# Criminal Court of the City of New York

Drug Court Initiative Annual Report 2015



### **NEW YORK CITY**

### **Courthouse Locations**

**Bronx Criminal Court** 215 E.161st Street, Bronx, NY 10451 - Drug Court 265 E.161st Street, Bronx, NY 10451 **Queens Criminal Court** 125-01 Queens Blvd., Kew Gardens, NY 11415 - Drug Court **Queens Summons** 120-55 Queens Blvd., Kew Gardens, NY 11415 **Midtown Community Court** 314 W. 54th Street, New York, NY 10019 BRONX - Drug Court **Citywide Summons** 346 Broadway, New York, NY 10013 **NEW YORK** ÎÎ Manhattan Criminal Court 100 Centre Street, New York, NY 10013 - Drug Court **Brooklyn Criminal Court** QUEENS 120 Schermerhorn Street, Brooklyn, NY 11201 <u>ش</u> - Drug Court 00 Red Hook Community Justice Center **KINGS** 88-94 Visitation Place, Brooklyn, NY 11231 - Drug Court Staten Island Criminal Court RICHMOND 26 Central Ave., Staten Island, NY 10301 - Drug Court Brooklyn Bronx Manhattan

**Queens Summons** 

Staten Island

Red Hook

Midtown

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Queens

**Citywide Summons** 

### CRIMINAL COURT OF THE CITY OF NEW YORK DRUG COURT INITIATIVE 2015 ANNUAL REPORT Published July 2016

Hon. Melissa C. Jackson, Administrative Judge Hon. Alexander Jeong, Deputy Administrative Judge Justin Barry, Chief Clerk Lisa Lindsay, Problem Solving Courts Coordinator

PAGE

Editor: Lisa Lindsay and Justin Barry Photographers: Darren Edwards and Shama Greenidge Writer: Darren Edwards Contributor: Tara Begley

Cover Photo: 120 Schermerhorn's lobby ceiling

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<section-header>

Hon. Craig S. Walker shakes the hands of veteran mentors at the opening ceremony of the first Veterans Court in Brooklyn.

# 60,562

The total number of drug court referrals citywide between 1998 and 2015. Includes MBTC, MMTC, MBVTC, MTC, QMTC, SITC, STEP, MDC-N, MDC-73 and MDC-92.

### **Executive Summary**

This report profiles the judges, staff and participants of the New York City Criminal Court Drug Court Initiative. Implemented in 1998 with the opening of the Manhattan Treatment Court, the Drug Court Initiative was developed to make treatment available to non-violent, substance-abusing offenders as an alternative to incarceration with the goal of reducing criminal behavior and improving public safety. Since then, the Drug Court Initiative has expanded to include courts in all five counties of the City of New York. In order to make these programs accessible to all eligible offenders, Criminal Court implemented a Comprehensive Screening Program to evaluate every person charged with a criminal offense to determine appropriateness for court-monitored substance abuse treatment.

Each court was developed with input from local prosecutors, the defense bar, treatment providers, probation and parole officials and court personnel and all operate under a deferred sentencing model with participants pleading guilty to criminal charges prior to acceptance into the program. Successful completion of the program results in a non-jail disposition which typically involves a withdrawal of the guilty plea and dismissal of the charges. Failure to complete the program brings a jail or prison sentence. All of the drug courts recognize the disease concept of addiction and utilize a schedule of interim sanctions and rewards, bringing swift and sure judicial recognition of infractions and treatment milestones. Judges, lawyers and clinical staff recognize that relapse and missteps are often part of the recovery process, but participants are taught that violations of court and societal rules will have immediate, negative consequences.

This successful drug court model, together with our excellent judges, clinical and court staff, are responsible for Drug Court Initiative's retention and graduation rates.

#### Some 2015 Drug Court Initiative milestones:

- \*\*\*\*3,962 defendants were referred to drug courts for evaluation;
- #\*708 defendants agreed to participate and pled guilty; and
- <sup>†++</sup>405 participants graduated from drug court.

### Introduction

For close to two decades, the New York City Criminal Court Drug Court Initiative has provided a highly effective alternative to incarceration for those suffering from serious drug and alcohol addiction. Studies have shown that drug court reduces crime, saves taxpayers money, combats addiction and restores families.

Inspired by that mission, the Criminal Court officially opened its first misdemeanor veterans treatment court on November 18, 2015 in Brooklyn Criminal Court. The Brooklyn Misdemeanor Veterans Treatment Court (BMVTC) was established to acknowledge, honor and support veterans in the criminal justice system by ensuring comprehensive treatment and individualized services, thereby allowing the veterans to live healthy and productive lives within the community. Every eligible veteran is assigned a court case manager who will develop a proposed treatment plan and a veteran mentor who will provide additional support. Judge Craig Walker, a thirteen year Navy veteran, is the presiding judge. So, "Ooh Rah", "Hooah", and "Hooyah" to providing much needed services to those who have served our country.

Many individuals and organizations continue to play a role in the success outlined in these pages. Criminal Court wishes to acknowledge the Deputy Chief Administrative Judge for New York City Courts Fern Fisher and Administrative Judge for New York City Criminal Court Melissa Jackson for their unwavering support provided to the City's drug courts. Their support has been integral in ensuring the success and validation of the drug courts.

Criminal Court would also like to thank Supervising Judges William McGuire (Bronx), Michael Yavinsky (Kings), Tamiko Amaker (New York), Deborah Stevens Modica (Queens) and Alan Meyer (Richmond), who work hand-inhand with central administration to make these programs successful.

Director of the Unified Court System Office of Policy and Planning Hon. Sherry Klein Heitler and her staff, especially Kerry Ward, Valerie Raine and Sky Davis have been invaluable in their support, both technical and administrative, as have Frank Wood, Amelia Hershberger, Elizabeth Daich and Robyn Cohen from the Unified Court System Division of Grants and Program Development.

Criminal Court would like to acknowledge the interagency commitment it takes to ensure the overall execution and success of the many projects and programs under the Drug Court Initiative. The District Attorneys' offices of the five boroughs, the Office of the Special Narcotics Prosecutor, the Legal Aid Society and other defender associations throughout the City deserve special mention for the support they have (Cont'd on the next page)

<sup>\*</sup>Depending on the court, not everyone who is referred is entered into the UTA.

 <sup>&</sup>lt;sup>†</sup> Statistical results originate from data inputted in UTA between 1/1/15 and 12/31/15.
 <sup>‡</sup> Includes MBTC, MMTC, MBVTC, MTC, QMTC, SITC, STEP, MDC-N,

MDC-73 and MDC-92.

<sup>\*</sup>These data include MBVTC and excludes BTC, BXTC and QTC.

### **Summary Information - All Courts**

### **Eligibility Criteria**

Eligibility criteria are determined by the specific target populations decided by the steering committees during the planning phase of each drug court.

See the table below for specific eligibility criteria in each court:

DRUG COURT ACRONYMS

BMVTC - Brooklyn Misdemeanor Veterans Treatment Court
BTC - Brooklyn Treatment Court
BXTC - Bronx Treatment Court
BXMTC - Bronx Misdemeanor Treatment Court
MBTC - Misdemeanor Brooklyn Treatment Court
MDC-N - Manhattan Diversion Court, Part N
MDC-73 - Manhattan Diversion Court, Part 73
MDC-92 - Manhattan Diversion Court, Part 92
MMTC - Manhattan Misdemeanor Treatment Court
MTC - Manhattan Treatment Court
QMTC - Queens Misdemeanor Treatment Court
OTC - Oueens Treatment Court
SITC - Staten Island Treatment Court

STEP - Screening & Treatment Enhancement Part (Brooklyn)

	MBTC	MMTC	мтс	QMTC	SITC	STEP	MDC-N	MDC-73	MDC-92	BMVTC	
Target Population	Persistent Misde- meanor Offenders	Persistent Misde- meanor Offenders	Non-violent First Felony Offenders & Probation Violators	Persistent Misde- meanor Offenders	Non-violent First Felony Offenders & Persis- tent Misdemean- or Offend- ers	Non-violent First Felony Offenders, Adolescents	Non-violent First Felony Offenders & Probation Violators	Non-violent First Felony Offenders & Probation Violators	Non-violent First Felony Offenders & Probation Violators	Misde- meanor Offenders Must be Veterans	
	Specific Criteria										
Drug Sale - Felony	Ν	Ν	Y	Ν	Y	Y	Y	Y	Y	Ν	
Drug Possession - Felony	Ν	Ν	Y	Ν	Y	Y	Y	Y	Y	Ν	
Drug Possession - Misdemeanor	Y	Y	Ν	Y	Y	Y*	Ν	Ν	Ν	Y	
DWI	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Y	
Non-Drug Charge - Felony	Ν	Ν	Ν	Ν	Y	Y	Ν	Ν	Ν	Ν	
Non-Drug Charge - Misde- meanor	Y	Y	Ν	Y	Y	Y*	Ν	Ν	Ν	Y	
Violations of Probation	Y	Y	Y	Y	Ν	Y	Y	Y	Y	Y	
Prior Felonies	Y	Y	Ν	Y	Y **	N†	N	Ν	N	Y	
Ages	16+	16+	16+	16+	16+	16+	16+	16+	16+	16+	
Veterans	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	

\* Where the prosecutor has agreed to reduce the charges, STEP will accept pleas on some misdemeanor cases.

\* \*Misdemeanor cases only

† Defendant allowed to participate upon plea of guilty to misdemeanor offense may have prior felony convictions.

# 10,722

## The total number of drug court pleas citywide between 1998 and 2015.

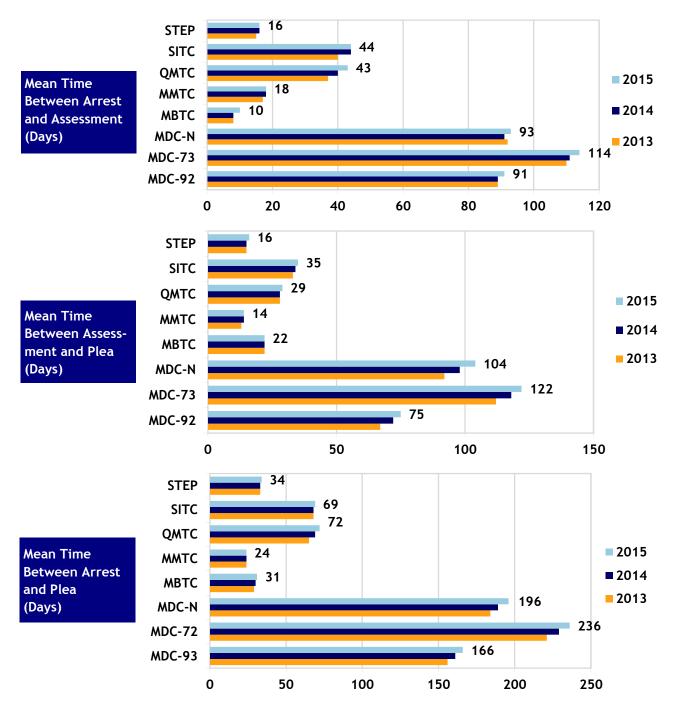
Includes MBTC, MMTC, MTC, MBVTC, QMTC, SITC, STEP, MDC-N, MDC-73 and MDC-92.

(Cont'd from previous page) shown these innovative programs. They all have worked alongside the Courts to implement the provisions of the Judicial Diversion Law. Lastly, without our partners in the treatment community, drug courts would not be able to exist.

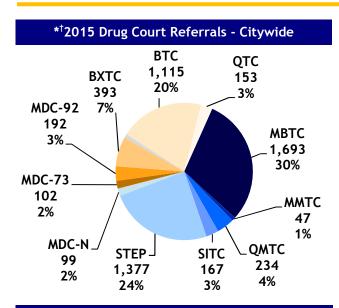
### **Summary Information - All Courts**

### **Types of Arraignment Charges**

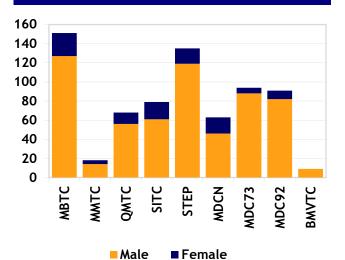
For purpose of analysis, the arraignment charges of defendants entering into our drug courts are divided into felony/misdemeanor and drug/non-drug designations. In 2015, about fifty-eight percent (58%) of drug court participants were arraigned on felony charges - and of those, thirty-six percent (36%) were arraigned on drug charges. Thirty-five percent (35%) of participants were arraigned on misdemeanor charges - and of those, twenty-one percent (21%) were arraigned on drug charges. Two percent (2%) of the participants were arraigned on a drug violation charge and five percent (5%) of the data was unknown.

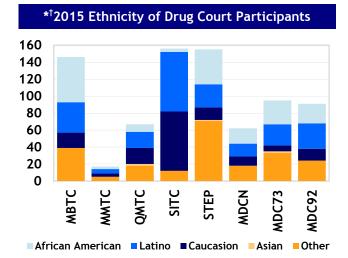


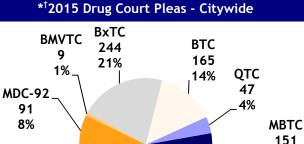
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\*<sup>†</sup>2015 Gender of Drug Court Participants





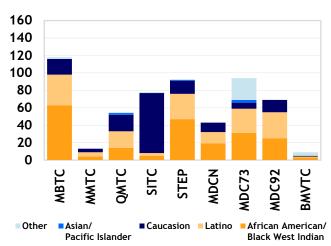


(iat

151 13% MDC-73 94 MMTC 8% 18 MDC-N. 1% QMTC 63 STEP SITC 68 5% 135 79 6% 12%

\*<sup>†</sup>2015 Age of Drug Court Participants

7%



160 140 120 100 80 60 40 20 0 MDC92 SITC MDCN MDC73 MBTC MMTC QMTC STEP

■ Marijuana ■ Heroin ■ Crack ■ Cocaine ■ Alcohol ■ Other

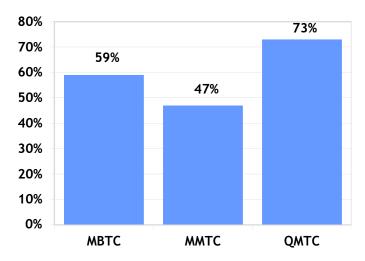
\*<sup>†</sup>2015 Drug of Choice of Drug Court Participants

\*Figures specify the number of participants while percentages illustrate participants' proportions in relation to the whole. <sup>†</sup>STEP, DTAP and Mental Health pleas are not being reflected entirely.

7 WWW.NYCOURTS.GOV/NYCDRUGCOURT

### **Retention Rates - All Courts**

Nationally, retention rates are used to indicate the percentage of participants with positive outcomes within the treatment process. Retention rates are a critical measure of program success; a one year retention rate indicates the percentage of participants who, exactly one year after entering drug court, had either graduated or remained active in the program. The average retention rate for felony courts in the Drug Treatment Court Initiative is **77%**. Misdemeanor courts were not included in the analysis of one year retention rates since the length of treatment is shorter (between 6-8 months). The average retention rate for Misdemeanor courts in the Drug Treatment Court Initiative is **60%**.



#### 2015 Felony Drug Court Retention Rates (1 Year) 100% 83% 83% 76% 73% 80% 68% 60% 40% 20% % SITC STEP MDC-N **MDC-73 MDC-92**

#### **Comprehensive Screening**

Screening is a three-step process. Step 1 is a paper screening at arraignments where court clerks identify all defendants charged with a designated offense and requisite criminal history. The Arraignment Part adjourns all "paper eligible" cases to a treatment court. Eligible cases are adjourned for a short date in the treatment court. Step 2 includes a review by the District Attorney for preliminary consent to treatment alternative. Step 3 involves an assessment by court clinical staff and, in some instances, a urine toxicology screen test.

COURT REFERRAL SOURCE						
ммтс	Arraignment Clerks					
мтс	Arraignment Clerks, Office of Special Narcotics					
мвтс	Arraignment Clerks					
QMTC	Arraignment Clerks					
STEP	Arraignment Clerks					
SITC	District Attorney					
MDC-PART N	Arraignment Clerks					
MDC-Part 73	Arraignment Clerks					
MDC-Part 92	Arraignment Clerks					
вмутс	Arraignment Clerks					

#### 2015 Misdemeanor Drug Court Retention Rates (7 Months)

## Brooklyn Misdemeanor Veterans Treatment Court

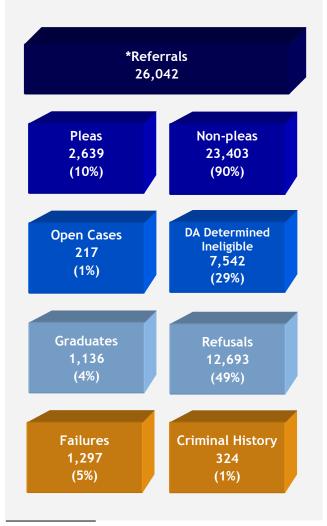


### Misdemeanor Brooklyn Treatment Court

### **Program Description**

#### <u>Staff</u>

Presiding Judge	Hon. Sharen Hudson
Project Director II	Mia Santiago
Resource Coord. III	Michael Torres
Case Manager II	Robert Rivera
Case Manager I	Theresa Good
	Shama Greenidge
	Melinda Pavia
	Lisa Tighe
	Miriam Famania
Probation Officer	Leigh Ann Freeman
DOE Liaison	Kristen Murphy
Case Technician	Lyndon Harding



\*Data from inception to 12/31/2015.

\*\*Referral data excludes BTC, BXTC, BXMTC and QTC.

In January 2003, the Misdemeanor Brooklyn Treatment Court (MBTC) opened in the Kings County Criminal Court to provide an alternative to incarceration for drugaddicted misdemeanor offenders. The target population of the MBTC program is misdemeanor offenders with long histories of recidivism. MBTC functions as a collaborative effort between the Court, the Kings County District Attorney's office, defense bar and the treatment community.

Arraignment charges differ for MBTC participants, with about **54%** charged with a misdemeanor drug offense and **45%** charged with misdemeanor non-drug offenses, while **1%** was arraigned on a felony non-drug offense.

Since its inception in 2003, 26,042 defendants have been referred to MBTC for clinical assessment, of which 2,639 (10%) have taken a plea and opted for treatment. Of the 23,403 who did not take the plea, 12,693 (54%) refused to participate. Of those who were accepted by MBTC and agreed to participate, 1,136 (43%) graduated which the average length of treatment (based on graduation date) was twelve months, and 1,297 (49%) failed to complete treatment. Of the 1,297 that failed, 59% of the failures were involuntary, 40% of failures were voluntary and 1% were deemed inactive.

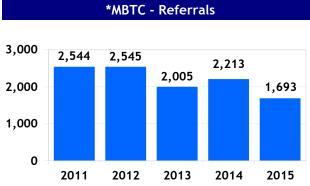
The following information is available for the **1,136** MBTC graduates: **7%** of graduates were either full or part -time employed; **21%** were receiving governmental assistance; **22%** were receiving Medicaid; **9%** of the graduates were either in school, full or part-time; and, **7%** of graduates received vocational training.

\*\*In calendar year 2015, MBTC made up **43%** of all referrals for clinical assessment, and **21%** of all pleas taken, in the Drug Treatment Court Initiative.

In addition, **1,693** defendants were referred to MBTC for clinical assessment, of which **151** (**9%**) took a plea and opted for treatment. Of the **151** who agreed to participate, **84%** were males, **40%** were African-Americans, **37%** were within the **46-55** age group, and **Heroin** was the primary drug of choice.

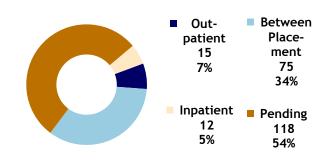
Sixty-eight (68) participants graduated and 85 failed in 2015. Of the 85 that failed, 56% of the failures were involuntary and 44% of failures were voluntary.

On average the MBTC daily caseload for 2015 was **217** cases. Each case manager typically monitored approximately **30-35** cases.



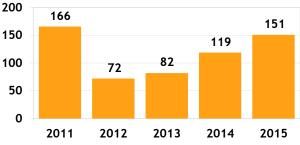
\*MBTC - Participants' Drug of Choice Alcohol Cocaine 6 6 4% 4% Other Drugs Crack-48 cocaine 32% 33 22% Marijuana Heroin 12 46 8% 30%

#### \*<sup>†</sup>MBTC - Treatment Modalities of Participants

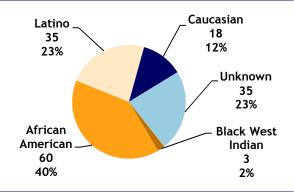




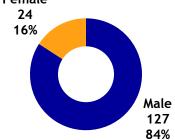
\*MBTC - Pleas

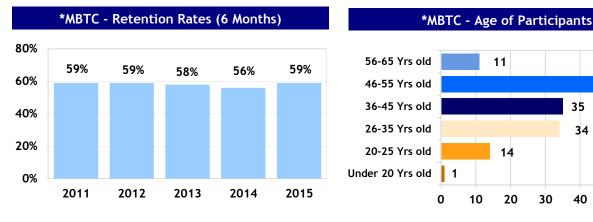


#### \*MBTC - Race/Ethnicity of Participants



\*MBTC - Gender of Participants Female





<sup>\*</sup>Figures specify the number of participants while percentages illustrate participants' proportions in relation to the whole. <sup>†</sup>Treatment Modalities data will not total 2015 pleas, but are snapshots on or near 12/31/15 UTA data entry.

56

60

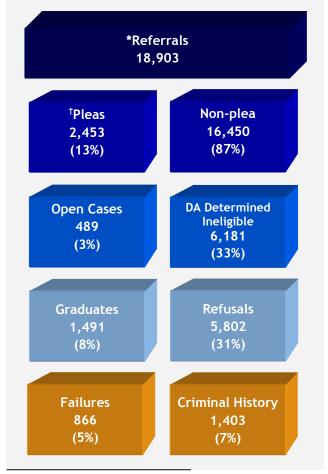
50

### Screening & Treatment Enhancement Part

### **Program Description**

### <u>Staff</u>

Presiding Judge	Hon. Frederick Arriaga
Project Director II	Mia Santiago
Resource Coord. III	Michael Torres
Case Manager II	Robert Rivera
Case Manager I	Theresa Good
	Shama Greenidge
	Melinda Pavia
	Lisa Tighe
	Miriam Famania
Probation Officer	Lee Ann Freeman
DOE Liaison	Kristen Murphy
Case Technician	Lyndon Harding



\*Data from inception to 12/31/2015.

\*\*Referral data excludes BTC, BXTC, BXMTC and QTC.

<sup>†</sup>STEP, DTAP and Mental Health pleas are not being reflected entirely.

In January 2003, the Screening & Treatment Enhancement Part (STEP) opened in the Kings County.

Arraignment charges differ for STEP participants, with 23% charged with a felony drug offense and 57% charged with felony non-drug offenses. There are a handful of misdemeanor (both drug and non-drug) cases that have also been handled by STEP, which amount to approximately 20%.

Since its inception in 2003, **18,903** defendants have been referred to STEP for clinical assessment, of which **2,453** (**13**%) have taken a plea and opted for treatment. Of the **16,450** who did not take the plea, **5,802** (**35**%) refused to participate. Of those who were accepted by STEP and agreed to participate, **1,491** (**61**%) graduated of which the average length of treatment (based on graduation date) was twelve months, and **866** (**35**%) failed to complete treatment. Of the **866** that failed, **78**% of the failures were involuntary, **12**% of failures were voluntary and **9**% were deemed inactive.

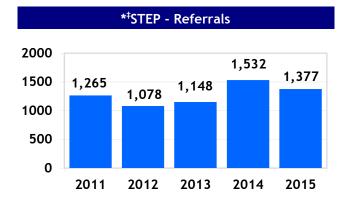
The following information is available for the **1,491** STEP graduates: **18%** of graduates were either full or part-time employed; **19%** were receiving governmental assistance; **46%** were receiving Medicaid; **23%** of the graduates were either in school, full or part-time; and, **18%** of graduates received vocational training.

\*\*In calendar year 2015, STEP made up **35%** of all referrals for clinical assessment, and **19%** of all pleas taken in the Drug Treatment Court Initiative.

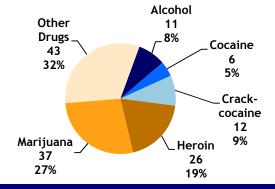
In addition, **1,377** defendants were referred to STEP for clinical assessment, of which **135** (**10%**) took a plea and opted for treatment. Of the **135** who agreed to participate, **88%** were males, **32%** were African-Americans, **28%** were within the **20-25** age group, and **Marijuana** was the primary drug of choice.

Sixty-six (66) participants graduated and 47 failed in 2015. Of the 47 that failed, 94% of the failures were involuntary and 6% of failures were voluntary.

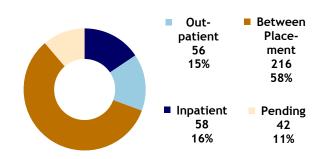
On average the STEP daily caseload for 2015 was **489** cases. Each case manager typically monitored approximately **85-95** cases.

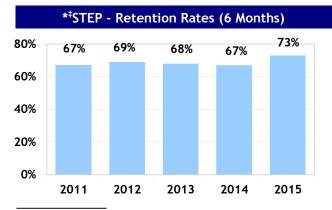


\*<sup>‡</sup>STEP - Participants' Drug of Choice

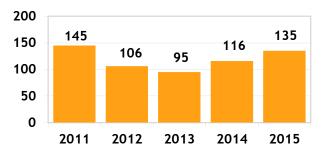


### \*<sup>††</sup>STEP - Treatment Modalities of Participants





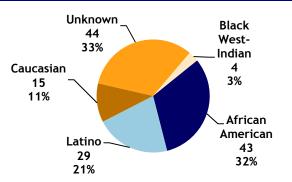




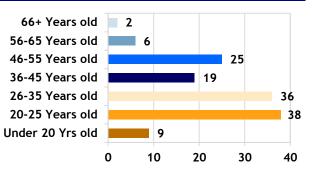
\*<sup>‡</sup>STEP - Gender of Participants



#### \*<sup>‡</sup>STEP - Race/Ethnicity of Participants



### \*\*STEP - Age of Participants



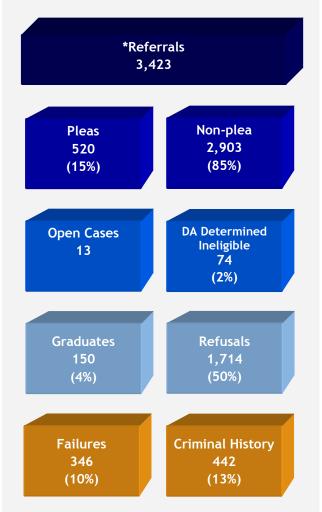
\*Figures specify the number of participants while percentages illustrate participants' proportions in relation to the whole. <sup>†</sup>Treatment Modalities data will not total 2015 pleas, but are snapshots on or near 12/31/15 UTA data entry. <sup>‡</sup>STEP, DTAP and Mental Health pleas are not being reflected entirely.

### Manhattan Misdemeanor Treatment Court

### **Program Description**

#### <u>Staff</u>

• • • • • •	
Presiding Judge	Hon. Richard Weinberg
Project Director II	Debra Hall-Martin
Resource Coord. III	Sherry Haynes
Case Manager II	Alisha Corridon
Case Manager II	Desiree Rivera
Case Manager II	General Wright
Case Manager I	Darlene Buffalo
	Richard Cruz
	Darryl Kittel
	Darlene Smith
Case Manager I (Sup. Ct.)	Maribel Ledesma
Case Technician	Monique Emerson



\*Data from inception to 12/31/2015.

\*\*Referral data excludes BTC, BXTC, BXMTC and QTC.

The Manhattan Misdemeanor Treatment Court (MMTC) was restructured in May of 2003 to provide meaningful, long term substance abuse treatment for drugabusing misdemeanor offenders prosecuted in New York County Criminal Court.

MMTC participants can be charged with either a misdemeanor drug or non-drug offense. The data collected thus far suggest that **50%** have pled to a non-drug misdemeanor with **39%** pleading to a misdemeanor drug offense, while **6%** pled to a felony non-drug offense.

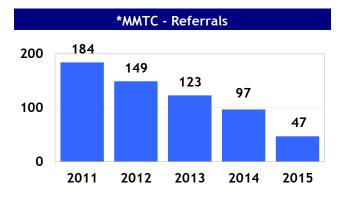
Since restructuring in 2003, **3,423** defendants have been referred to MMTC for clinical assessment, of which **520** (**15%**) have taken a plea and opted for treatment. Of the **2,903** who did not take the plea, **1,714** (**59%**) refused to participate. Of those who were accepted by MMTC and agreed to participate, **150** (**29%**) graduated of which the average length of treatment (based on graduation date) was six months, and **346** (**67%**) failed to complete treatment. Of the **346** that failed, **64%** of the failures were involuntary, **33%** of failures were voluntary and **3%** were deemed inactive.

The following information is available for the **150** MMTC graduates: **13%** of graduates were either full or part-time employed; **22%** were receiving governmental assistance; **29%** were receiving Medicaid; **7%** of the graduates were either in school, full or part-time; and, **10%** of graduates received vocational training.

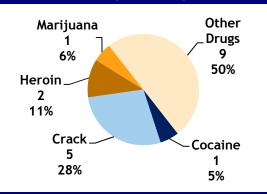
\*\*In calendar year 2015, MMTC made up 1% of all referrals for clinical assessment, and about 3% of all pleas taken, in the Drug Treatment Court Initiative.

In addition, **47** defendants were referred to MMTC for clinical assessment, of which **18** (**38**%) took a plea and opted for treatment. Of the **18** who agreed to participate, **78**% were males, **28**% were Latino, **28**% were within both the **26-35** and **46-55** age group, and **Crack-cocaine** was the primary drug of choice.

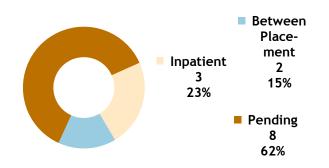
Two (2) participants graduated and 14 failed in 2015. Of the 14 that failed, 86% of the failures were involuntary and 14% of the failures were deemed voluntary.



\*MMTC - Participants' Drug of Choice



\*<sup>†</sup>MMTC - Treatment Modalities of Participants



\*MMTC - Retention Rates (6 Months)

46%

2014

47%

2013

50%

40%

30%

20%

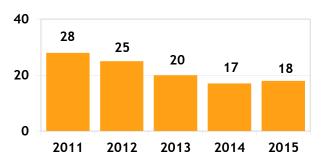
10%

0%

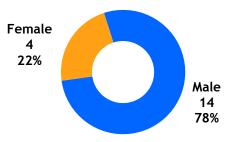
46%

2012

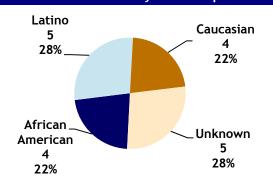




\*MMTC - Gender of Participants



\*MMTC - Race/Ethnicity of Participants



\*MMTC - Age of Participants



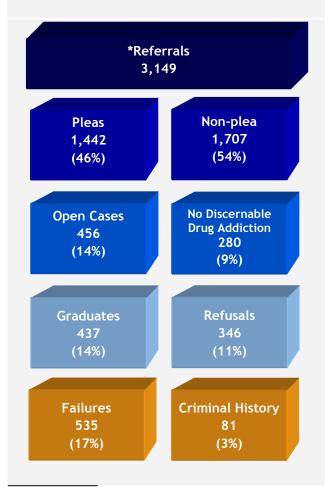
\*Figures specify the number of participants while percentages illustrate participants' proportions in relation to the whole. <sup>†</sup>Treatment Modalities data will not total 2015 pleas, but are snapshots on or near 12/31/15 UTA data entry.

### **Manhattan Diversion Courts**

### **Program Description**

### <u>Staff</u>

Presiding Judge (MDC-N)	Hon. Richard Weinberg
Presiding Judge (MDC-73)	Hon. Eduardo Padro
Presiding Judge (MDC-92)	Hon. Patricia Nunez
Project Director II	Debra Hall-Martin
Resource Coord. III	Sherry Haynes
Case Manager II	Alisha Corridon
Case Manager II	Desiree Rivera
Case Manager II	General Wright
Case Manager I	Darlene Buffalo
	Richard Cruz
	Darryl Kittel
	Darlene Smith
Case Manager I (Sup. Ct.)	Maribel Ledesma
Case Technician	Monique Emerson



\*Data from inception to 12/31/2015.

\*\*Referral data excludes BTC, BXTC, BXMTC and QTC.

In October 2009, the Manhattan Diversion Courts (MDC-N, MDC-73 and MDC-92) opened in the Manhattan County Criminal Court to provide an alternative to incarceration for drug-addicted felony offenders. The intended target population of the MDC program is felony offenders with long histories of recidivism. MDC functions as a collaborative effort between Manhattan Criminal and Supreme Court, the New York County District Attorney's Office, the Office of the Special Narcotics Prosecutor (OSN), the defense bar and community-based treatment providers.

MDC participants can be charged with either a felony drug or non-drug offense. The data collected thus far suggests that **79%** were charged with a felony drug charge, while **21%** were charged with non-drug charges. There are a handful of misdemeanor drug and non-drug offense.

Since restructuring in 2009, collectively, **3,149** defendants have been referred to MDC for clinical assessment, of which **1,442** (46%) have taken a plea and opted for treatment. Of the **1,707** who did not take the plea, **346** (20%) refused to participate. Of those who were accepted by MDC and agreed to participate, **437** (30%) graduated of which the average length of treatment (based on graduation date) was sixteen to eighteen months, and **535** (37%) failed to complete treatment. Of the **535** that failed, **82%** of the failures were involuntary and **18%** of failures were voluntary.

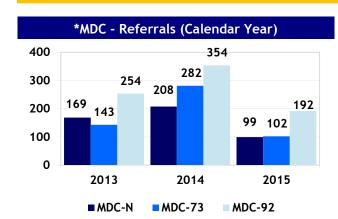
#### See page 23 for more information about MDC graduates.

\*\*In calendar year 2015, MDC made up **10%** of all referrals for clinical assessment, and **35%** of all pleas taken, in the Drug Treatment Court Initiative.

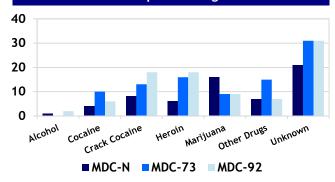
In addition, **393** defendants were referred to MDC for clinical assessment, of which **248** (63%) took a plea and opted for treatment. Of the **248** who agreed to participate, over **87%** were males, **29%** were Latinos, **28%** were within the **26-35** age group, and **Heroin** was primary drug of choice.

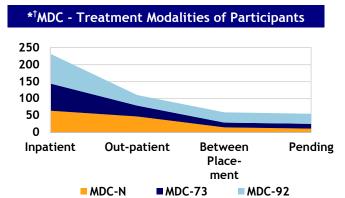
**One hundred and twenty-one (121)** MDC participants graduated and **105** failed in 2015. Of the **105** that failed, **92%** of the failures were involuntary and **8%** of the failures were voluntary.

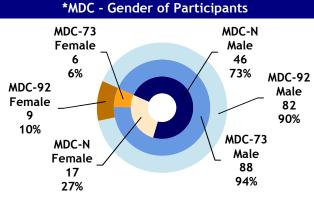
On average the MDC daily caseload for 2015 was **456** cases. Each case manager typically monitored approximately **60-70** cases.



\*MDC - Participant's Drug of Choice







\*MDC - Pleas (Calendar Year)

63

77 76

2014

MDC-73

79

100

80

60

40

20 0 58

45

2013

MDC-N

94

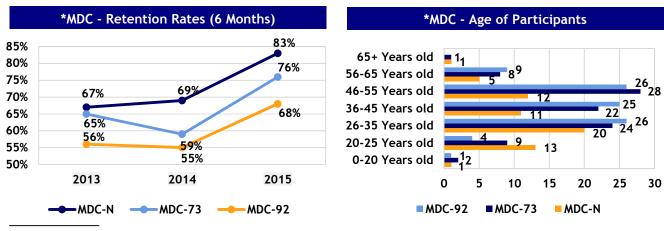
2015

63

MDC-92

91

\*MDC - Race/Ethnicity of Participants 80 60 40 20 0 African Asian/ Unknown Black Latino Caucasian American Pacific West Islander Indian MDC-92 MDC-73 MDC-N



\*Figures specify the number of participants while percentages illustrate participants' proportions in relation to the whole. <sup>1</sup>Treatment Modalities data will not total 2015 pleas, but are snapshots on or near 12/31/15 UTA data entry.

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### **Queens Misdemeanor Treatment Court**

### Program Description

Staff	Hon. Toko Serita
Presiding Judge	Naima Aiken
Project Director II	Lisa Babb
Resource Coord. III	Jose Figueroa
Case Manager I	Diana George
TASC Case Manager	Jose Ortiz
	errals 332
Pleas	Non-plea
1,360	3,472
(28%)	(72%)
Open Cases 58 (1%)	No Discernable Drug Addiction 230 (5%)
Graduates	Refusals
732	1,615
(15%)	(33%)
Failures	Criminal History
503	201
(10%)	(4%)

\*Data from inception to 12/31/2015.

\*\*Referral data excludes BTC, BXTC, BXMTC and QTC.

In 2002, the Queens Misdemeanor Treatment Court (QMTC) opened in the Queens Criminal Court as an alternative to incarceration for non-violent drug-abusing, misdemeanor offenders. QMTC functions as a collaborative effort between the Court, the Queens County District Attorney's office, Treatment Alternatives to Street Crime, the defense bar and community-based treatment providers.

QMTC participants can be charged with either a misdemeanor drug or non-drug offense. The data collected thus far suggest that **19%** were arraigned on a non-drug misdemeanor with **31%** arraigned on a misdemeanor drug offense. The remaining **50%** were arraigned on felony drug, non-drug and drug violation.

Since its inception in 2002, **4,832** defendants have been referred to QMTC for clinical assessment, of which **1,360** (28%) have taken a plea and opted for treatment. Of the **3,472** who did not take the plea, **1,615** (47%) refused to participate. Of those who were accepted by QMTC and agreed to participate, **732** (54%) graduated which the average length of treatment (based on graduation date) was twelve months, and **503** (37%) failed to complete treatment. Of the **503** that failed, **51%** of the failures were involuntary, **39%** of failures were voluntary and **10%** were deemed inactive.

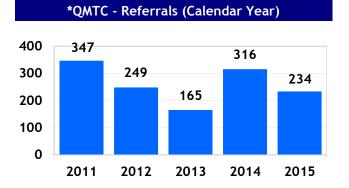
The following information is available for the **732** QMTC graduates: **40%** of graduates were either full or parttime employed; **54%** were receiving governmental assistance; **65%** were receiving Medicaid; **21%** of the graduates were either in school, full or part-time; and, **12%** of graduates received vocational training.

\*\*In calendar year 2015, QMTC made up 6% of all referrals for clinical assessment, and 10% of all pleas taken, in the Drug Treatment Court Initiative.

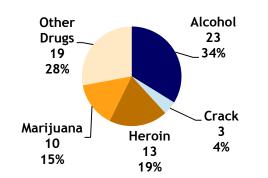
In addition, 234 defendants were referred to QMTC for clinical assessment, of which 68 (29%) took a plea and opted for treatment. Of the 68 who agreed to participate, 82% were males, 28% were Caucasian and Latino, 32% were within the 26-35 age group, and Alcohol was the primary drug of choice.

Forty-seven (47) QMTC participants graduated and 16 failed in 2015. Of the 16 that failed, 69% of the failures were involuntary and 31% of failures were voluntary.

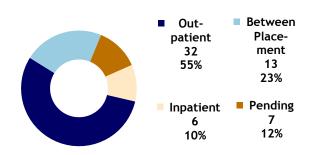
On average the QMTC daily caseload for 2015 was **58** cases. Each case manager typically monitored approximately **20-30** cases.



\*QMTC - Participants' Drug of Choice

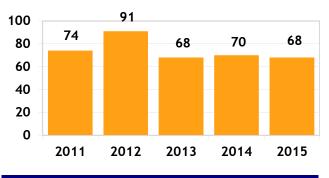


#### \*<sup>†</sup>QMTC - Treatment Modalities of Participants



\*QMTC - Retention Rates (6 Months) 73% 80% 70% 70% 71% **69**% 60% 40% 20% 0% 2011 2012 2014 2013 2015

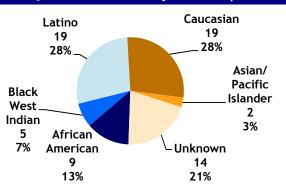
\*QMTC - Pleas (Calendar Year)



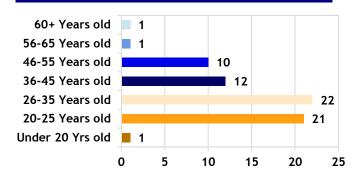
\*QMTC - Gender of Participants



\*QMTC - Race/Ethnicity of Participants



\*QMTC - Age of Participants



\*Figures specify the number of participants while percentages illustrate participants' proportions in relation to the whole. <sup>†</sup>Treatment Modalities data will not total 2015 pleas, but are snapshots on or near 12/31/15 UTA data entry.

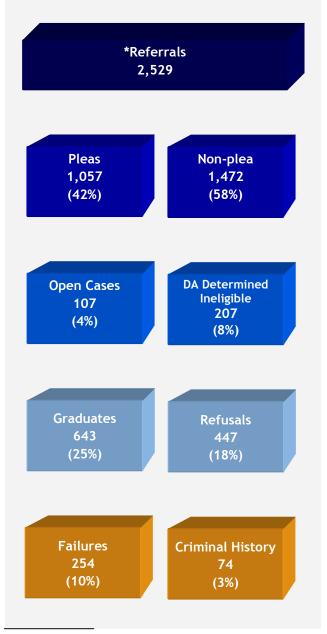
### Staten Island Treatment Court & Staten Island

### **Program Description**

#### <u>Staff</u>

Presiding Judge	Hon. Al
Project Director II	Laverne
Case Manager I	Sandra

Hon. Alan Meyer Laverne Chin Sandra Thompson Lucy Perez



\*Data from inception to 12/31/2015.

\*\*Referral data excludes BTC, BXTC, BXMTC and QTC.

In March 2002, the Staten Island Treatment Court (SITC) opened in Richmond Criminal Court as an alternative to incarceration for drug-abusing felony offenders. SITC opened at the end of a lengthy planning process that began in 1999 and is a collaborative effort between the Court, the Richmond County District Attorney's office, Treatment Alternatives to Street Crime (TASC), the defense bar, and community-based treatment providers.

Arraignment charges differ for SITC participants, with 31% charged with a felony drug offense and 20% charged with felony non-drug offenses, and a smaller population charged with felony drug charges. There are a number of misdemeanor (both drug and non-drug) cases that have also been handled by SITC, with 39% charged with a misdemeanor drug offense and 10% charged with misdemeanor non-drug offenses.

Since opening its doors in 2002, **2,529** defendants have been referred to SITC for clinical assessment, of which **1,057** (41%) have taken a plea and opted for treatment. Of the **1,472** who did not take the plea, **447** (**30%**) refused to participate. Of those who were accepted by SITC and agreed to participate, **643** (**61%**) graduated of which the average length of treatment (based on graduation date) was twelve to eighteen months, and **254** (**24%**) failed to complete treatment. Of the **254** that failed, **37%** of the failures were involuntary, **41%** of failures were voluntary and **22%** were deemed inactive.

The following information is available for the **643** SITC graduates: **61%** of graduates were either full or parttime employed; **21%** were receiving governmental assistance; **42%** were receiving Medicaid; **23%** of the graduates were either in school, full or part-time; and, **10%** of graduates received vocational training.

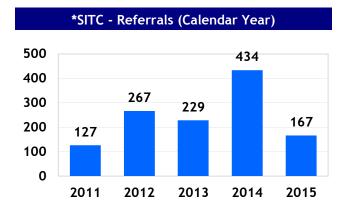
\*\*In calendar year 2015, SITC made up 4% of all referrals for clinical assessment, and 11% of all pleas taken, in the Drug Treatment Court Initiative.

In addition, **167** defendants were referred to SITC for clinical assessment, of which **79** (**47%**) took a plea and opted for treatment. Of the **79** who agreed to participate, over **77%** were males, **87%** were Caucasians, **43%** were within the **26-35** age group, and **Heroin** was the primary drug of choice.

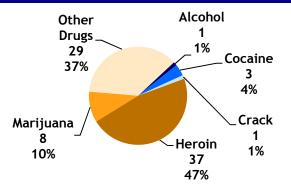
**Ninety-nine (99)** SITC participants graduated and **35** failed in 2015. Of the **35** that failed, **51%** of the failures were involuntary, **37%** of failures were voluntary, and **11%** were deemed inactive.

On average the SITC daily caseload for 2015 was **107** cases. Each case manager typically monitored approximately **50-60** cases.

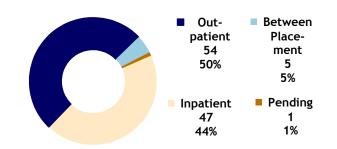
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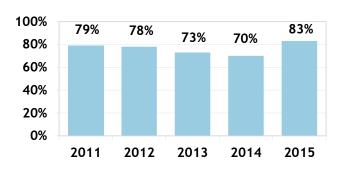
\*SITC - Participant's Drug of Choice



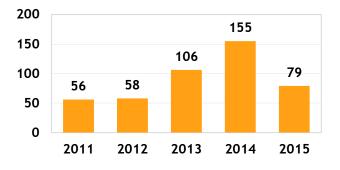
\*<sup>†</sup>SITC - Treatment Modalities of Participants



\*SITC - Retention Rates (6 Months)



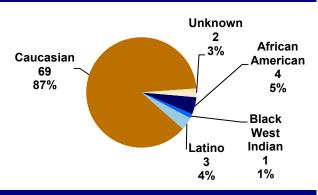
\*SITC - Pleas (Calendar Year)



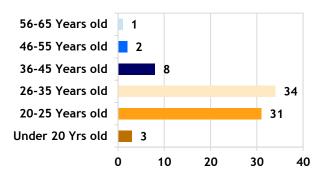
\*SITC - Gender of Participants



\*SITC - Race/Ethnicity of Participants



\*SITC - Age of Participants



\*Figures specify the number of participants while percentages illustrate participants' proportions in relation to the whole. <sup>†</sup>Treatment Modalities data will not total 2015 pleas, but are snapshots on or near 12/31/15 UTA data entry.

## 2015 STATISTICAL SUMMARY

	MBTC	ММТС	МТС	QMTC	SITC	STEP	MDC-N	MDC-73	MDC-92	BMVTC	TOTALS
ARRAIGNMENT CHARGE	ind to			QUITO	0110	0121	mbo N	112010	MDO OL	Dintro	TOTALO
MISD DRUG	72	7	0	21	30	12	0	0	0	9	151
MISD NON-DRUG	60	9	0	13	8	5	0	0	0	0	95
FELONY DRUG	0	0	0	7	25	31	63	76	56	0	258
FELONY NON-DRUG	1	1	0	3	16	77	0	18	35	0	151
VIOLATION DRUG	0	0	0	12	0	0	0	0	0	0	12
MISSING	18	1	0	12	0	10	0	0	0	0	41
	151	18	0	68	79	135	63	94	91	9	708
GENDER											
MALES	127	14	0	56	61	119	46	88	82	9	602
FEMALES	24	4	0	12	18	16	17	6	9	0	106
	151	18	0	68	79	135	63	94	91	9	708
AGE											
Under 20	1	1	0	1	3	9	1	2	1	0	19
20-25	14	1	0	21	31	38	13	9	4	0	131
26-35	34	5	0	22	34	36	20	24	26	0	201
36-45	35	5	0	12	8	19	11	22	25	3	140
46-55	56	3	0	10	2	25	12	28	26	3	165
56-65	11	2	0	1	1	6	5	8	9	3	46
65+	0	1	0	1	0	2	1	1	0	0	6
	151	18	0	68	79	135	63	94	91	9	708
ETHNICITY											
AFRICAN AMERICAN	60	4	0	9	4	43	18	29	23	3	193
BLACK WEST INDIAN	3	0	0	5	1	4	1	2	2	0	18
LATINO	35	5	0	19	3	29	13	28	30	1	163
CAUCASIAN	18	4	0	19	69	15	11	7	14	1	158
ASIAN/PACIFIC ISLANDER	0	0	0	2	0	1	0	3	0	0	6
OTHER	2	0	0	1	1	1	0	25	0	4	34
MISSING	33	5	0	13	1	42	20	0	22	0	136
	151	18	0	68	79	135	63	94	91	9	708
DRUG OF CHOICE											
ALCOHOL	6	0	0	23	1	11	1	0	2	0	44
COCAINE	6	1	0	0	3	6	4	10	6	0	36
CRACK	33	5	0	3	1	12	8	13	18	0	93
HEROIN	46	2	0	13	37	26	6	16	18	0	164
MARIJUANA	12	1	0	10	8	37	16	9	9	0	102
OTHER	6	0	0	6	26	6	7	15	7	9	82
MISSING	42	9	0	13	3	37	21	31	31	0	187
	151	18	0	68	79	135	63	94	91	9	708
1/1/2015 - 12/31/2015											
REFERRALS	1693	47	0	234	167	1377	99	102	192	51	3962
PLEAS	151	18	0	68	79	135	63	94	91	9	708
REFUSED	862	16	0	70	56	580	9	12	11	0	1616
CRIMINAL HISTORY	2	0	0	6	2	0	1	2	5	0	18
GRADS	68	2	0	47	99	66	44	35	42	2	405
FAILED	85	14	0	16	35	47	17	37	51	2	304
~VOLUNTARY	37	2	0	5	13	3	3	1	4	0	68
~INVOLUNTARY	48	12	0	11	18	44	14	36	47	2	232
~INACTIVITY (DEATH, WARRANT, INELIG.)	0	0	0	0	4	0	0	0	0	0	4
INCEPTION											
REFERRALS	26042	3423	1633	4832	2529	18903	824	908	1417	51	60562
PLEAS	2639	520	1242	1360	1057	2453	433	456	553	9	10722
REFUSED	12693	1714	0	1615	447	5802	102	127	117	0	22617
CRIMINAL HISTORY	324	442	0	201	74	1403	13	23	45	0	2525
GRADS	1136	150	610	732	643	1491	185	119	133	2	5201
FAILED	1297	346	620	503	254	866	110	184	241	2	4423
~VOLUNTARY	519	113	112	195	105	108	19	29	48	0	1248
~INVOLUNTARY	769	222	471	257	94	677	91	155	193	2	2931
~INACTIVITY (DEATH, WARRANT, INELIG. )	9	11	37	51	55	81	0	0	0	0	244
CASELOAD (End of Year Snapshot)											
	217	13	-	58	107	489	137	140	179	9	1349
RETENTION RATES (%)											
	59	47	-	73	83	73	83	76	68	-	
GRADUATES (Since Inception) (%)		• ·	-						-	-	
EMPLOYED FULL-TIME/ PART-TIME	78	20	0	295	394	271	126	80	74	0	1338
								20	E0	0	1213
GOV'T ASSISTANCE	233	33	0	392	134	283	48	38	52	0	
MEDICAID	233 250	43	0	477	267	681	73	52	60	0	1903
	233										

22 NYC Criminal Court - Drug Court Initiative 2015 Annual Report

### www.nycourts.gov/nycdrugcourt

### Criminal Court of the City of New York 100 Centre Street, New York, NY 10013 Phone: 646-386-4600 Fax: 646-386-4395 Email: djedward@nycourts.gov

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INTERPRETERS >		OPD City-Wide Info	NYC Drug Court Initiativ	/e	
LAW DEPARTMENT		-Lisa Español Brooklyn:	Overview		Info
PUBLIC SAFETY		Screening Treatment & Enhance	welcome to the Drug Courts of New Y	ork City Criminal Court.	Drug Court Video Run Time: 9.5 minutes. MPEG format
REPORTERS +		OD 2 Part (STEP) (Pro -Just Misdemeanor Treatment Court (	METC		Download <u>QuickTime</u> or <u>RealPlayer</u>
TECHNOLOGY +		Manhattan:	MBIC)	×	Video Text Transcript Graduates' Comer
APPLICATIONS	a	Felony Treatment Court (MTC)			2013 Annual Report Court Holidays
DIRECTORY	04/2014	Revie Misdemeanor Treatment Court (	MMTC)	~	Please Note:
FORMS/MANUALS	NYC Crimin	Queens:	QMTC)		For non-Drug Court related matters, please visit
MEMOS	NTC CHIIIII	Staten Island:	13 martin 2 martin		www.nycourts.gov or call 1-800-COURTNY.
PUBLICATIONS +	Midtown Community Court	Treatment Court (SITC)	Here you will find information on the ni Court operates in Brooklyn, Manhattan Island, Drug courts are a partnership b	, Queens and Staten	
RELATIVE LINKS	Manhattan Criminal Court	В	prosecutors, law enforcement, defense education providers. Each drug court p	e bar and treatment and laces non-violent, drug-	
SCHEDULES +	Summons Department		addicted offenders into treatment in an drug abuse, addiction, crime and jail. V the same goals and uses the same gu	Vhile each drug court has	
CONTACT US	1		operates in its own unique way. These information on individual programs, inc	pages will give you luding rules of participation	
			and results. We hope you find this info	Lisa Lindsay	
You may a	ccess this		Citywide Proble	m-Solving Court Coordinator	
report on			Administration 100 Centre St. New York, NY 10013		
Court's int			Phone: 646.386.4700		
			Fax: 646.386.4395		
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