

Criminal Court
of the
City of New York

**Drug Court Initiative
Annual Report
2014**





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
- Drug Court
- **Citywide Summons**
346 Broadway, New York, NY 10013
- **Manhattan Criminal Court**
100 Centre Street, New York, NY 10013
- Drug Court
- **Brooklyn Criminal Court**
120 Schermerhorn Street, Brooklyn, NY 11201
- Drug Court
- **Red Hook Community Justice Center**
88 Visitation Place, Brooklyn, NY 11231
- Drug Court
- **Staten Island Criminal Court**
67 Targee Street, Staten Island, NY 10301
- Drug Court





CRIMINAL COURT OF THE CITY OF NEW YORK DRUG COURT INITIATIVE

2014 ANNUAL REPORT

Published September 2015

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

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100 Centre Street—Engraving on doors of AR1 Part

56,601

The total number of drug court referrals citywide between 1998 and 2014.

Includes MBTC, MMTTC, MTC, QMTC, SITC, STEP, MDC-N, MDC-73 and MDC-92 (See pg.

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. Over the course of the last ten years 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 high retention and graduation rates.

Some 2014 Drug Court Initiative milestones:

- **5,436 defendants were referred to drug courts for evaluation;**
- **693 defendants agreed to participate and pled guilty; and**
- **338 participants graduated from drug court.**

*Depending on the court, not everyone who is referred is entered into the UTA.

† Statistical results originate from data inputted in UTA between 1/1/14 and 12/31/14.

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

§ The data does not include QTC, BXTTC and BTC, unlike page 7.

Introduction

This report profiles the work and accomplishments of the Drug Court Initiative in 2014. Although facing many challenges with a reduced workforce and an increased caseload, the judicial and non-judicial staff continues to achieve significant results. I applaud the staff on continuing the goals of the Drug Court Initiative, that is, to make treatment available to non-violent, substance abusing offenders as an alternative to incarceration.

With the opening of the Manhattan Treatment Court in 1998 the drug courts in Criminal Court have been operating for 16 years. Over the course of the last 16 years, the Drug Court Initiative expanded to the other four boroughs of New York City, with almost 55,000 referrals made to the drug courts and over 8,200 pleas entered.

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 providing unwavering support 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-in-hand with central administration to make these programs successful.

The 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 UCS 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 shown these innovative programs. These interagencies 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.

- Lisa K. Lindsay, Problem-solving Courts Coordinator



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

- MBTC - Misdemeanor Brooklyn Treatment Court
- MMTC - Manhattan Misdemeanor Treatment Court
- MTC - Manhattan Treatment Court
- QMTc - Queens Misdemeanor Treatment Court
- QTC - Queens Treatment Court
- SITC - Staten Island Treatment Court
- STEP - Screening & Treatment Enhancement Part (Brooklyn)
- MDC-N - Manhattan Diversion Court, Part N
- MDC-73 - Manhattan Diversion Court, Part 73
- MDC-92 - Manhattan Diversion Court, Part 92
- BTC - Brooklyn Treatment Court
- BXTC - Bronx Treatment Court
- BXMTc - Bronx Misdemeanor Treatment Court

| | MBTC | MMTC | MTC | QMTc | SITC | STEP | MDC-N | MDC-73 | MDC-92 |
|-------------------------------|----------------------------------|----------------------------------|--|----------------------------------|---|---|--|--|--|
| Target Population | Persistent Misdemeanor Offenders | Persistent Misdemeanor Offenders | Non-violent First Felony Offenders & Probation Violators | Persistent Misdemeanor Offenders | Non-violent First Felony Offenders & Persistent Misdemeanor Offenders | 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 |
| Specific Criteria | | | | | | | | | |
| Drug Sale - Felony | N | N | Y | N | Y | Y | Y | Y | Y |
| Drug Possession - Felony | N | N | Y | N | Y | Y | Y | Y | Y |
| Drug Possession - Misdemeanor | Y | Y | N | Y | Y | Y* | N | N | N |
| DWI | N | N | N | N | N | N | N | N | N |
| Non-Drug Charge - Felony | N | N | N | N | Y | Y | N | N | N |
| Non-Drug Charge - Misdemeanor | Y | Y | N | Y | Y | Y* | N | N | N |
| Violations of Probation | Y | Y | Y | Y | N | Y | Y | Y | Y |
| Prior Felonies | Y | Y | N | Y | Y ** | N† | N | N | N |
| Ages | 16+ | 16+ | 16+ | 16+ | 16+ | 16+ | 16+ | 16+ | 16+ |

* 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.

9,471

The total number of drug court pleas citywide between 1998 and 2014.

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

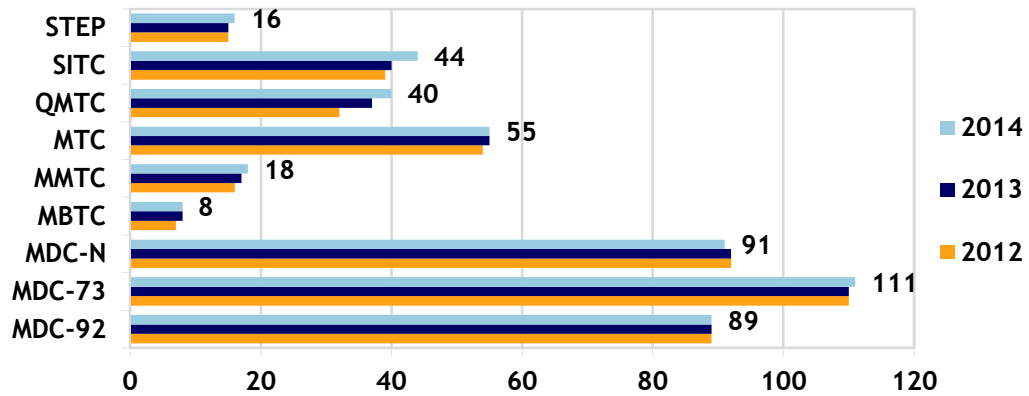


Summary Information - All Courts

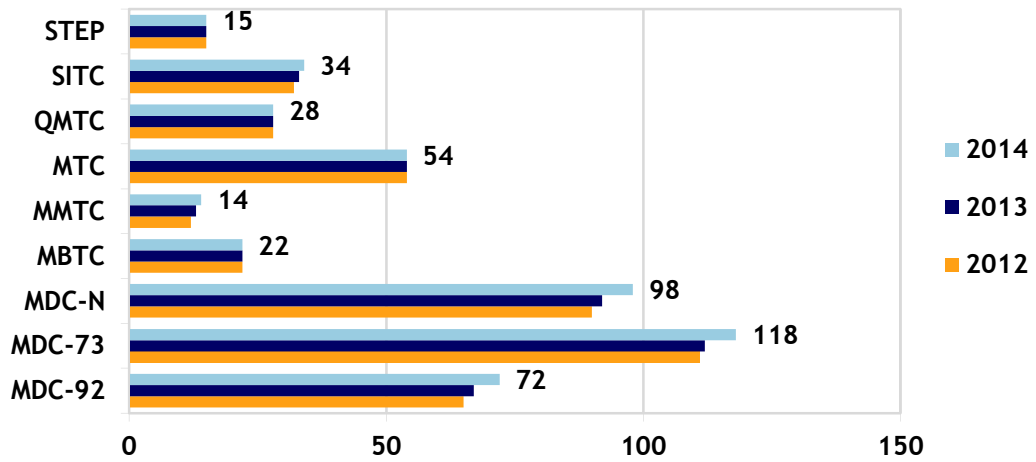
Types of Arraignment Charges

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 2014, about **fifty-five percent (55%)** of drug court participants were arraigned on felony charges - and of those, **sixty-three percent (63%)** were arraigned on drug charges. **Forty percent (40%)** of participants were arraigned on misdemeanor charges - and of those, **sixty percent (60%)** were arraigned on drug charges.

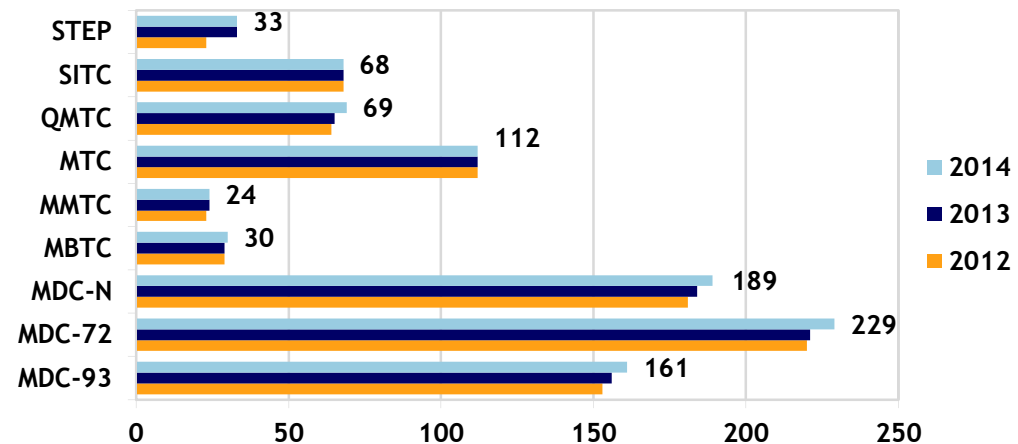
Mean Time Between Arrest and Assessment (Days)



Mean Time Between Assessment and Plea (Days)

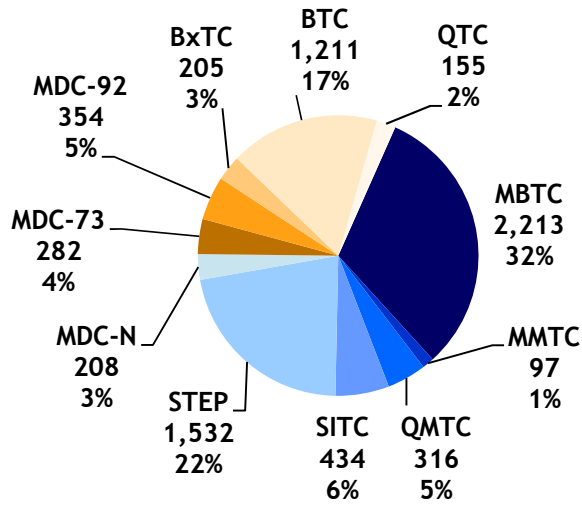


Mean Time Between Arrest and Plea (Days)

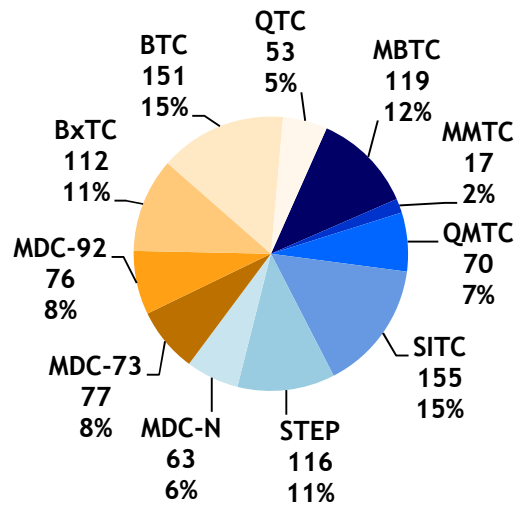




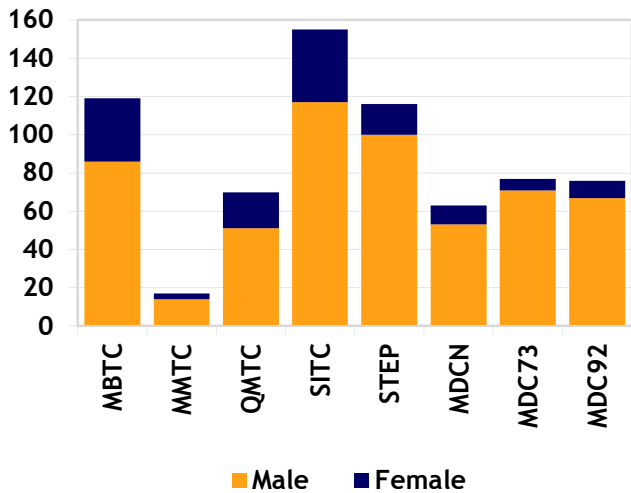
***†2014 Drug Court Referrals - Citywide**



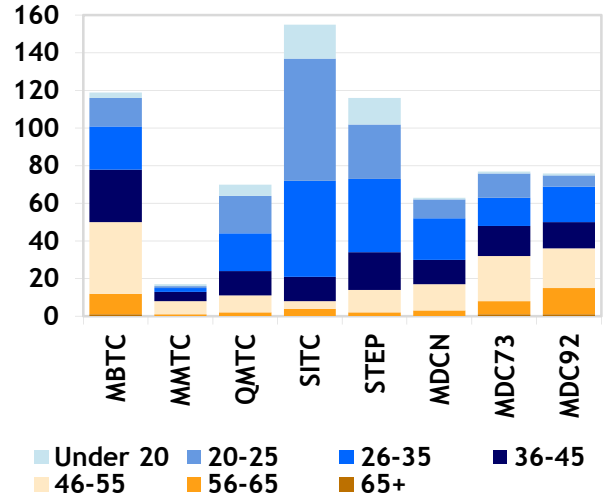
***†2014 Drug Court Pleas - Citywide**



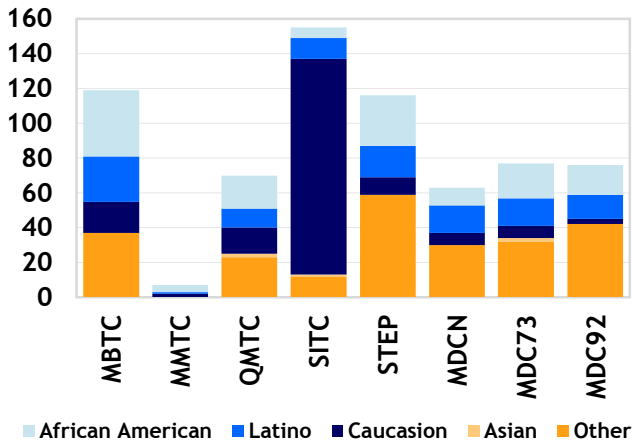
***†2014 Gender of Drug Court Participants**



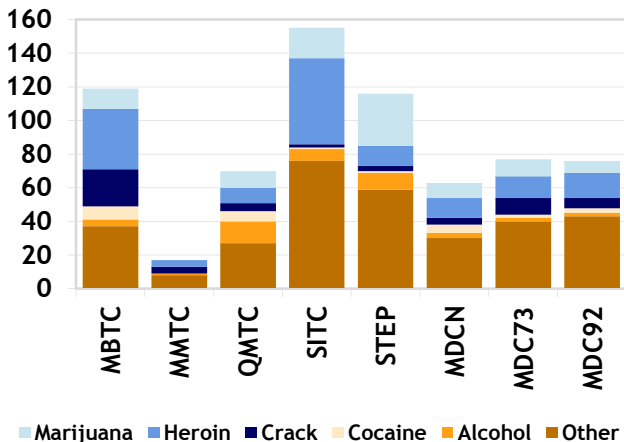
***†2014 Age of Drug Court Participants**



***†2014 Ethnicity of Drug Court Participants**



***†2014 Drug of Choice of Drug Court Participants**



*Figures specify the number of participants while percentages illustrate participants' proportions in relation to the whole.

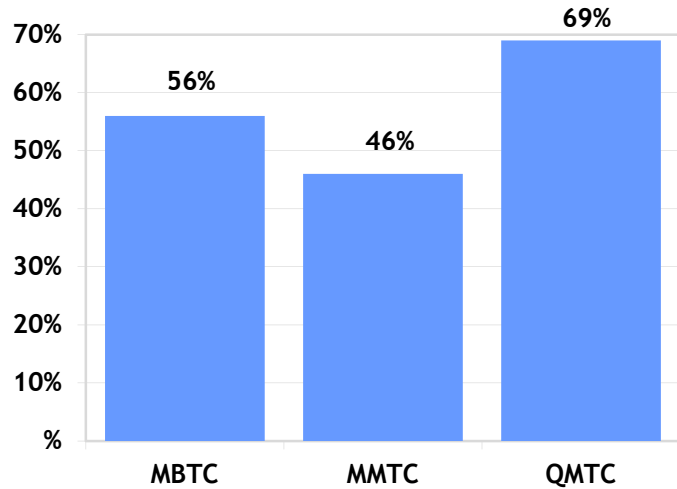
†STEP, DTAP and Mental Health pleas are not being reflected entirely.



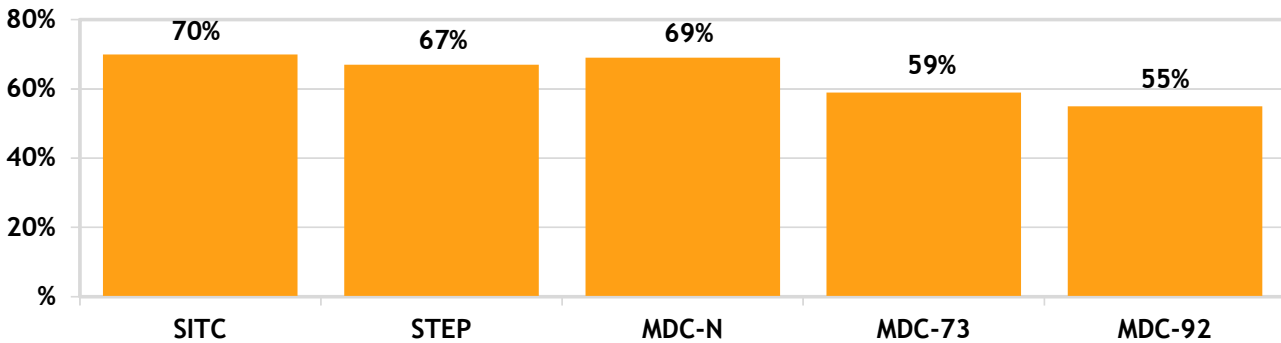
Retention Rates - All Courts

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 64%. Misdemeanor courts were not included in the analysis of one year retention rates since the length of treatment is shorter (between 8-9 months). The average retention rate for Misdemeanor courts in the Drug Treatment Court Initiative is 57%.

2014 Misdemeanor Drug Court Retention Rates (6 Months)



2014 Felony Drug Court Retention Rates (1 Year)



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

| | |
|--|---|
| Manhattan Misdemeanor Treatment Court | Arraignment Clerks |
| Manhattan Treatment Court | Arraignment Clerks, Office of Special Narcotics |
| Misdemeanor Brooklyn Treatment Court | Arraignment Clerks |
| Queens Misdemeanor Treatment Court | Arraignment Clerks |
| Screening & Treatment Enhancement Part | Arraignment Clerks |
| Staten Island Treatment Court | District Attorney |
| Manhattan Diversion Court—Part N | Arraignment Clerks |
| Manhattan Diversion Court—Part 73 | Arraignment Clerks |
| Manhattan Diversion Court—Part 92 | Arraignment Clerks |



Misdemeanor Brooklyn Treatment Court

Program Description

Staff

| | |
|---------------------|--------------------|
| 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 |
| | Lucy Perez |
| | Lisa Tighe |
| | Lyndon Harding |
| Case Technician | Miriam Famania |
| Probation Officer | Barbara Miles |
| DOE Liaison | Kristen Murphy |

In January 2003, the Misdemeanor Brooklyn Treatment Court (MBTC) opened in the Kings County Criminal Court to provide an alternative to incarceration for drug-addicted 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.

Arrest charges differ for MBTC participants, with about 51% charged with a misdemeanor drug offense and 37% charged with misdemeanor non-drug offenses.

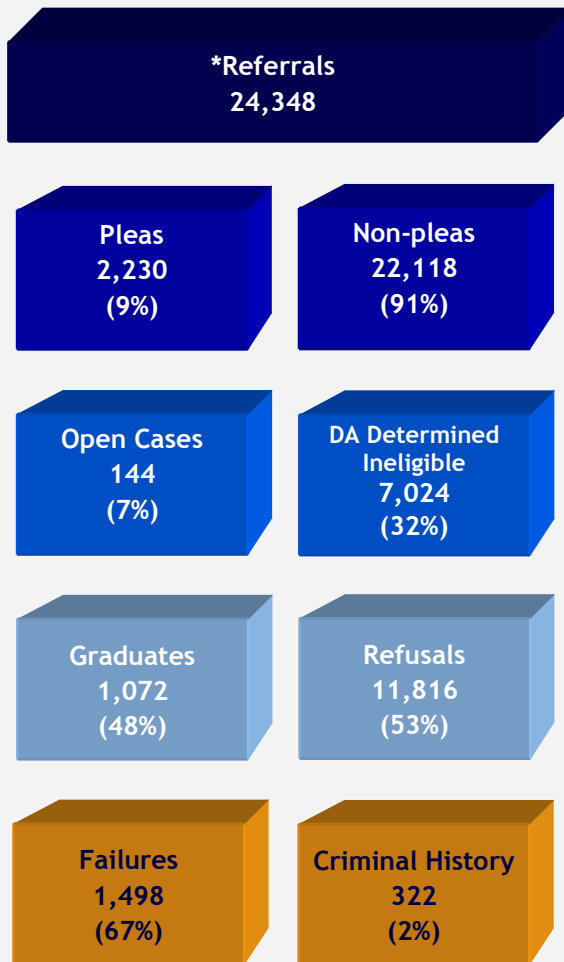
Since its inception in 2003, 24,348 defendants have been referred to MBTC for clinical assessment, of which 2,230 (9%) have taken a plea and opted for treatment. Of the 22,118 who did not take the plea, 11,816 (53%) refused to participate. Of those who were accepted by MBTC and agreed to participate, 1,072 (48%) graduated which the average length of treatment (based on graduation date) was twelve months, and 1,498 (67%) failed to complete treatment. Of the 1,498 that failed, 48% of the failures were involuntary, 32% of failures were voluntary and 20% were deemed inactive.

In calendar year 2014, MBTC made up 40% of all referrals for clinical assessment, and 17% of all pleas taken, in the Drug Treatment Court Initiative.

That same year, 2,213 defendants were referred to MBTC for clinical assessment, of which 119 (5%) took a plea and opted for treatment. Of the 119 who agreed to participate, 72% were males, 32% were African-Americans, 32% were within the 46-55 age and Heroin was the primary drug of choice.

Fifty-five (55) participants graduated and 75 failed in 2014. Of the 75 that failed, 48% of the failures were involuntary, 25% of failures were voluntary and 27% were deemed inactive.

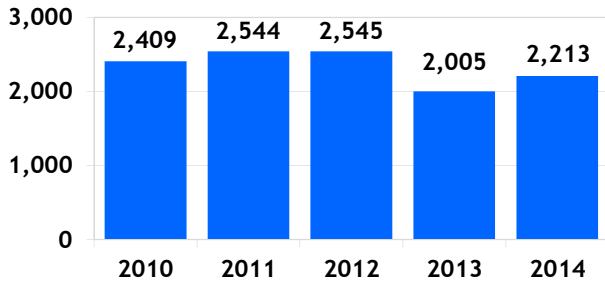
On average the MBTC daily caseload for 2014 was 144 cases. Each case manager typically monitored approximately 30-35 cases.



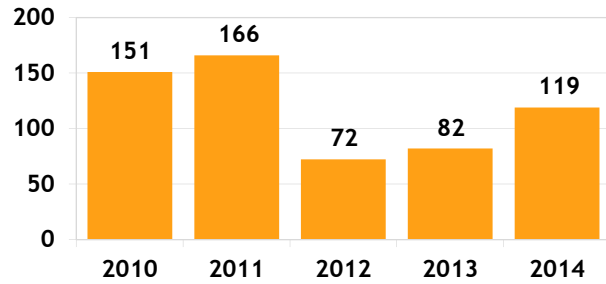
*Data from inception to 12/31/2014.



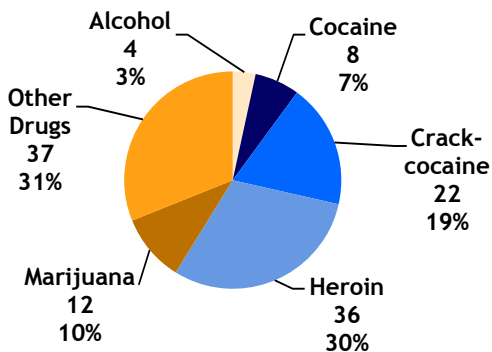
*MBTC - Referrals



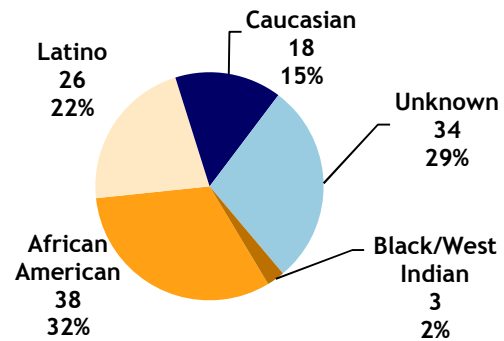
*MBTC - Pleas



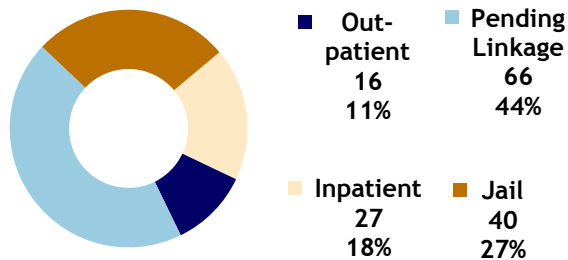
*MBTC - Participants' Drug of Choice



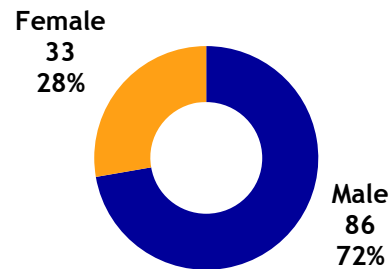
*MBTC - Race/Ethnicity of Participants



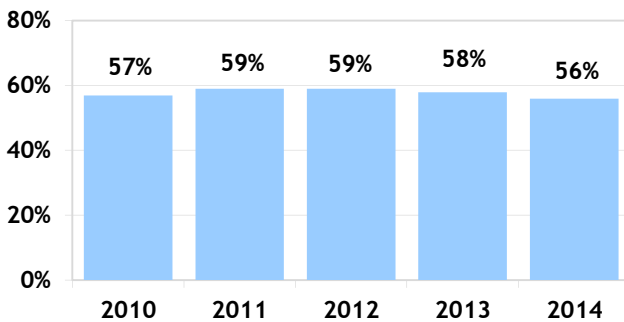
*†MBTC - Treatment Modalities of Participants



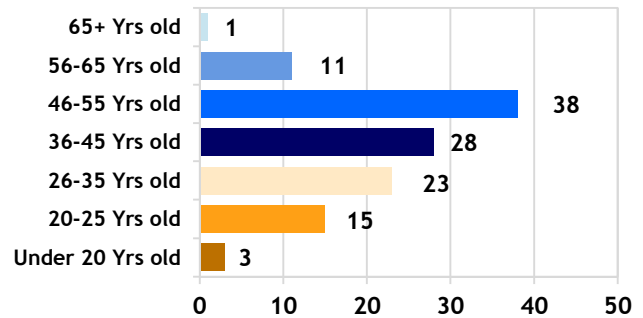
*MBTC - Gender of Participants



*MBTC - Retention Rates (6 Months)



*MBTC - Age of Participants



*Figures specify the number of participants while percentages illustrate participants' proportions in relation to the whole.

†Treatment Modalities data will not total 2014 pleas, but are snapshots on or near 12/31/14 UTA data entry.



Screening & Treatment Enhancement Part

Program Description

Staff

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

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

Arrestment charges differ for STEP participants, with **26%** charged with a felony drug offense and **65%** 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.

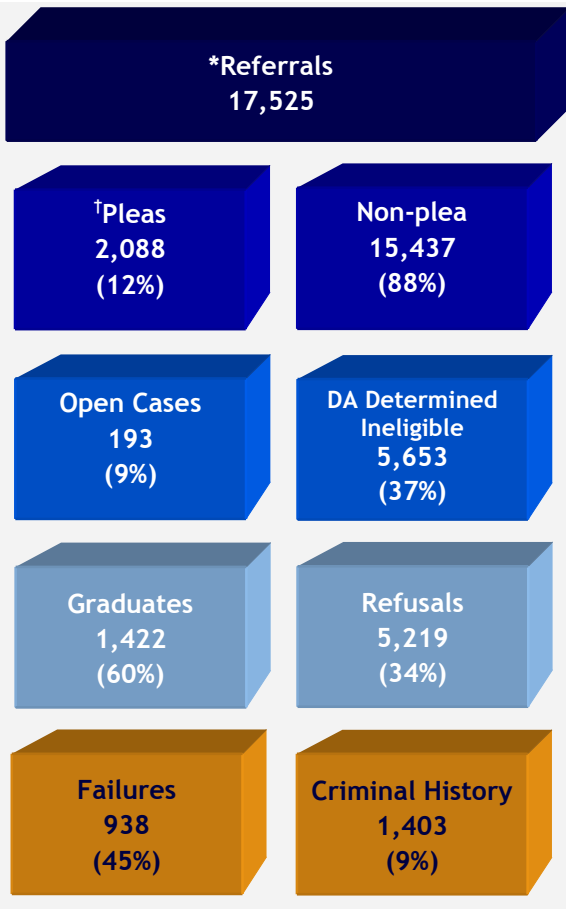
Since its inception in 2003, **17,525** defendants have been referred to STEP for clinical assessment, of which **2,088 (12%)** have taken a plea and opted for treatment. Of the **15,437** who did not take the plea, **5,219 (34%)** refused to participate. Of those who were accepted by STEP and agreed to participate, **1,422 (60%)** graduated of which the average length of treatment (based on graduation date) was twelve months, and **938 (45%)** failed to complete treatment. Of the **938** that failed, **66%** of the failures were involuntary, **11%** of failures were voluntary and **23%** were deemed inactive.

In calendar year 2014, STEP made up **28%** of all referrals for clinical assessment, and **17%** of all pleas taken in the Drug Treatment Court Initiative.

That same year, **1,532** defendants were referred to STEP for clinical assessment, of which **116 (8%)** took a plea and opted for treatment. Of the **116** who agreed to participate, **86%** were males, **25%** were African-Americans, **34%** were within the **26-35** age group and **Other Drugs (Pills, Opiates, Prescriptions and Unknown)** accounted as the primary drug of choice.

Sixty-three (63) participants graduated and **50** failed in 2014. Of the **50** that failed, **82%** of the failures were involuntary, **6%** of failures were voluntary and **12%** were deemed inactive.

On average the STEP daily caseload for 2014 was **193** cases. Each case manager typically monitored approximately **30-35** cases.

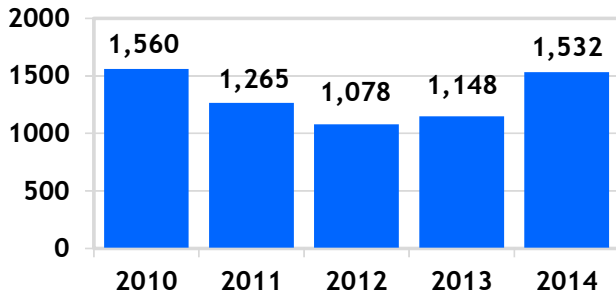


*Data from inception to 12/31/2014.

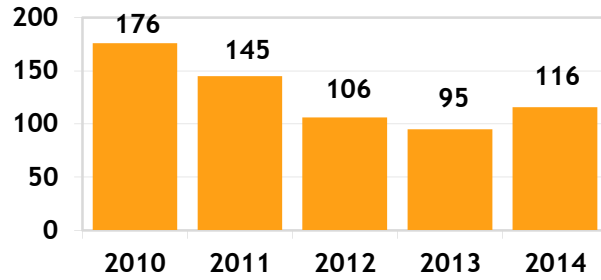
†STEP, DTAP and Mental Health pleas are not being reflected entirely.



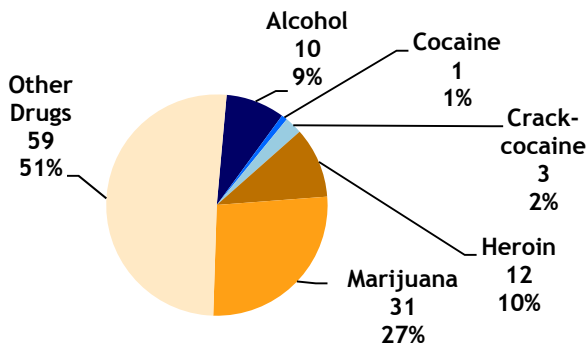
**STEP - Referrals



**STEP - Pleas



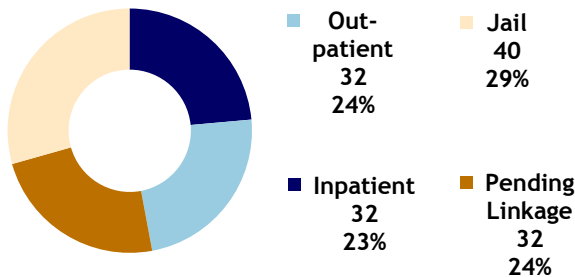
**STEP - Participant's Drug of Choice



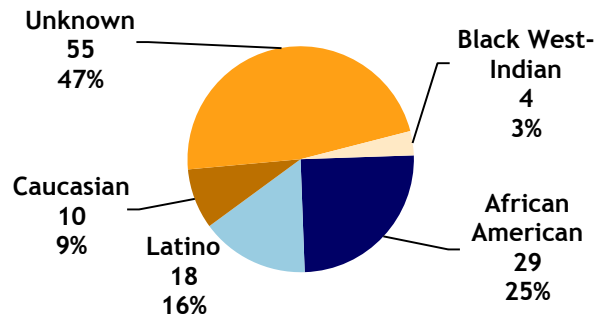
**STEP - Gender of Participants



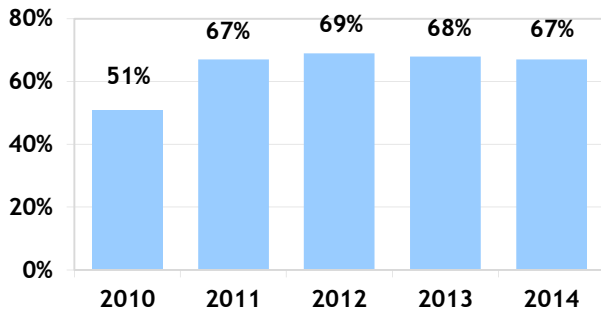
**STEP - Treatment Modalities of Participants



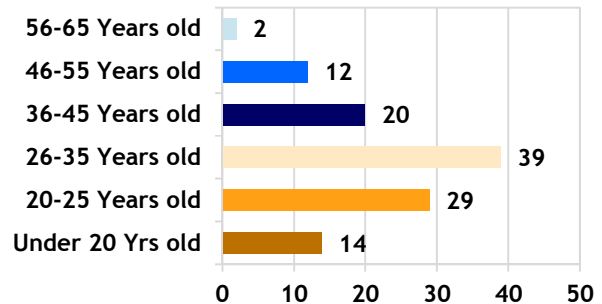
**STEP - Race/Ethnicity of Participants



**STEP - Retention Rates (6 Months)



**STEP - Age of Participants



*Figures specify the number of participants while percentages illustrate participants' proportions in relation to the whole.

†Treatment Modalities data will not total 2014 pleas, but are snapshots on or near 12/31/14 UTA data entry.

**STEP, DTAP and Mental Health pleas are not being reflected entirely.



Manhattan Misdemeanor Treatment Court

Program Description

Staff

| | |
|---------------------|-------------------------|
| Presiding Judge | Hon. Richard Weinberg |
| Project Director II | Debra Hall-Martin |
| Resource Coord. III | Laverne Chin |
| Case Manager II | Alisha Corridon |
| Case Manager II | Desiree Rivera |
| Case Manager II | General Wright |
| Case Manager I | Darlene Buffalo |
| | Richard Cruz |
| | Darryl Kittel |
| | Evelyn Salcedo |
| Case Technician | Monique Emerson |
| Voc/Ed | Shannon Castang-Feggins |

The Manhattan Misdemeanor Treatment Court (MMTC) was restructured in May of 2003 to provide meaningful, long term substance abuse treatment for drug-abusing 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 suggests that **53%** have pled to a non-drug misdemeanor with **41%** pleading to a misdemeanor drug offense.

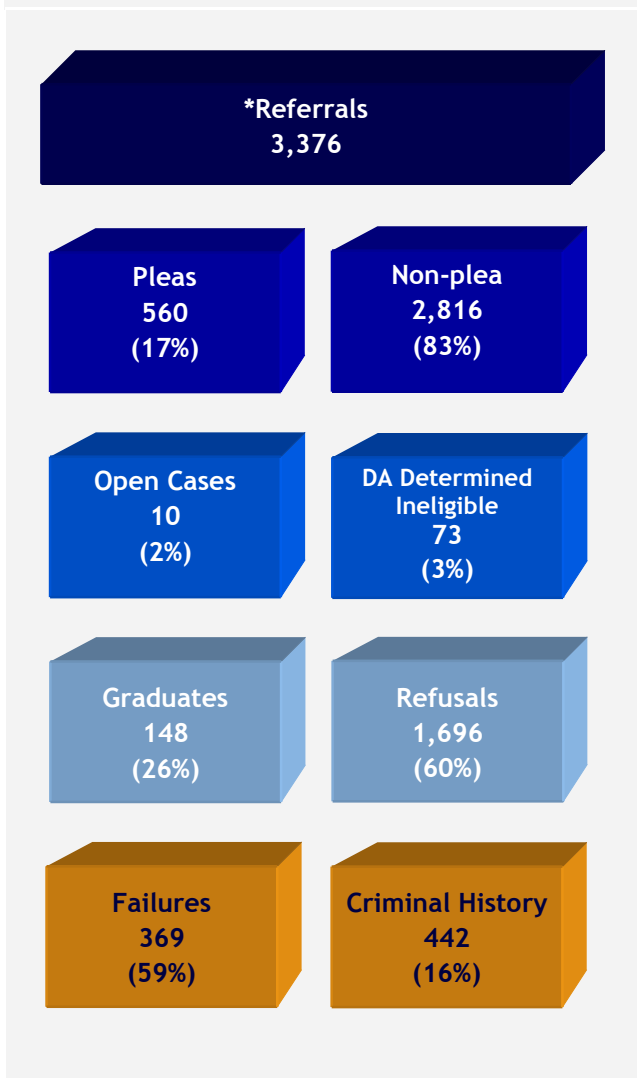
Since restructuring in 2003, **3,376** defendants have been referred to MMTC for clinical assessment, of which **560 (17%)** have taken a plea and opted for treatment. Of the **2,816** who did not take the plea, **333 (12%)** refused to participate. Of those who were accepted by MMTC and agreed to participate, **149 (27%)** graduated of which the average length of treatment (based on graduation date) was six months, and **369 (59%)** failed to complete treatment. Of the **369** that failed, **57%** of the failures were involuntary, **30%** of failures were voluntary and **13%** were deemed inactive.

In calendar year 2014, MMTC made up **27%** of all referrals for clinical assessment, and **3%** of all pleas taken, in the Drug Treatment Court Initiative.

That same year, **97** defendants were referred to MMTC for clinical assessment, of which **17 (18%)** took a plea and opted for treatment. Of the **17** who agreed to participate, **82%** were males, **23%** were African-Americans, **41%** were within the **46-55** age group and **Heroin and Crack-cocaine** were primary drug of choice.

Nine (9) participants graduated and **12** failed in 2014. Of the **12** that failed, **67%** of the failures were involuntary and **33%** of the failures were deemed inactive.

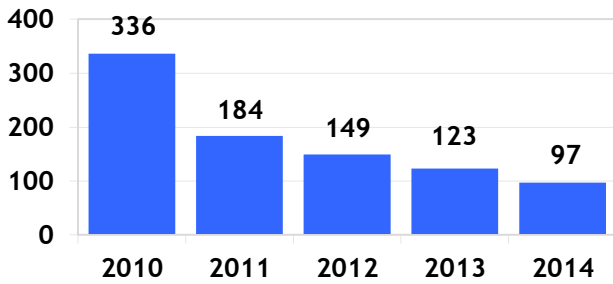
On average the MMTC daily caseload for 2014 was **10** cases. Each case manager typically monitored approximately **0-5** cases.



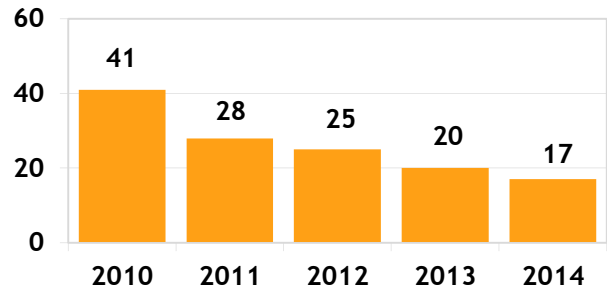
*Data from inception to 12/31/2014.



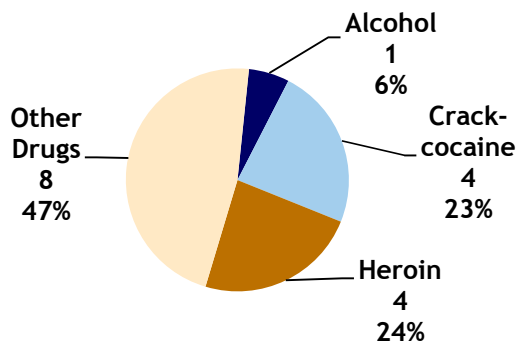
*MMTC - Referrals



*MMTC - Pleas



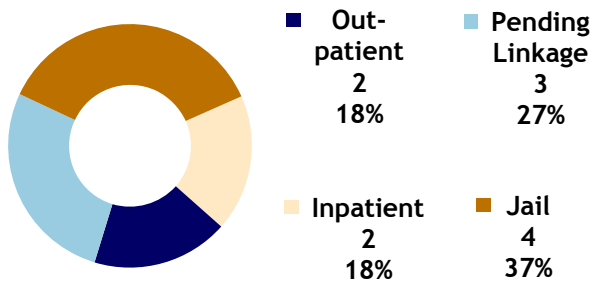
*MMTC - Participant's Drug of Choice



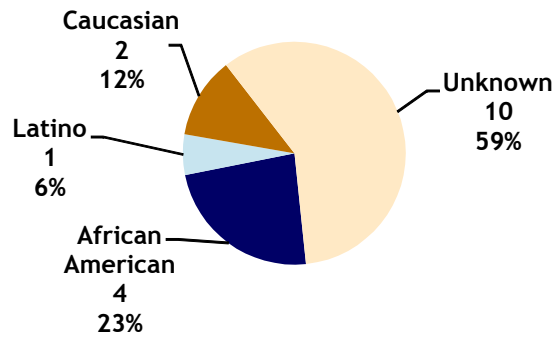
*MMTC - Gender of Participants



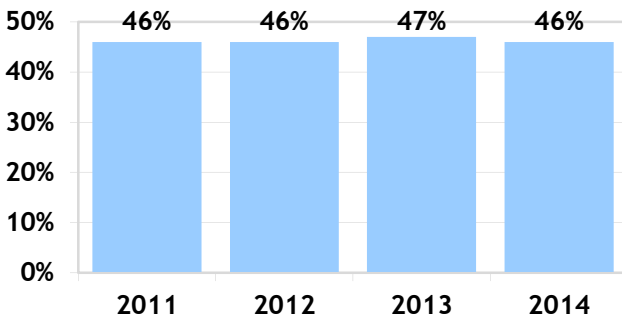
*†MMTC - Treatment Modalities of Participants



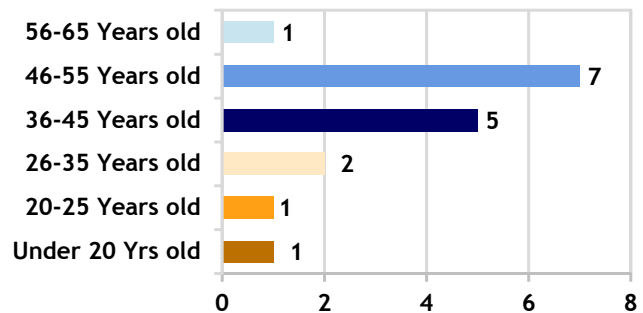
*MMTC - Race/Ethnicity of Participants



*MMTC - Retention Rates (6 Months)



*MMTC - Age of Participants



*Figures specify the number of participants while percentages illustrate participants' proportions in relation to the whole.

†Treatment Modalities data will not total 2014 pleas, but are snapshots on or near 12/31/14 UTA data entry.



Manhattan Diversion Courts

Program Description

Staff

| | |
|--------------------------|-------------------------|
| 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 | Laverne Chin |
| Case Manager II | Alisha Corridon |
| Case Manager II | Desiree Rivera |
| Case Manager II | General Wright |
| Case Manager I | Darlene Buffalo |
| | Richard Cruz |
| | Darryl Kittel |
| | Evelyn Salcedo |
| Case Technician | Monique Emerson |
| Voc/Ed Court Analyst | Shannon Castang-Feggins |

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 **77%** have pled to a felony drug charge, while **22%** pled to non-drug charges. There are a handful of misdemeanor drug and non-drug offense.

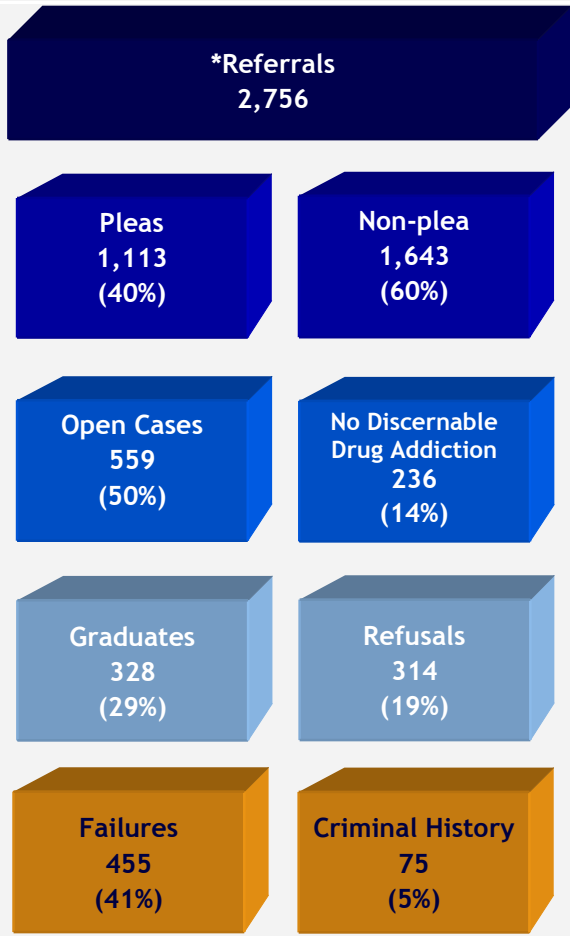
Since restructuring in 2009, collectively, **2,756** defendants have been referred to MDC for clinical assessment, of which **1,113 (40%)** have taken a plea and opted for treatment. Of the **1,643** who did not take the plea, **316 (19%)** refused to participate. Of those who were accepted by MDC and agreed to participate, **328 (29%)** graduated of which the average length of treatment (based on graduation date) was sixteen to eighteen months, and **455 (41%)** failed to complete treatment. Of the **455** that failed, **70%** of the failures were involuntary and **19%** of failures were voluntary, while **11%** were deemed inactive.

In calendar year 2014, MDC made up **16%** of all referrals for clinical assessment, and **31%** of all pleas taken, in the Drug Treatment Court Initiative.

That same year, **844** defendants were referred to MDC for clinical assessment, of which **216 (26%)** took a plea and opted for treatment. Of the **216** who agreed to participate, over **88%** were males, **22%** were African-Americans, **27%** were within the **46-55** age group and **Heroin** was primary drug of choice.

Eight-five (85) MDC participants graduated and **124** failed in 2014. Of the **124** that failed, **57%** of the failures were involuntary, **14%** of failures were voluntary and **29%** were deemed inactive.

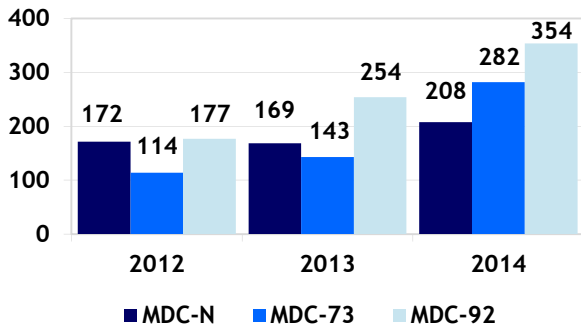
On average the MDC daily caseload for 2014 was **559** cases. Each case manager typically monitored approximately **80-90** cases.



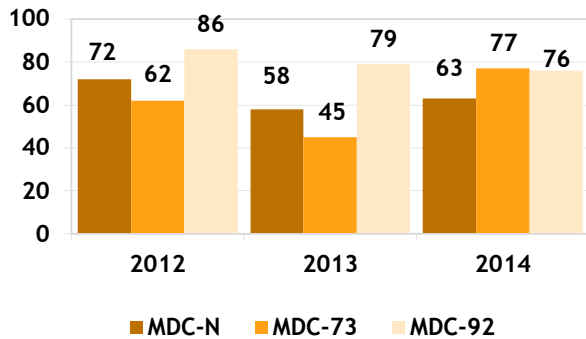
*Data from inception to 12/31/2014.



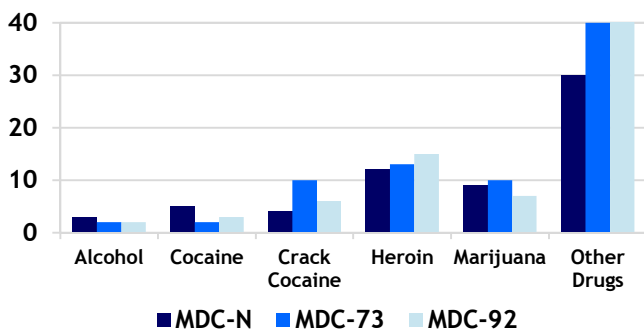
*MDC - Referrals (Calendar Year)



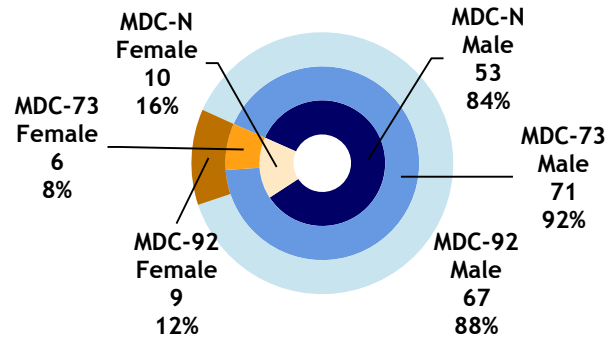
*MDC - Pleas (Calendar Year)



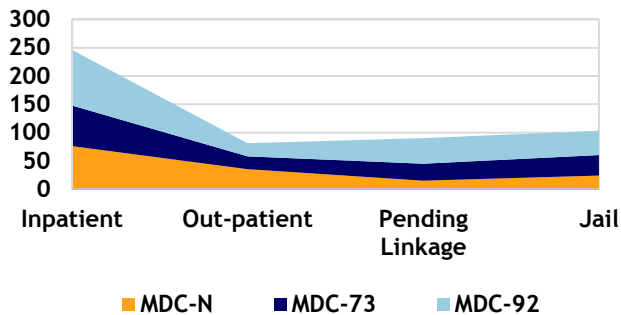
*MDC - Participant's Drug of Choice



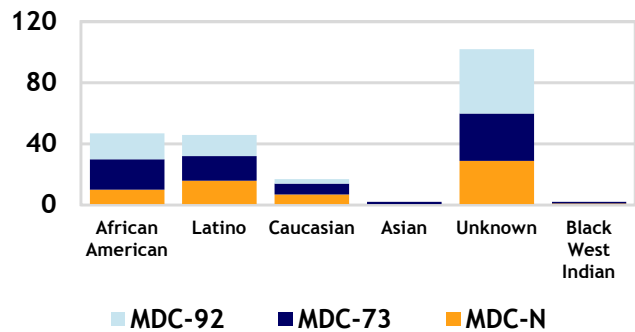
*MDC - Gender of Participants



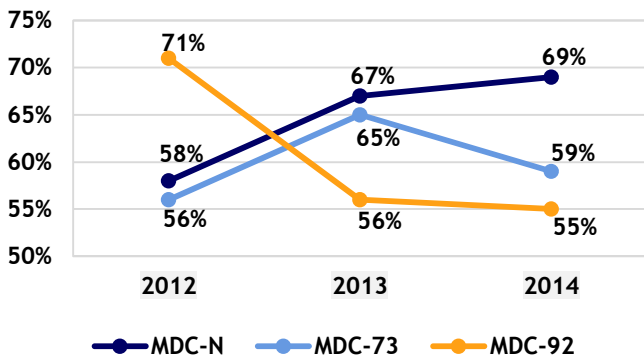
*MDC - Treatment Modalities of Participants



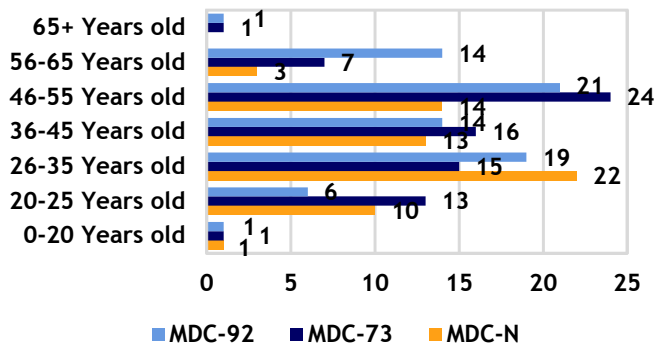
*MDC - Race/Ethnicity of Participants



*MDC - Retention Rates (6 Months)



*MDC - Age of Participants



*Figures specify the number of participants while percentages illustrate participants' proportions in relation to the whole.

†Treatment Modalities data will not total 2014 pleas, but are snapshots on or near 12/31/14 UTA data entry.



Queens Misdemeanor Treatment Court

Program Description

Staff

| | |
|---------------------|------------------|
| Presiding Judge | Hon. Toko Serita |
| Project Director II | Naima Aiken |
| Resource Coord. III | Lisa Babb |
| Case Manager I | Jose Figueroa |
| | Diana George |
| TASC Case Manager | Brian Delaney |

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 suggests that 34% have pled to a non-drug misdemeanor with 33% pleading to a misdemeanor drug offense.

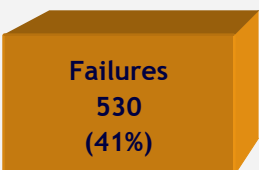
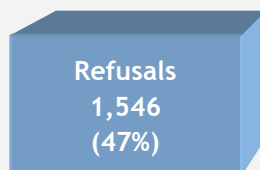
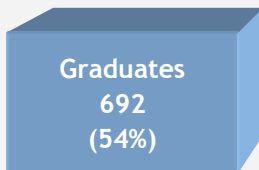
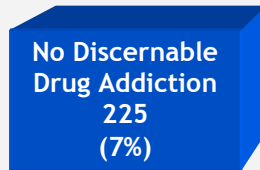
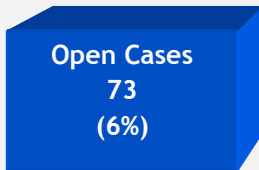
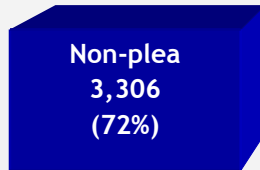
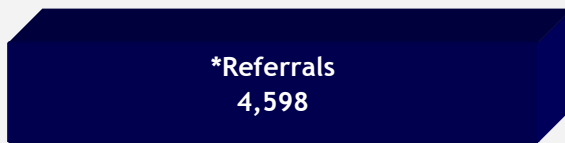
Since its inception in 2002, 4,598 defendants have been referred to QMTc for clinical assessment, of which 1,292 (28%) have taken a plea and opted for treatment. Of the 3,306 who did not take the plea, 1,546 (47%) refused to participate. Of those who were accepted by QMTc and agreed to participate, 692 (54%) graduated which the average length of treatment (based on graduation date) was twelve months, and 530 (41%) failed to complete treatment. Of the 530 that failed, 46% of the failures were involuntary, 35% of failures were voluntary and 19% were deemed inactive.

In calendar year 2014, QMTc made up 6% of all referrals for clinical assessment, and 10% of all pleas taken, in the Drug Treatment Court Initiative.

That same year, 316 defendants were referred to QMTc for clinical assessment, of which 70 (22%) took a plea and opted for treatment. Of the 70 who agreed to participate, 73% were males, 27% were African-Americans, 29% were within the 20-35 age group and Alcohol was the primary drug of choice.

Forty-nine (49) QMTc participants graduated and 21 failed in 2014. Of the 21 that failed, 52% of the failures were involuntary, 43% of failures were voluntary and 5% were deemed inactive.

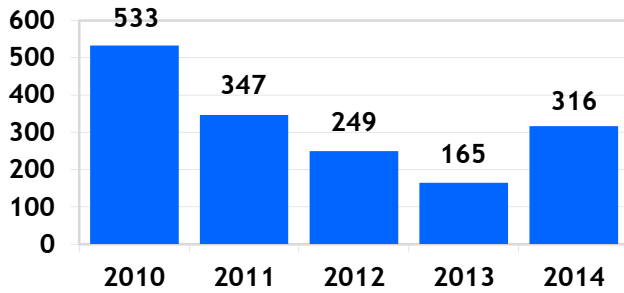
On average the QMTc daily caseload for 2014 was 73 cases. Each case manager typically monitored approximately 20-30 cases.



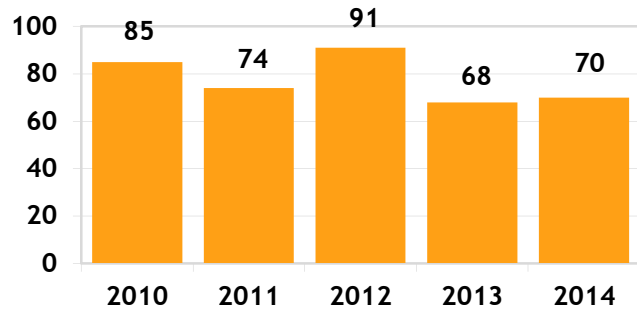
*Data from inception to 12/31/2014.



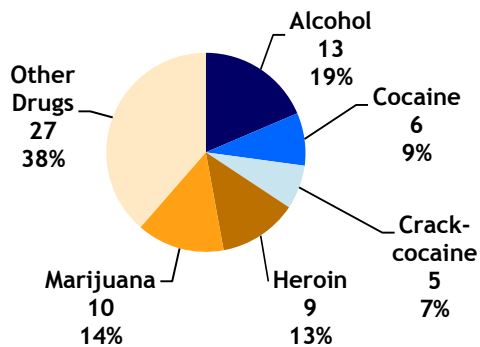
***QMTTC - Referrals (Calendar Year)**



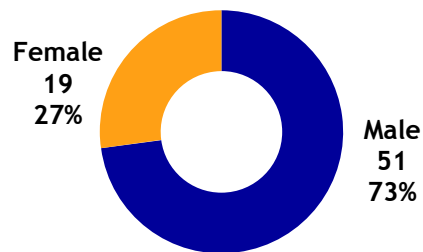
***QMTTC - Referrals and Pleas (Calendar Year)**



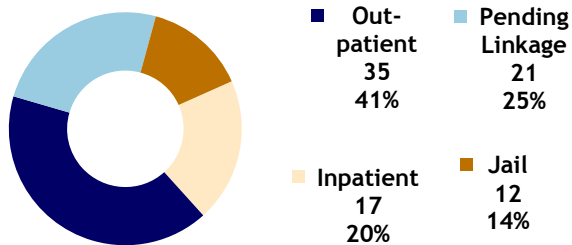
***QMTTC - Participant's Drug of Choice**



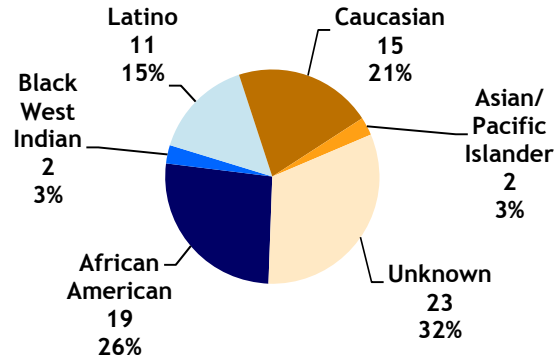
***QMTTC - Gender of Participants**



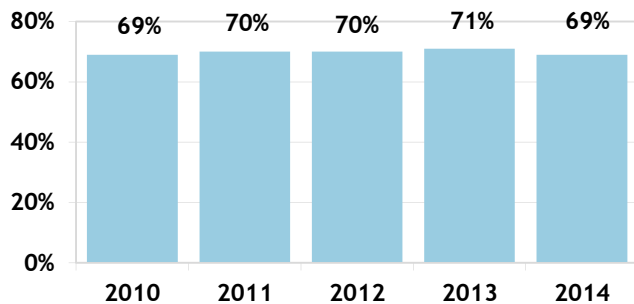
***†QMTTC - Treatment Modalities of Participants**



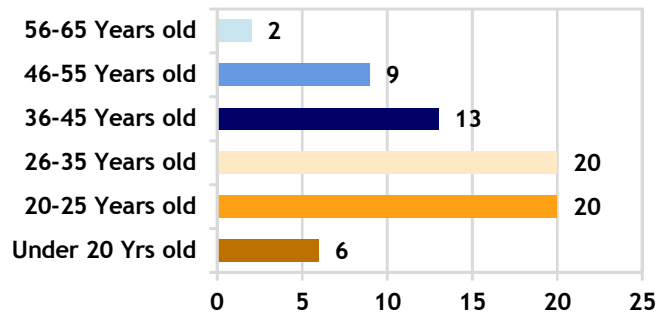
***QMTTC - Race/Ethnicity of Participants**



***QMTTC - Retention Rates (6 Months)**



***QMTTC - Age of Participants**



*Figures specify the number of participants while percentages illustrate participants' proportions in relation to the whole.

†Treatment Modalities data will not total 2014 pleas, but are snapshots on or near 12/31/14 UTA data entry.



Staten Island Treatment Court & Staten Island

Program Description

Staff

| | |
|---------------------|-------------------------------|
| Presiding Judge | Hon. Alan Meyer |
| Project Director II | Laverne Chin |
| Case Manager I | Sandra Thompson Lucy Perez |

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.

Arrestment charges differ for SITC participants, with **23%** charged with a felony drug offense and **12%** 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 **46%** charged with a misdemeanor drug offense and **19%** charged with misdemeanor non-drug offenses.

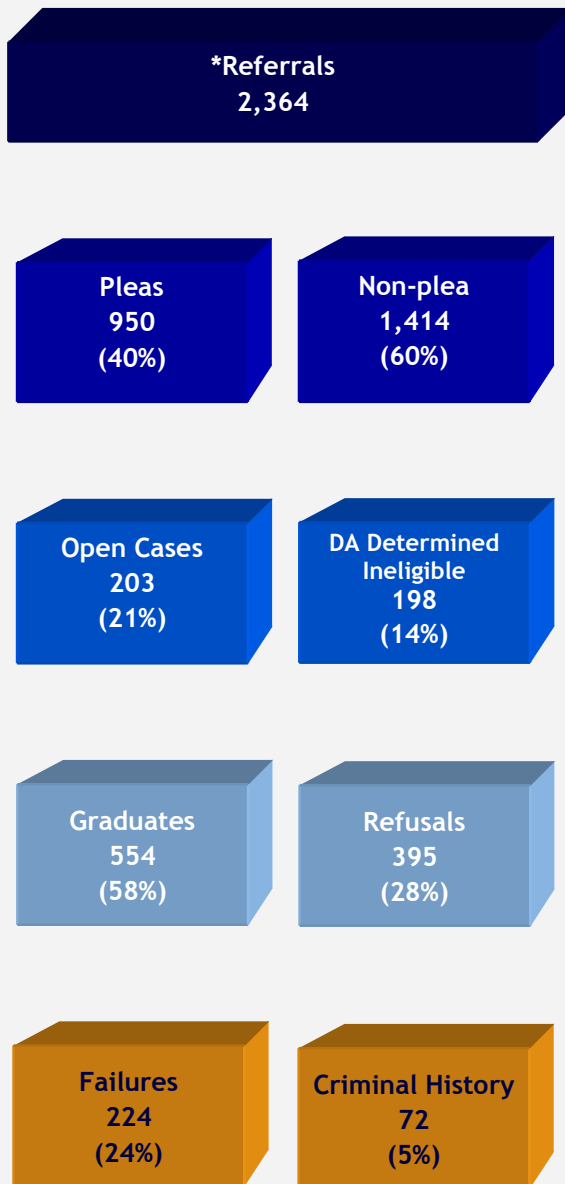
Since opening its doors in 2002, **2,364** defendants have been referred to SITC for clinical assessment, of which **950 (40%)** have taken a plea and opted for treatment. Of the **1,414** who did not take the plea, **395 (28%)** refused to participate. Of those who were accepted by SITC and agreed to participate, **554 (58%)** graduated of which the average length of treatment (based on graduation date) was twelve to eighteen months, and **224 (24%)** failed to complete treatment. Of the **224** that failed, **32%** of the failures were involuntary, **40%** of failures were voluntary and **28%** were deemed inactive.

In calendar year 2014, SITC made up **8%** of all referrals for clinical assessment, and **22%** of all pleas taken, in the Drug Treatment Court Initiative.

That same year, **434** defendants were referred to SITC for clinical assessment, of which **155 (36%)** took a plea and opted for treatment. Of the **155** who agreed to participate, over **75%** were males, **80%** were Caucasians, **42%** were within the **20-25** age group and Heroin was primary drug of choice.

Seventy-seven (77) SITC participants graduated and **27** failed in 2014. Of the **27** that failed, **37%** of the failures were involuntary, **41%** of failures were voluntary and **22%** were deemed inactive.

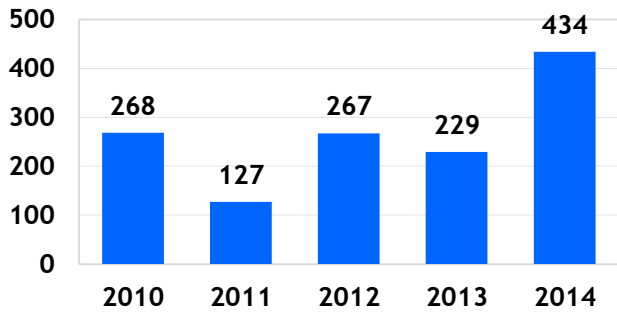
On average the SITC daily caseload for 2014 was **203** cases. Each case manager typically monitored approximately **65-70** cases.



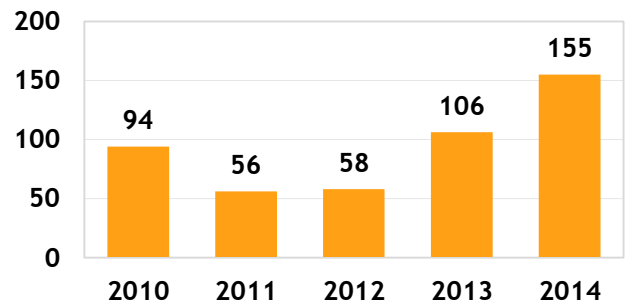
*Data from inception to 12/31/2014.



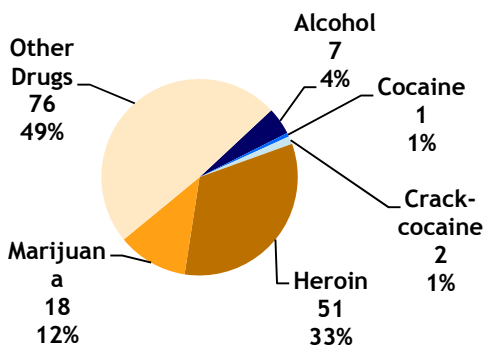
***SITC - Referrals (Calendar Year)**



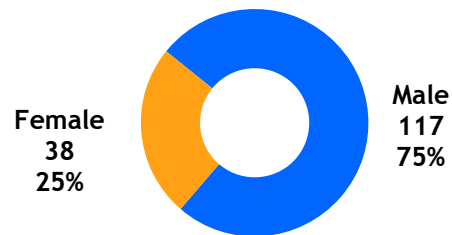
***SITC - Pleas (Calendar Year)**



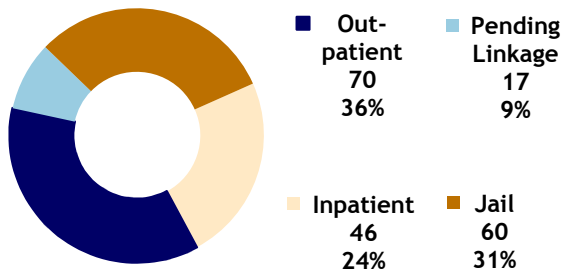
***SITC - Participant's Drug of Choice**



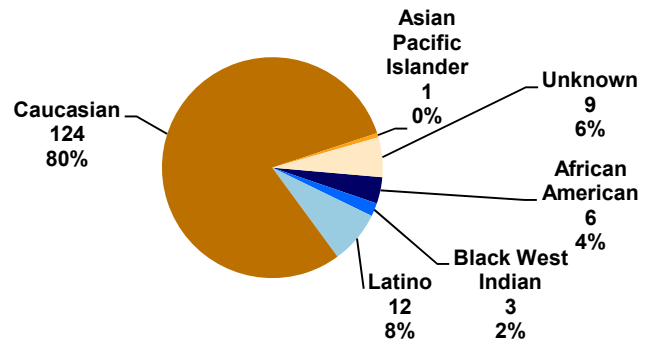
***SITC - Gender of Participants**



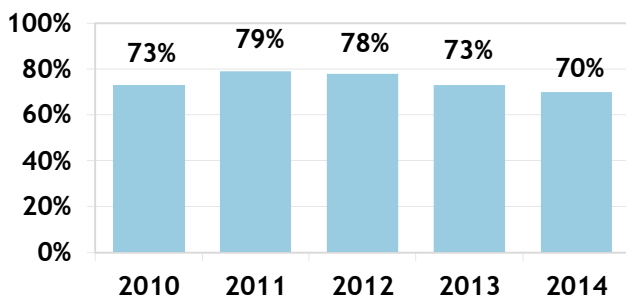
***[†]SITC - Treatment Modalities of Participants**



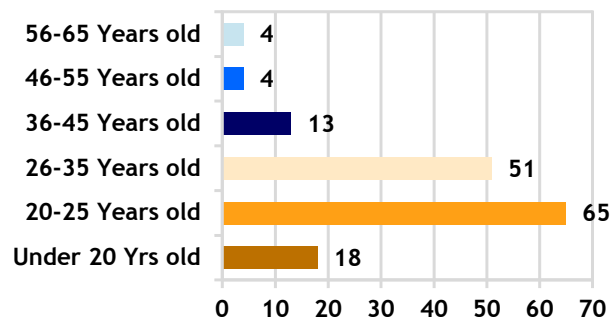
***SITC - Race/Ethnicity of Participants**



***SITC - Retention Rates (6 Months)**



***SITC - Age of Participants**



*Figures specify the number of participants while percentages illustrate participants' proportions in relation to the whole.

[†]Treatment Modalities data will not total 2014 pleas, but are snapshots on or near 12/31/14 UTA data entry.



2014 STATISTICAL SUMMARY

| | MBTC | MMTC | MTC | QMTC | SITC | STEP | MDC-N | MDC-73 | MDC-92 | TOTALS |
|--|------------|-----------|----------|-----------|------------|------------|-----------|-----------|-----------|------------|
| ARRAIGNMENT CHARGE | | | | | | | | | | |
| MISD DRUG | 61 | 7 | | 23 | 71 | | | 1 | | 163 |
| MISD NON-DRUG | 44 | 9 | | 24 | 30 | 3 | 1 | | | 111 |
| FELONY DRUG | | | | 9 | 35 | 30 | 61 | 49 | 56 | 240 |
| FELONY NON-DRUG | 1 | 1 | | 1 | 19 | 75 | | 27 | 20 | 144 |
| VIOLATION DRUG | | | | 4 | | | | | | 4 |
| MISSING | 13 | | | 9 | | 8 | 1 | | | 31 |
| | 119 | 17 | 0 | 70 | 155 | 116 | 63 | 77 | 76 | 693 |
| GEN- DER | | | | | | | | | | |
| MALES | 86 | 14 | | 51 | 117 | 100 | 53 | 71 | 67 | 559 |
| FEMALES | 33 | 3 | | 19 | 38 | 16 | 10 | 6 | 9 | 134 |
| | 119 | 17 | 0 | 70 | 155 | 116 | 63 | 77 | 76 | 693 |
| AGE | | | | | | | | | | |
| Under 20 | 3 | 1 | | 6 | 18 | 14 | 1 | 1 | 1 | 45 |
| 20-25 | 15 | 1 | | 20 | 65 | 29 | 10 | 13 | 6 | 159 |
| 26-35 | 23 | 2 | | 20 | 51 | 39 | 22 | 15 | 19 | 191 |
| 36-45 | 28 | 5 | | 13 | 13 | 20 | 13 | 16 | 14 | 122 |
| 46-55 | 38 | 7 | | 9 | 4 | 12 | 14 | 24 | 21 | 129 |
| 56-65 | 11 | 1 | | 2 | 4 | 2 | 3 | 7 | 14 | 44 |
| 65+ | 1 | | | | | | | 1 | 1 | 3 |
| | 119 | 17 | 0 | 70 | 155 | 116 | 63 | 77 | 76 | 693 |
| RACE | | | | | | | | | | |
| AFRICAN AMERICAN | 38 | 4 | | 19 | 6 | 29 | 10 | 20 | 17 | 143 |
| BLACK WEST INDIAN | 3 | | | 2 | 3 | 4 | 1 | 1 | | 14 |
| LATINO | 26 | 1 | | 11 | 12 | 18 | 16 | 16 | 14 | 114 |
| CAUCASIAN | 18 | 2 | | 15 | 124 | 10 | 7 | 7 | 3 | 186 |
| ASIAN/PACIFIC ISLANDER | | | | 2 | 1 | | | 2 | | 5 |
| OTHER | | | | | 2 | 55 | | | | 57 |
| MISSING | 34 | 10 | | 21 | 7 | | 29 | 31 | 42 | 174 |
| | 119 | 17 | 0 | 70 | 155 | 116 | 63 | 77 | 76 | 693 |
| DRUG OF CHOICE | | | | | | | | | | |
| ALCOHOL | 4 | 1 | | 13 | 7 | 10 | 3 | 2 | 2 | 42 |
| COCAINE | 8 | | | 6 | 1 | 1 | 5 | 2 | 3 | 26 |
| CRACK | 22 | 4 | | 5 | 2 | 3 | 4 | 10 | 6 | 56 |
| HEROIN | 36 | 4 | | 9 | 51 | 12 | 12 | 13 | 15 | 152 |
| MARIJUANA | 12 | | | 10 | 18 | 31 | 9 | 10 | 7 | 97 |
| OTHER | 2 | | | 5 | 70 | 6 | 3 | 5 | 2 | 93 |
| MISSING | 35 | 8 | | 22 | 6 | 53 | 27 | 35 | 41 | 227 |
| | 119 | 17 | 0 | 70 | 155 | 116 | 63 | 77 | 76 | 693 |
| 1/1/2014 - 12/31/2014 | | | | | | | | | | |
| REFERRALS | 2213 | 97 | | 316 | 434 | 1532 | 208 | 282 | 354 | 5436 |
| PLEAS | 119 | 17 | | 70 | 155 | 116 | 63 | 77 | 76 | 693 |
| GRADS | 55 | 9 | | 49 | 77 | 63 | 58 | 27 | | 338 |
| FAILED | 75 | 12 | | 21 | 27 | 50 | 23 | 57 | 66 | 331 |
| -VOLUNTARY | 19 | 8 | | 9 | 11 | 3 | 4 | 7 | 12 | 73 |
| -INVOLUNTARY | 36 | | | 11 | 10 | 41 | 15 | 42 | 41 | 196 |
| -INACTIVITY (DEATH, WARRANTED, DA INELIG.) | 20 | 4 | | 1 | 6 | 6 | 4 | 8 | 13 | 62 |
| INCEPTION | | | | | | | | | | |
| REFERRALS | 24348 | 3376 | 1634 | 4598 | 2364 | 17525 | 725 | 806 | 1225 | 56601 |
| PLEAS | 2230 | 560 | 1238 | 1292 | 950 | 2088 | 375 | 363 | 375 | 9471 |
| REFUSED | 11816 | 1696 | 85 | 1546 | 395 | 5219 | 95 | 113 | 106 | 21071 |
| CRIMINAL HISTORY | 322 | 442 | 21 | 196 | 72 | 1403 | 12 | 21 | 42 | 2531 |
| GRADS | 1072 | 148 | 609 | 685 | 554 | 1422 | 144 | 86 | 98 | 4818 |
| FAILED | 1498 | 369 | 644 | 530 | 224 | 938 | 98 | 155 | 202 | 4658 |
| -VOLUNTARY | 482 | 111 | 119 | 187 | 89 | 104 | 15 | 28 | 44 | 1179 |
| -INVOLUNTARY | 721 | 209 | 485 | 244 | 72 | 620 | 73 | 110 | 134 | 2668 |
| -INACTIVITY (DEATH, WARRANTED, DA INELIG.) | 295 | 49 | 40 | 99 | 63 | 214 | 10 | 17 | 24 | 811 |
| CASELOAD (End of Year Snapshot) | | | | | | | | | | |
| | 144 | 10 | | 73 | 203 | 193 | 153 | 191 | 215 | 1182 |
| RETENTION RATES (%) | | | | | | | | | | |
| | 56 | 46 | | 69 | 70 | 67 | 69 | 59 | 55 | |
| GRADUATES (Since Inception) (%) | | | | | | | | | | |
| EMPLOYED FULL-TIME/ PART-TIME | 25 | 36 | 78 | 47 | 70 | 31 | 70 | 73 | 64 | |
| GOV'T ASSISTANCE | 78 | 54 | 35 | 66 | 26 | 33 | 33 | 35 | 43 | |
| MEDICAID | 89 | 72 | 37 | 79 | 49 | 82 | 49 | 49 | 52 | |
| IN SCHOOL | 37 | 30 | 40 | 32 | 35 | 66 | 23 | 17 | 16 | |
| VOCATIONAL TRAINING | 29 | 25 | 39 | 16 | 13 | 33 | 20 | 28 | 35 | |



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

CRIMWEBII

New York City Criminal Court Intranet

Friday, July 18, 2014 3:26:34 PM UCS is Moving from Groupwise to Outlook

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ADMINISTRATIVE JUDGE

JUDGES

CHIEF CLERK

COURTS

CENTRAL SERVICES

DATA RECORDING

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| 04/2014 | OD 2 (Pro - Just | |
| 04/2014 | UNSC Revis | |

HOME

CITY-WIDE INFO >>

ESPAÑOL

DRUG COURTS:

Brooklyn

FELONY (STEP)

MISDEMEANOR (MBTC)

Manhattan

FELONY (MTC)

MISDEMEANOR (MMTC)

Queens

MISDEMEANOR (QMTC)

Staten Island

FELONY (SITC)

• Midtown Community Court

• Manhattan Criminal Court

• Summons Department

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Benefits

NEW YORK CITY CRIMINAL COURT: DRUG COURT INITIATIVE

Welcome to NYC Drug Court

For non-Drug Court related matters, visit www.nycourts.gov or please call 1-800-COURTNY.

[View Drug Court Video](#)

(run time: 9.5 minutes, mpeg format - can be played in a variety of viewers - [Download QuickTime](#) | [Download RealPlayer](#))

[Text Transcript](#)

Welcome to the Drug Courts of New York City Criminal Court. Here you will find information on the nine drug courts. Criminal Court operates in Brooklyn, Manhattan, Queens and Staten Island. Drug courts are a partnership between the Court, prosecutors, law enforcement, defense bar and treatment and education providers. Each drug court places non-violent, drug-addicted offenders into treatment in an effort to break the cycle of drug abuse, addiction, crime and jail. While each drug court has the same goals and uses the same guiding principles, each one operates in its own unique way. These pages will give you information on individual

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Drug Court Graduates Corner

Drug Courts 2011 Annual Report

ANNOUNCEMENTS

5/26/14
Memorial Day
Offices Closed

7/4/14
Independence Day
Offices Closed

9/1/14
Labor Day
Offices Closed

10/13/14
Columbus Day
Offices Closed

11/4/14
Election Day
Offices Closed

11/11/14
Veterans Day
Offices Closed

You may access this report on Criminal Court's intranet site <http://crimweb> or at www.nycourts.gov/nycdrugcourt