

UPCOMING TRAININGS& CONFERENCES

A full list of NDAA's virtual learning sessions is available at ndaa.org/training-courses/.

NDAA's Mastering Masking Digital Course/ On Demand Training (CLE Available)

➤ ndaa.org/training/mastering-masking-2/

NDAA's Human Trafficking and the Impact on Commercial Driver's Licenses/On Demand Training

➤ ndaa.org/training/human-trafficking-and-the-impact-on-commercial-drivers-licenses/

NDAA's Prosecuting DUI Cases Online Course/ On Demand Training (CLE Available)

➤ ndaa.org/training/prosecuting-dui-cases/

NDAA's Investigation and Prosecution of Drug-Impaired Driving Cases Online Course/On Demand Training (CLE Available)

➤ ndaa.org/training/on-demand-learning-investigationand-prosecution-of-drug-impaired-driving-cases/

Anticipating & Rebutting Defenses (Live Webinar) May 9, 2024 @ 2:00-3:30 p.m. ET

Cross-Examination Course

May 13–15, 2024, Columbia, SC

RESOURCES

Impaired Driving Resources

➤ ndaa.org/programs/ntlc/

CDL-Related Resources

➤ ndaa.org/programs/ntlc/commercial-drivers-license/

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One Size Does Not Fit All

The Importance of Screening and Assessing to Determine Appropriate Interventions for Impaired Drivers

Julie Seitz, Project Director, All Rise Impaired Driving Solutions, Duluth, MN

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Impaired driving represents a complex problem, one that cannot solely be punished or incarcerated away. The characteristics of individuals involved in this habitual behavior show that fatal crashes involving impaired drivers often include higher blood alcohol concentration (BAC), are more likely to have prior impaired driving convictions and involve more than one impairing substance. These behaviors often point to an underlying symptom: addiction, resulting in high-risk/high-need individuals who pose a significant risk to public safety. Additionally, this population experiences a higher incidence of co-occurring mental health disorders. The complex problem of impaired driving requires a diverse solution, including

accountability and individualized treatment. Historically, the justice system has focused on accountability while downplaying or outright ignoring the treatment piece.

Substance use disorder (i.e., addiction) is a complex and multifaceted condition that uniquely affects individuals. Therefore, it remains essential to provide individualized treatment that addresses the specific needs of that individual. Screening and assessment are critical to determining the individual's risk level and treatment needs. To effect long-term change for this population, every individual who enters the system for impaired driving should be screened and/or assessed for co-occurring disorders to ensure that all behavioral health needs are identified and addressed.

Screening and assessment represent two essential processes with key differences, while serving a similar purpose. The primary purpose of screening focuses on identifying individuals who may be at risk or potentially have a substance use disorder. Screening instruments are brief, and the preliminary process seeks to determine if further assessment is needed; it does not provide a definitive diagnosis. Various professionals can conduct screenings in many settings, including the courts.

One example of innovative integration of screening with impaired drivers is a program in Duluth, MN. The Sixth Judicial District Court conducted a Screening, Brief Intervention, and Referral to Treatment (SBIRT) pilot project on all first-time DWI arrests. Partnering with the local Department of Human Services and a treatment center, all first- time DWI arrestees were referred at arraignment to meet with an SBIRT screening navigator for a validated screening. Results of the pilot determined that much like the national data for repeat impaired drivers, about 2/3 of those screened demonstrated low-risk for having a substance use disorder, and thus were offered a brief intervention and no further recommendations. The screening of approximately 1/3 found risky substance use and were referred for further clinical assessment. A recently completed five-year evaluation, the publication of which remains in production, shows promising results, including a reduction in recidivism, demonstrating the importance of early screening and intervention. If the screening uncovers potential problems, an assessment must be done to understand those problems fully.

The assessment gathers comprehensive information about substance use patterns, related behaviors, and problems. Completed by professionals with specialized training and qualifications, a comprehensive clinical assessment provides a diagnosis, which informs treatment planning. The evaluation involves utilizing validated tools to examine substance use history, co-occurring mental health disorders, biomedical conditions, continued use potential, recovery environment, and motivation to change.

In addition to comprehensive screening and assessment, addressing substance use and mental health disorders requires clinical placement that meets the individual's complex needs. Moving away from "one size fits all" models of care to an individualized approach recognizes the need to match treatment settings, service, and intensity based on the individual's clinical needs. Substance use disorder occurs on a spectrum; treatment intervention necessitates a continuum of care.

Effective treatment recognizes the Transtheoretical Stages of Change model (TTM). The TTM framework, developed by James Prochaska and Carlo DiClemente, describes the process individuals experience when making behavior changes. The six-stage model recognizes that change is not a linear process but a series of individual stages. For treatment to be effective, it is essential to tailor the interventions to meet the individuals where they are in their change process.

The high-risk, high-need impaired driving population has demonstrated a high degree of compliancedriven change. In other words, with the discontinuation of supervision and accountability of probation or programming, individuals return to use/problem behaviors. Adherence, on the other hand, lies in finding what intrinsically motivates the client to change, meeting them where they are at in their stage of change, and creating a meaningful and lasting change plan for the client, something they will continue to employ after the programming ends. Moving from program and time-driven treatment planning to individual outcome-driving treatment planning effectively aids in the process of change.

Time-driven treatment frequently represents an arbitrary practice, and the requirements refer to criteria or quidelines lacking in evidence-based practices. The requirements of time-driven treatment often promote subjectivity and lack validity resulting in treatment agencies and courts employing program-driven care (a certain number of hours, modules, etc.). This approach fails to consider the complexity of substance use disorder and the need for comprehensive assessments to determine clinical needs and placement.

The research supports that, while treatment works, not all interventions work for everyone. One of the best predictors of positive outcomes in treatment remains a solid therapeutic alliance, the collaborative relationship between a therapist or treatment provider and the client. Alliance factors promote client engagement, collaboration, empowerment, and treatment adherence. When clients feel heard, understood, and agree on goals, they are more likely to adhere to their treatment plans. To understand if a therapeutic alliance exists, using validated tools is vital, as relying on the therapist's interpretation alone often demonstrates bias. Several methods can be employed when measuring therapeutic alliance, varying from client self-report to therapistrated measures. While no single tool captures the complexity of substance use disorders and therapeutic alliance, effective treatment must integrate these practices when working with all individuals in clinical practice.

Historically, treatment for substance use disorders stemmed from the acute care model. In other words, periods of brief intervention followed by cessation of services. The traditional model may work well in an emergency room although impractical for substance use and mental health disorders. Substance use disorders represent chronic illnesses like diabetes or hypertension. Effective treatment requires long-term involvement, continued care, regular check-ups, and linkage to community resources.

The success of the justice system focusing on the accountability piece for impaired drivers fails to recognize the need adapt the system to those who present with treatment needs, a necessity if the systemic goal adjusts to a genuine desire to make an impact on all segments of the impaired driving population. Treatment reform aims to decrease barriers to persons seeking substance use disorder treatment, ensuring that people have timely access to the continuum of needed services. Good outcomes depend on individualized treatment plans and adequate treatment length. Said differently, outcomes improve when an individual participates in the right treatment for the right amount of time.



All Rise Expands Treatment Court **Model To Lead Comprehensive Justice** System Reform

NADCP Rebrand Reflects the Organization's Expansion of Programs and Partnerships Across Every Intercept of the Justice System

By Christopher Deutsch, All Rise Director of Communications

Editor's note: This article was originally published in the Fall 2023 issue of the Highway to Justice newsletter. It is reprinted here with the permission of the ABA Judicial Division and the author.

After nearly 30 years of leading the treatment court movement, the National Association of Drug Court Professionals (NADCP) announced in June that the organization has rebranded as All Rise to better reflect its impact across the justice system. This transition represents one of the most important moments in the organization's history and reinforces All Rise's commitment to expand evidence-based and promising interventions for people impacted by substance use and mental health disorders across every intercept point from first contact with law enforcement, to pretrial, to probation, and to reentry.

All Rise works in every U.S. state and territory and in countries throughout the world. Since 1994, the organization has trained over 800,000 justice and treatment professionals and helped lead the establishment of over 4,000 treatment courts across the United States, impacting millions of lives. Research has proven that a more humane, evidence-based approach to substance use and mental health disorders is more effective and less expensive than traditional sentencing.

"With three decades of experience in building, sustaining, and expanding the treatment court movement, All Rise is uniquely positioned to help lead the next generation of justice reform," said the Hon. Karen Freeman-Wilson (ret.), outgoing Chair of the Board of Directors, All Rise. "Treatment courts prove that the justice system can, and should, play a role in treating substance use and mental health disorders, repairing lives, reuniting families, and helping communities thrive. I'm so proud of all we have accomplished over the last 30 years, and excited for all we will do together as All Rise."

All Rise also announced a new structure to execute its vision to impact every intercept point of the justice system. Going forward, the organization will operate through four divisions:

- The Treatment Court Institute leads training, technical assistance, and research dissemination for more than 4,000 treatment court programs in the United States. Formerly known as the National Drug Court Institute, the Institute's expertise spans all treatment court models and ensures that treatment courts adopt and retain evidence-based practices and best practice standards.
- **Impaired Driving Solutions** leads a comprehensive approach to solve one of the greatest threats to public safety in the U.S. by implementing evidence-based and promising legal and clinical interventions. Formerly known as the National Center for DWI Courts, Impaired Driving Solutions provides cutting-edge training and targeted support to communities to implement, expand, and improve impaired driving treatment court programs (i.e., DWI courts) and other interventions.
- **Justice for Vets** transforms the way the justice system identifies, assesses, and treats our veterans by ensuring that no veteran is left behind. Justice for Vets provides training and technical assistance to help communities bring together local, state, and federal resources to directly serve veterans involved in the justice system due to substance use and mental health disorders.

All Rise Expands Treatment Court Model To Lead Comprehensive Justice System Reform

The Center for Advancing Justice serves as an incubator for emerging justice system innovations, leads strategic partnerships, and works internationally. A new division for All Rise, the Center for Advancing Justice identifies, assesses, and implements programs at every intercept of the justice system, with a focus on evidence-based and promising interventions for people impacted by substance use and mental health disorders.

"All Rise has built the most diverse coalition of public health and public safety professionals and broad partnerships across the entire justice system," said Carson Fox, Chief Executive Officer, All Rise. "Our vision is to continue growing treatment courts, while applying the same blueprint of collaboration and individualized response to other crucial intercepts. We will work every day to ensure people impacted by substance use and mental health disorders receive treatment and support, no matter where in the system they find themselves."

The new All Rise brand was on display in Houston, Texas from June 26–29 during the organization's annual conference, RISE. RISE23 convened more than 7,000 public health and public safety professionals—from judges and attorneys to treatment providers and case managers to law enforcement and probation officers. With over 250 sessions and 350 speakers, RISE is now considered the preeminent conference on addiction, mental health, and justice reform.

While RISE23 reflected All Rise's continued focus on treatment courts, sessions explored other critical issues related to addiction and recovery. General sessions included an examination of justice interventions for people with substance use disorder from prearrest to reentry, supporting justice-involved people who are unhoused, and including children and families in the recovery process.

RISE24 will be held in Anaheim, California from May 22-25.

Writing in the Houston Chronicle, outgoing board chair Hon. (ret.) Karen Freeman-Wilson captured the transition to All Rise and the future of the organization's work:

"When the justice system responds to one of the most pressing issues of our time, when communities embrace a more human approach, and when just one person rises out of addiction and finds recovery, we All Rise."

About All Rise

All Rise is the leading training, membership, and advocacy organization for advancing justice system responses to individuals with substance use and mental health disorders. All Rise impacts every stage of the justice system, from first contact with law enforcement to corrections and reentry, and works with public health leaders to improve treatment outcomes for justice-involved individuals. Founded as the National Association of Drug Court Professionals (NADCP) in 1994, All Rise has been at the forefront of justice system transformation for nearly three decades. Through its four divisions—the Treatment Court Institute, Impaired Driving Solutions, Justice for Vets, and the Center for Advancing Justice—All Rise provides training and technical assistance at the local and national level, advocates for federal and state funding, and collaborates with public and private entities. All Rise works in every U.S. state and territory and in countries throughout the world. For more information, visit www.allrise.org.



NDAA Vacancy Announcement

Staff Attorney, National Traffic Law Center

Are you an attorney with one to three years of progressively responsible experience, preferably in the field of traffic law prosecution? The National District Attorneys Association (NDAA) is hiring for the position of Staff Attorney in the National Traffic Law Center.

The Staff Attorney performs a variety of full performance level, professional duties related to planning, developing and delivering comprehensive and intensive technical assistance and training related to grant targeted prosecutorial specializations in the field of traffic safety. This position is eligible for fully remote work.

For additional information and details about the application process, please visit the NDAA website here.

Please note: The closing date for applications is Monday, April 29, 2024.

NDAA is the oldest and largest national, nonpartisan organization representing state and local prosecutors in the country. Formed in 1950, NDAA has more than 5,500 members and our mission is to be the voice of America's prosecutors and to support their efforts to protect the rights and safety of the people by providing our members with the knowledge, skills, and support they need to ensure justice is attained. NDAA is located in Arlington, VA near the Crystal City Metrorail. NDAA is an equal opportunity employer.