**PROSPECTIVE DRUG COURT TREATMENT PROVIDERS**

**PROGRAM QUESTIONNAIRE**

The Baltimore City Circuit Court Drug Treatment Court (DTC) works with various treatment agencies throughout the city and surrounding counties to provide the best treatment for its participants. To that end, DTC vets all interested treatment providers carefully to ensure that providers that service the program are appropriately licensed, provide high quality, evidence-based treatment, and meet the strict requirements of our program.

Any interested treatment provider must provide responses to the questions listed below to be considered as an approved treatment provider. Completed responses should be emailed to the DTC Program Coordinator, Kara Martinez, at kara.martinez@mdcourts.gov. Upon receipt of the responses, the DTC team will meet to review those responses and make a determination as to suitability for our program.

**TREATMENT PROVIDER NAME:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TREATMENT PHILOSOPHY**

1. What is the program’s philosophy of treatment?

2. How is this philosophy “operationalized” on a daily basis?

3. Does the program serve a designated target population?

4. Does the program use harm reduction techniques? If so, please describe.

**LEVEL OF CARE**

1. What levels of care are you licensed to provide by the state? Is your program certified by any other organizations?

2. What criteria are used to determine the appropriate levels of care?

3. Are there plans to provide other levels of care in the future?

**PROGRAM DESIGN AND TREATMENT INTERVENTIONS**

1. What are the key elements of the program’s design?

2. Does the design utilize evidence-based treatments? If so, please describe.

3. How does the program address cultural-specific needs of the client population?

4. Does the program use a strength-based model? Please explain.

5. Are clinical assessments conducted by licensed and certified professionals? If so, what are the licensure and certifications of the professionals conducting the assessments?

6. How frequently are clients reassessed?

7. Are clients screened and assessed for both mental health and substance use disorders? Are standardized instruments used to screen and assess for each type of disorder? If so, what instruments are used?

8. What new interventions or services have been added in the past 2 years to enhance the program’s design?

 9. Which community partnerships have been established by the program, and how have these been maintained over time?

10. Does the program use manualized treatment curricula? If so, which curricula are used?

11. What experience does the program have in providing services to justice-involved populations?

**PROGRAM OPERATIONS**

1. Does the program offer onsite drug testing? What types of drug testing are conducted (UAs, oral swabs, etc.) and how are results confirmed? Is there a drug-testing lab on site? How quickly are drug test results available?

2. Does the program have a MAT prescribing physician/nurse practitioner on staff? If so, what specialized training or certification has been received?

3. Does the program have established relationships with MAT prescribing physicians in the community?

4. What communication protocols are in place with MAT prescribing physicians or other medical staff (both onsite and offsite) to ensure that there is adequate communication regarding clients’ MAT compliance and progress?

5. What are the program’s after-hours and emergency service protocols?

6. Please provide a copy of the program’s organizational chart that clearly describes key administrative and operational components.

7. Does the program offer or assist with transportation services?

8. Please provide the addresses of all your residential and outpatient locations.

**STAFF CHARACTERISTICS AND QUALIFICATIONS**

1. Does the diversity of the treatment team appropriately reflect the diversity of the community?

2. Is the program team able to appropriately engage with the clients in a culturally competent manner?

3. To what extent does the treatment team include multidisciplinary staff? Do these staff have experience in working with court referrals and with drug-involved offenders?

4. Is the program’s treatment team licensed and credentialed as per state requirements?

5. What type of staff training has been provided that aligns with the needs of the program’s target population?

**INSURANCE AND MEDICAID**

1. Are processes in place to assist the uninsured in accessing insurance coverage, through either Medicaid or the federal/state insurance exchanges?

2. Does the provider have a system for determining whether an individual has insurance or is eligible for Medicaid?

3. Is the treatment provider eligible to receive payment from Medicaid? If so, does the provider accept Medicaid?

4. Does the program assess individuals in a manner to ensure medical necessity in conformance with Medicaid protocols?

**QUALITY ASSURANCE MECHANISM**

1. What are the federal, state, and local requirements for treatment service delivery in your catchment area (e.g., accreditation, fire, safety, zoning, Medicaid/Medicare eligibility and billing requirements, confidentiality regulations (42 CFR), ADA specifications)?

2. Does the program maintain a written set of formal policies, procedures, and/or standard operations guidelines?

3. Is the program subject to periodic onsite reviews by the state regulatory authority, accreditation agency, or other monitoring organization?

4. How does the program monitor the implementation of treatment components?

5. Is clinical supervision available on site? If so, who provides this supervision?

**PROGRAM EVALUATION**

1. What program evaluations are required by local, state, and federal agencies? How frequently are evaluations required?

2. Has program evaluation been conducted to date? If so, what type of evaluation was conducted and what were the results?

3. What performance measures does the program compile and monitor? How are these measures used by program administrators?

**COMPETENCIES THE PROVIDER MUST HAVE OR MUST BE WILLING TO DEVELOP**

1. Is the program willing to provide court-ordered treatment services to justice-involved clients?

2. Will the program provide treatment of varying duration? If so, please describe.

3. Are services time driven or based on clinical and medical need?

4. Is the program willing to communicate treatment progress with probation and parole officers and with the drug court team?

5. How does the program provide modifications to its treatment interventions and modalities?

6. How does the program address client motivation? Does the program utilize motivational enhancement theories?

7. Is the program willing to be an active member of the court team (e.g., participate in staffing and hearings)?