

Strongly Agree-----Agree-----Disagree-----Strongly Disagree

Follow-up: Please tell me more about why you think the process does not work for certain types of defendants. What are your thoughts on how this problem can be solved?

2. “The process provides access to services for all or almost all defendants who need mental health or other social services.” Do you agree or disagree with this statement? Strongly? → *follow-up in the end in case disagree*

FU

Strongly Agree-----Agree-----Disagree-----Strongly Disagree

Follow-up: Please tell me more about why you think the process does not provide access to services for all or almost all defendants who need mental health or other social services. What are your thoughts on how this problem can be solved?

3. “There are problems with the eligibility requirements for the program.” Do you agree or disagree with this statement? Strongly? → *follow-up in the end in case agree*

FU

Strongly Agree-----Agree-----Disagree-----Strongly Disagree

Follow-up: Please tell me more about why you think there are problems with the eligibility requirements for the program. What are your thoughts on how this problem can be solved?

4. “There are problems assessing the specific needs of eligible defendants.” Do you agree or disagree with this statement? Strongly? → *follow-up in the end in case agree*

FU

Strongly Agree-----Agree-----Disagree-----Strongly Disagree

Follow-up: Please tell me more about why you think that there are problems assessing the specific needs of eligible defendants. What are your thoughts on how this problem can be solved?

5. “There are problems getting social services delivered to defendants once they have been referred to treatment providers.” Do you agree or disagree with this statement? Strongly? → *follow-up in the end in case agree*

FU

Strongly Agree-----Agree-----Disagree-----Strongly Disagree

Follow-up: Tell me more about why you think that there are problems getting social services delivered to defendants once they have been referred to treatment providers. What are your thoughts on how this problem can be solved?

6. “There are procedures in place that make it possible to monitor a defendant’s treatment adherence and progress in the program.” Do you agree or disagree with this statement? Strongly? → *follow-up in the end in case disagree*

FU

Strongly Agree-----Agree-----Disagree-----Strongly Disagree

Follow-up: Tell me more about why you think that there are no procedures in place that make it possible to monitor a defendant’s treatment adherence and progress in the program. What are your thoughts on how this problem can be solved?

7. “There are problems with communication among different parties involved in the social service resource coordination process.” Do you agree or disagree with this statement? Strongly? → *follow-up in the end in case agree*

FU

Strongly Agree-----Agree-----Disagree-----Strongly Disagree

Follow-up: Tell me more about why you think that there are problems with communication among different parties involved in the social service resource coordination process. What are your thoughts on how this problem can be solved?

8. “Adequate funding is available for the process of coordinating services for eligible defendants.” Do you agree or disagree with this statement? Strongly?

Strongly Agree-----Agree-----Disagree-----Strongly Disagree

9. "Adequate funding for needed treatment is available." Do you agree or disagree with this statement? Strongly?

Strongly Agree-----Agree-----Disagree-----Strongly Disagree

Question #10 asked of all stakeholders except service providers:

10. "There are problems with the quality of the services that the defendants receive." Do you agree or disagree with this statement? Strongly?

Strongly Agree-----Agree-----Disagree-----Strongly Disagree

11. "There are too many eligible defendants for the process to work effectively." Do you agree or disagree with this statement? Strongly?

Strongly Agree-----Agree-----Disagree-----Strongly Disagree

12. "The social service resource coordination process is hampered by a perception that it does not seriously punish offenders." Do you agree or disagree with this statement? Strongly?

Strongly Agree-----Agree-----Disagree-----Strongly Disagree

13. "Services-based programs like the social service resource coordination process work better to prevent recidivism than more traditional sanctions." Do you agree or disagree with this statement? Strongly?

Strongly Agree-----Agree-----Disagree-----Strongly Disagree

14. "It is fair to say that the social service resource coordination process lets offenders get off with a 'slap on the wrist'?" Do you agree or disagree with this statement? Strongly?

Strongly Agree-----Agree-----Disagree-----Strongly Disagree

15. "The social service resource coordination program should be expanded to increase the number of defendants that get admitted to the existing program?" Do you agree or disagree with this statement? Strongly?

Strongly Agree-----Agree-----Disagree-----Strongly Disagree

Follow-up in case "disagree:" Do you think it should be scaled back to serve fewer defendants? Do you strongly believe that?

YES NO -- STRONGLY

16. "The social service resource coordination process should be expanded to address additional types of problems?"

Strongly Agree-----Agree-----Disagree-----Strongly Disagree

Follow-up in case "disagree:" Do you think it should be more narrowly focused? Do you strongly believe that?

YES NO -- STRONGLY

17. "The social service resource coordination process is serving the interests of the public." Do you agree or disagree with this statement? Strongly?

Strongly Agree-----Agree-----Disagree-----Strongly Disagree

18. "The social service resource coordination process is serving the interests of the defendant." Do you agree or disagree with this statement? Strongly?

Strongly Agree-----Agree-----Disagree-----Strongly Disagree

19. "The social service resource coordination process is serving the interests of the justice system." Do you agree or disagree with this statement? Strongly?

Strongly Agree-----Agree-----Disagree-----Strongly Disagree

Follow-up questions for items 1-7 for responses that reflect existence of a potential problem:

- Please tell me more about why you think ...*[insert problem from above]*
- What are your thoughts on how this problem can be solved?

Final Questions

- ☐ In general, do you have any suggestions for improving the social service resource coordinator program that you have not mentioned before? **NO YES**

In case "yes:" Tell me about them.

- What is your overall evaluation of the program? Do you think it works poorly or well? Extremely (poorly/well)?

Extremely Poorly-----Poorly-----Well-----Extremely Well

- Are there any reasons why you think it works well/poorly that I have not touched upon in my previous questions? **NO YES**

In case "yes:" Tell me about them.