I. BACKGROUND

In July 2007, the Maryland State Commission on Criminal Sentencing Policy (MSCCSP) created the Subcommittee on Sentencing Drug Offenders to examine sentencing options for Maryland’s drug offender population. Before making any recommendations to the Commission, the Subcommittee felt it was necessary to complete a statewide review on the availability of alternatives to incarceration. The Subcommittee decided to explore the types of corrections options programs available to drug offenders at sentencing in each county, including drug courts and other initiatives favoring treatment over incarceration. Additionally, the Subcommittee sought to identify the specific eligibility requirements for each corrections options program, including any disqualifiers or limitations including monetary fees.

In August 2008, plans were initiated to conduct a corrections options inventory similar in design to a broader corrections options inventory completed by the MSCCSP staff in 2006. For this inventory, the Subcommittee created a two-part survey that was distributed to twenty-four county circuit court administrative judges and twelve district court administrative judges. To increase awareness of the inventory project, members of the Subcommittee called the administrative judges near the date of distribution. The surveys, accompanied by an instructive cover letter, were mailed on November 25, 2008.

II. THE SURVEY: TWO INVENTORY INSTRUMENTS

The survey itself contained two inventory instruments. The first instrument was intended to capture which program types are available in a particular county and how many types of programs that county has available. (Appendix 1A provides a copy of this survey instrument). This instrument provided a summary list of sentencing alternatives focusing on drug offenders. The reader was instructed to indicate all programs on the list that were available in the county, and to list any additional programs in the spaces provided.

The second instrument was an individual program questionnaire, which consisted of four questions asking for specific details about each program identified in a county. (Appendix 1B provides a copy of this survey instrument). Space was provided at the top of the page for the program’s title, and the contact information for the program’s coordinator or administrator. The first question was comprised of two parts. Part 1(a) asked for a list of the program’s eligibility requirements, and part 1(b) asked whether the program has any automatic “disqualifiers.” Question two asked for a brief description of the program’s target population (i.e. non-violent long time drug abusers vs. first time offenders). Third, the survey asked whether there were monetary requirements for the program. Finally, the survey inquired about whether any data had been collected to measure the program’s effectiveness.

During the next several months, MSCCSP staff received responses from nearly every jurisdiction. The majority of reply letters contained detailed answers to the individual program...
questionnaire inquiries. Many jurisdictions included additional information for specific programs available in their county. Every jurisdiction provided up-to-date contact information for program coordinators and administrators. The remainder of this report is based primarily on information submitted on these two survey instruments.

III. SUMMARY OF FINDINGS

Corrections options are administered at both the state and county level. Statewide, supervised probation administered by DPP is the primary sentencing alternative to incarceration. Generally, offenders will be sentenced to probation conditioned on their enrollment in an outpatient treatment and/or education program. At the county level, drug courts are the most prevalent alternative to incarceration. Corrections options aside from probation and drug court are less common. A handful of counties have additional corrections options, including High Intensity Drug Trafficking Area, graduated sanctions, Felony Drug Diversion Initiative, and other residential and outpatient programs. A detailed description of specific corrections options programs/types is provided in Appendix 2.

Eighteen jurisdictions noted having additional corrections options programs in addition to those listed on the questionnaire. Nearly all of the additional programs reported were privately owned residential or outpatient drug treatment facilities. Every private treatment program reported receives state funding. Many jurisdictions noted that their county’s health department provided outpatient treatment services. Two counties, Calvert and Wicomico, listed jail based treatment programs as an additional residential program.

A. The Primary Alternative to Incarceration Statewide is Probation with Drug Treatment Condition

Supervised probation is the primary alternative to incarceration for drug offenders and other non-violent criminal defendants. This option is available statewide through the services provided by the DPP. In general, first time drug offenders are sentenced to a period of probation with a special condition requiring the defendant to enroll in an outpatient drug treatment program or substance abuse education course. In cases where the offender is already enrolled in a treatment program at the time of sentencing, the court will usually require successful completion of all program requirements within a certain time frame before the probation ends. Although uncommon, a court may also sentence a drug offender to probation conditional upon the completion of a residential treatment program. These cases arise when the defendant can make a showing that he or she has secured a bed at a private treatment facility. The judge retains the discretion to sentence the defendant to incarceration if he or she concludes that the prearranged inpatient treatment plan is not an appropriate alternative.

In addition to providing traditional criminal supervision, DPP also offers intensive supervision services to individuals it determines eligible, and oversees the Drinking Driver Monitor Program (DDMP) for DUI/DWI offenders. DPP field offices are located in all

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1 DPP also administers the Correctional Options Program (COP) available in Baltimore City and Baltimore, Anne Arundel, Charles, Harford, Prince George’s, and Wicomico Counties. Although the COP is primarily targeted at the drug offender population, assessment for the program occurs after the offender has already been sentenced to incarceration. Offenders are evaluated by their Department of Corrections (DOC) case manager in determining eligibility.
Although most counties have only one field office, some counties have additional reporting centers designated for DDMP participants. Where a jurisdiction has only one DPP field location, that office serves as both the criminal supervision reporting center and a meeting place for DDMP group participants and their supervisors.

B. **Drug Courts are the Most Prevalent County Operated Corrections Options Program**

While supervised probation is the most common sentencing alternative for drug offenders in Maryland, data collected from the Corrections Options Inventory confirmed that drug treatment courts (DTCs) are the most prominent sentencing alternative available to drug offenders at the county level. In Maryland, there are five types of drug treatment courts: (1) Adult Circuit Drug Courts; (2) Juvenile Drug Courts; (3) Adult District Drug Courts; (4) DUI/DWI Courts; and (5) Family Dependency Courts. For a complete description of drug court types, see Appendix 2.

Nearly every county in Maryland has at least one operating drug treatment court program. Present in more than half of the counties (including Baltimore City), Juvenile Drug Courts are the most prevalent drug treatment program type. Adult Circuit Drug Courts are the second most popular program type. As both of these programs types operate under the counties’ circuit courts, it is worth noting that where a county only has one operating drug court it is either a juvenile or adult circuit court program. For example, Washington, Caroline and Charles counties only have juvenile drug court programs; Carroll, Frederick and Cecil counties currently only have adult circuit drug court programs available.

At the district court level, there are currently nine adult drug treatment courts in operation. Of the counties that offer adult drug court, three also offer DUI/DWI court programs. However, it should be noted that the three DUI/DWI court programs do not operate independently from the adult district court program. DUI/DWI court programs are offered through the district court in Howard, Harford and Anne Arundel counties.

Table 1 summarizes Maryland’s available corrections options and Table 2 provides a breakdown of drug court availability at the county, regional, and state levels.

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2 See [Division of Parole and Probation Field Offices/Drinking Driver Monitor Offices](http://dpscs.maryland.gov/locations/dpp_offices.shtml), DPSCS Website, 2006. Providing a complete list of field office locations and contact numbers in each county.

3 This conclusion excludes DWI Monitor, Intensive Supervision and Health General (HG) § 8-505/507 commitment, as these options are available statewide.

4 Allegany, Garrett, Kent and Queen Anne’s counties do not have any operating drug courts at the present time. According to the Office of Crime Control and Prevention’s March 2008 map, Allegany County was in the planning stages of developing a drug court program but there is no approximate start date of operation at the present time.
### TABLE 1: AVAILABILITY OF ALTERNATIVES TO INCARCERATION BY COUNTY

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* DPP provided service.
* Provided statewide by statute.

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#### Prevalence of Drug Courts by County/Region

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*Family Dependency Court did not appear as an option on the first inventory instrument checklist. See Appendix 2 for a complete description of this DTC program type.*
IV. INDIVIDUAL PROGRAM DETAILS

The following is a summary of the most common responses to the five questions asked in the individual program questionnaire. Although some jurisdictions define their criteria in more specific terms, the majority of the programs possess a standard set of eligibility requirements and disqualifiers with little variation. Although the target population question (Question 2 in Appendix 1-B) called for a more subjective response, the reported answers seldom expanded upon what had already been listed as eligibility requirements or disqualifiers.

A. Standard Eligibility Requirements

There was considerable variation among all the corrections options requirements and disqualifiers, but some criteria appeared to be universal. The following list represents a set of “standard criteria” for corrections options for the drug offender population:

- **The offender must be non-violent.** Most programs used the offender’s prior record to determine whether the offender was “non-violent.” Programs varied on how much time should pass after an offender’s last violent offense for he or she to be eligible for treatment. For example, some programs require ten years, while others may only require five years. Although less common, some programs differentiated between violent offenses in determining eligibility. For instance, an offender’s previous conviction for a sexual assault offense was frequently reported as an automatic disqualifier. Many programs required that the offender have no prior violent crime convictions, but did not provide any criteria in determining whether the offender is “nonviolent.”

  Exceptions – the following corrections options programs do not require the individual to be nonviolent to qualify for treatment:

  - Patuxent Institution
  - Washington/Baltimore HIDTA funded programs
  - HG, § 8-505/8-507 commitments

- **The offender must be a resident of the county in which the offense was committed and the corrections options program is located.** Residency is a standard prerequisite to all corrections options programs. However, in less populated regions such as the lower Eastern Shore, the offender need only reside in one of the “regional counties.” For example, the judiciary may order or refer offenders to ADAA (Alcohol and Drug Abuse Administration) funded treatment centers such as Warwick Manor and Hudson Center located in Salisbury, which accept residents of Wicomico, Dorchester, Worcester, and Somerset counties.

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5 For purposes of this section “corrections options” refers to all programs contained in the checklist on the first survey instrument, which included: Adult District Drug Court, Adult Circuit Drug Court, Juvenile Drug Court, HIDTA, and the Felony Diversion Initiative (FDI).
The offender must be “assessed as a substance abuser.” Although not explicitly mentioned as an eligibility requirement in all corrections options programs, the majority of individual programs reported that the offender must undergo some sort of psychiatric and/or psychological evaluation by a mental health professional in order to be eligible to participate in the program. Assessments are usually conducted by a mental health specialist from the Department of Health and Mental Hygiene (DHMH) or a court appointed psychiatrist or clinical psychologist.

**Exceptions** – the following corrections options programs do not require the individual to undergo a psychiatric and/or psychological evaluation to be eligible:

- DDMP
- Howard County DWI/DUI component, Adult District DTC
- Anne Arundel DWI/DUI component, Adult District DTC
- Harford County DWI/DUI Court program

## B. Standard Disqualifiers

Standard disqualifiers include the following:

- **An offender is disqualified for participation in corrections options if he or she is a drug dealer.** Several corrections options programs disqualify individuals who are predominantly drug dealers rather than drug users. Montgomery County Adult Circuit Drug Court, Montgomery County Juvenile Drug Court, and Worcester County Adult Circuit Drug Court exclude drug dealers without substance abuse problems. Charles County Juvenile Drug Court, St. Mary’s County Juvenile Drug Court, Wicomico County’s residential substance abuse treatment program, and Talbot County Juvenile Drug Court disqualify “drug dealers” and/or “drug traffickers.” Washington County Juvenile Drug Court denies entry to offenders with “known gang involvement; known drug distribution/trafficking offenses.” Finally, Wicomico County Adult Circuit Drug Court excludes an offender if he or she is a “drug dealer for profit” or “affiliated with gang members.”

- **An offender who has any “legal impediments” at the time of sentencing is disqualified from participating in a corrections options program.** An offender is considered to have a “legal impediment” if he or she has pending cases in another jurisdiction, is currently on parole or has otherwise unfulfilled legal obligations in another jurisdiction. A legal impediment does not necessarily disqualify the offender from participating in a corrections options program at a later point in time after those obligations have been fulfilled. Although not an exception, an offender may undergo an evaluation under HG, § 8-505 prior to the resolution of any pending legal impediment. An offender may not be committed to treatment until all pending legal impediments are resolved.
C. Common Conditional or Circumstantial Requirements for Eligibility

In addition to the “standard criteria,” most corrections options programs have additional eligibility requirements regarding the circumstances surrounding the instant offense, rather than the characteristics of the offender. The following is a non-exhaustive list of reported eligibility requirements that are generally more “program specific” and suggestive of the program’s target population:

- The offender may only participate in the corrections options program pursuant to an ABA Plea Agreement or otherwise upon the recommendation of the State’s Attorney.

- The instant offense must be a violation of probation (VOP) based on a positive drug test.

- The instant offense must be drug possession or indirectly drug related.

- The instant offense must be a DUI/DWI. The following corrections options programs require that the instant offense is a DUI/DWI:
  - DDMP
  - Howard County DWI/DUI component, Adult District DTC
  - Anne Arundel DWI/DUI component, Adult District DTC
  - Harford County DWI/DUI Court program

D. Target Population

In general, the standard response to question two on the individual program questionnaire was a restatement of the program’s eligibility requirements and disqualifiers combined. The target population of all corrections options programs, including the Patuxent Institution and HG, § 8-505/507 commitments, is the non-violent repeat offender with a demonstrated history of substance abuse. Even juvenile drug court programs target those with a history of drug abuse involving them in the criminal justice system.

Some programs like DWI/DUI courts, which target drunken driving offenders, only consider repeat offenders as eligible. Corrections options programs such as those offered at the Patuxent Institution also target repeat offenders. Overall, corrections options programs seek to rehabilitate the same population of chronic offenders. Each program type aims to treat a certain subset of that population using various models that range from probation with regular drug testing to intensive inpatient residential substance abuse treatment.

E. Monetary Restrictions

Most corrections options programs were reported as not having monetary restrictions or limitations; however, these responses are misleading. Although the ADAA prohibits drug courts from denying services to individuals unable to pay for treatment, substance abuse

* This is always a requirement for participation in a DWI/DUI drug court program.
treatment service centers do require repayment. Fees are assessed based on a sliding scale established by DHMH. If an individual offender is committed to a private but state-funded treatment facility pursuant to HG, § 8-505/507 there is no monetary restriction. However, private facilities may require insurance reimbursement or payment of a fee based on a sliding scale if the offender is not indigent.

No specific fees were reported in association with DTCs. However, some programs such as Anne Arundel County’s Adult District Drug Court have set up a payment schedule based on a sliding fee scale. Offenders sentenced to supervised probation must pay a $45 monthly fee to cover supervision costs. Offenders participating in the DDMP program must pay an additional $40 per month to cover the costs of increased drug testing and alcohol consumption monitoring devices.

1. Drug Courts

No drug court program may deny participation to an individual unable to pay for case management and drug testing services. However, drug courts may require financially capable participants to pay a percentage of these costs based on a sliding fee scale. While DTC programs do not impose a financial burden upon those who cannot afford treatment, the privately operated treatment centers used by drug court participants require payment. Since DTCs create treatment plans based on the needs and characteristics of the individual participant, cost of treatment may vary depending on the substance of addiction (e.g. whether medical detoxification services are needed).

Facilities providing drug treatment services to drug court participants generally require repayment before a participant can graduate the program. These facilities may take private insurance, Medicaid, Medicare, etc. Many programs have repayment plans, requiring lower payment amounts to be made.

2. Probation with Condition to Complete Substance Abuse Program

As the primary alternative to incarceration, drug offenders sentenced to probation with special condition requiring completion of a substance abuse program are responsible for paying a $40 monthly fee for supervision costs. Additionally, offenders required to complete a treatment program are usually responsible for paying for that treatment. Waiver of court costs may be offered as an incentive to complete treatment.

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6 Some jurisdictions, such as Charles County, reported that a program had a monetary requirement, but did not provide a specific dollar amount.

7 See NPC – Anne Arundel County Drug Court (District) Final Report
   http://www.courts.state.md.us/opsc/dtc/pdfs/Anne_Arundel_Adult_process_evaluation_final_report.pdf

8 Methadone maintenance is more expensive than other types of treatment. If the DTC team determines that such a program is most appropriate for a drug offender who abuses opiates, he may have to pay more for his treatment, which may include detoxification services provided first by the health department.
3. **Drinking Driver Monitor Program (DDMP & DWI/DUI Courts)**

DDMP charges a flat monthly rate of $40 on top of the $45 supervision fee for additional testing. DWI/DUI Court participants are not required to pay for drug testing if they are unable, but those required to install an interlock devise must pay for its installation and associated costs.

4. **Intensive Supervision**

In addition to the DPP $40 monthly fee, offenders receiving intensive supervision services may be responsible for the costs of additional drug tests.

5. **HG, § 8-505/ 8-507 Commitments**

Individuals granted a pre-commitment evaluation pursuant to HG, § 8-505 are not charged a fee for their assessment. When an offender is committed to the Health Department under HG, § 8-507, the state assumes full financial responsibility for drug treatment services provided to the individual.

**F. Effectiveness**

The National Drug Court Institute (NDCI) in conjunction with the U.S. Department of Justice has looked at the effectiveness of drug courts at the national level by using “meta-analysis.” A meta-analysis is a statistical evaluation of a program’s effects as averaged over several research studies. Meta-analysis is considered the “most rigorous and conservative” means of estimating program effectiveness. NDCI’s evaluation noted that “[f]our independent meta-analyses have now concluded that drug courts significantly reduce crime rates an average of approximately 7 to 14 percentage points.”

The Northwest Professional Consortium, Inc. has evaluated many of Maryland’s drug treatment court programs. The majority of these studies are process evaluations, which do not contain data on individual program effectiveness. One study, however, looked at the effectiveness of Maryland’s juvenile drug courts. The study examined 153 participants in

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10 Id. at 6.

11 Id.

12 Id.

13 This data can be found on the Office of the Problem Solving Court’s Website under EVALUATIONS/REPORTS. [http://www.courts.state.md.us/opsc/dtc/reports.html](http://www.courts.state.md.us/opsc/dtc/reports.html)

juvenile drug courts throughout Maryland.\textsuperscript{15} In the year prior to their participation in drug court, the 153 juveniles had accumulated 317 adjudicated charges. In the year after their participation, they had accumulated 70 adjudicated charges, a reduction of 77%.\textsuperscript{16} The authors of the report concluded that “the statewide [juvenile drug court] system is creating positive outcomes for juvenile offenders.”\textsuperscript{17}

Research has been conducted on the effectiveness of Baltimore City’s drug courts. A 2002 study by researchers at the University of Maryland concluded that the DTC program had achieved reductions in both recidivism and the use of incarceration. Members of the control group were three times more likely than drug court participants to be rearrested during the first year of the evaluation.\textsuperscript{18} Moreover, across a three year period, drug court participants spent one third fewer days incarcerated than control group members. A separate study by the Administrative Office of the Courts and Baltimore Substance Abuse Systems, Inc. concluded that Baltimore City’s drug court programs are significantly more cost effective than standard probation when the costs of recidivism and the benefits of employment are considered.\textsuperscript{19}

According to the Washington/Baltimore HIDTA 2008 Technical Report, a three year study conducted on Washington/Baltimore HIDTA funded efforts, the HIDTA programs produced the desired effects within the target population. The report collected data on the criminal recidivism rate of program participants in the year after they had been treated. The data revealed “a 40 to 44 percent reduction from the previous year in the number of individuals arrested; a 42 to 52 percent reduction in the total number of arrests; and a 51 to 60 percent reduction in the number of criminal charges filed.”\textsuperscript{20} Drug related crimes fell by 60 to 70 percent during the study’s three years.

Although researchers have conducted preliminary evaluations on several of Maryland’s corrections options programs for drug offenders, more detailed studies of individual program effectiveness are not yet available, as many of current program models have only been operational within the past five years.

V. CONCLUSION

The corrections options inventory allowed the MSCCSP to obtain comprehensive data on sentencing alternatives for drug offenders, as well as detailed descriptions of individual program eligibility criteria and target populations. Additionally, many of the respondents to the inventory cited preliminary research suggesting that corrections options programs focused on drug treatment are effective in reducing recidivism and breaking the cycle of addiction.

\textsuperscript{15} Id. at 8.

\textsuperscript{16} Id. at 9.

\textsuperscript{17} Id.

\textsuperscript{18} Denise C. Gottfredson and M. Lyn Exum. \textit{The Baltimore City Drug Treatment Court: One-year Results from a Randomized Study}, Journal of Research in Crime and Delinquency 39, no. 3 (2002).

\textsuperscript{19} Gottfredson and Exum, 2002.

Probation with the condition of successful completion of outpatient treatment is the most widely used corrections option by judges. Drug court is the most widely utilized county-provided option. Statewide, Maryland currently has 42 operational drug courts. The majority of counties have at least one operational drug court. Thirteen counties have at least two drug court programs in operation. Harford is currently the only county that has established all five drug court program types. Allegany, Garrett, Kent and Queen Anne’s counties are the only jurisdictions that have not yet implemented a drug court program. In addition to drug court, four counties also receive HIDTA funding for one or more treatment programs that target “hardcore” drug offenders.

Overall, Baltimore City has the most corrections options programs available including the Felony Diversion Initiative (FDI), which targets long-time repeat offenders, and the Office of the Public Defender Client Services Program, which offers assessment and case management services to Baltimore City offenders. Finally, DPP services, including the Intensive Supervision Program (ISP), Drinking Driver Monitor Program (DDMP), and HG, § 8-505/507 commitments, are available to drug offenders statewide.

Responses to the individual program questionnaires revealed that most corrections options programs, including juvenile drug courts, target repeat offenders with a long history of substance abuse. District Adult Drug Court programs may be the only exception, as many of their participants are first time offenders convicted of small quantity possession. County residency and assessment as a substance abuser are standard eligibility criteria. Conviction of a violent crime was almost always a disqualifier. Other common disqualifiers included pending charges or other legal impediments. Finally, monetary limitations were rarely reported. However, offenders sentenced to supervised probation must pay a monthly fee of $40 per month, and participants in the DDMP program must pay an additional $45 dollars per month for increased testing and equipment.

VI. ADDITIONAL CONSIDERATIONS

Other factors are important to consider in making recommendations about the sentencing of drug offenders. First, many obstacles beyond simple monetary restraints inhibit otherwise eligible defendants from participating in these corrections operations programs. For example, especially in the case of juveniles, many participants are unable to secure transportation for the numerous mandatory court appearances, weekly urinalysis testing, and group therapy meetings. Additionally, defendants may not be able to take leave from their employer in order to participate in the rigorous treatment programs. Second, bed availability at residential treatment facilities is extremely low. Many offenders committed to treatment pursuant to 8-507 may have to serve several months of incarceration at a DOC facility before a bed becomes available.

Baltimore City circuit court judges have expressed frustration with the lack of treatment alternatives available to drug offenders. Due to the lack of available spots in DTC and similar treatment options programs, Baltimore City judges, especially in the district courts, rely heavily on the 8-505/507 commitment process. However, bed availability for residential treatment facilities used for 8-507 commitments is extremely limited. Of the 554 offenders

21 See Appendix 2 for a description of the five drug court types: Adult Circuit, Adult District, Juvenile, DWI/DUI and Family Recovery.
ordered for commitment in fiscal year 2008, only 462 were actually placed.\textsuperscript{22} The Department of Legislative Services reported that judges’ ability to make 8-505/507 commitments is limited by the scarcity of available treatment spots.\textsuperscript{23} Judges interviewed in the 2008 JPI report recommended increased funding in order to expand treatment services and make available more spots for corrections options programs and residential 8-505/507 commitments.\textsuperscript{24}

More problematic questions remain about the selection process for corrections options programs. Much is unknown about the about the frequency in which individual judges utilize corrections options programs. Although judges are asked to include this information on the sentencing guidelines worksheets, this field is often left blank. One preliminary step the MSCCSP might consider is to adopt a campaign to educate the judiciary on the Commission’s 2001 decision to define sentences to a “corrections options” program as a guidelines compliant sentence.

COMAR 14.22.01.02.B(4) states:

(a) "Correctional options" means:
   (i) Home detention;
   (ii) A corrections options program established under law which requires the individual to participate in home detention, inpatient treatment, or other similar programs involving terms and conditions that constitute the equivalent of confinement;
   (iii) Inpatient drug or alcohol counseling under Health General Article, Title 8, Subtitle 5, Annotated Code of Maryland; or
   (iv) Participation in a drug court or HIDTA substance abuse treatment program.

(b) "Correctional options" includes programs established by the State Division of Correction, if the program meets the Commission's criteria, as described in §B(4)(a) of this regulation.

The MSCCSP may also want to consider whether additional programs such as the Felony Diversion Initiative (FDI) in Baltimore City should be included in the definition noted above as a Commission “approved” correctional option program. An educational campaign may be beneficial to emphasize that corrections options are deemed complaint with the guidelines because it would let judges know that they can still issue a “guidelines compliant” sentence when an appropriate alternative to incarceration is utilized. This step would be consistent with the Commission’s goal of encouraging alternatives to incarceration for appropriate cases.

VII. SURVEY LIMITATIONS

There are a few limitations to the data collected via the corrections options inventory. The data is limited to survey responses from 27 out of 36 administrative courts in 19 counties. A decision was made to stop trying to collect data in May 2009 after several attempts to reach

\textsuperscript{22} Department of Legislative Services, Fiscal and Policy Note, House Bill 168 (2009), pg. 4.

\textsuperscript{23} \textit{Id}.

\textsuperscript{24} Pranis, \textit{Judging Maryland}, JPI, 2008 pg. 10. \url{http://www.justicepolicy.org/images/upload/08-02_REP_MDJudges_DP-MD.pdf}
out to counties that did not respond to the inventory request. No response was received from the following nine administrative courts:

<table>
<thead>
<tr>
<th>Surveys Not Received</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anne Arundel County Circuit Court*</td>
</tr>
<tr>
<td>Carroll County Circuit Court</td>
</tr>
<tr>
<td>Carroll County District Court</td>
</tr>
<tr>
<td>Garrett County Circuit Court</td>
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<tr>
<td>Garrett County District Court</td>
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<td>Harford County Circuit Court</td>
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<tr>
<td>Harford County District Court</td>
</tr>
<tr>
<td>Howard County Circuit Court</td>
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<tr>
<td>Howard County District Court</td>
</tr>
</tbody>
</table>

In an effort to fill in missing data gaps, the MSCCSP staff supplemented information identified from the corrections options surveys from a variety of sources including county judiciary webpages, the Maryland Manuel Online, and individual program online resources. Data on the drug treatment court (DTC) programs operated in the missing jurisdictions can also be found in the NPC evaluation reports available on the website for the Office of the Problem Solving Courts. Information on statewide DPP (Division of Parole and Probation) programs is available on the Department of Public Safety and Correctional Services (DPCS) website. A detailed discussion of Baltimore City’s local initiative programs is provided in *Judging Maryland*, a 2008 report by the Justice Policy Institute which provided Baltimore judges’ recommendations for effectively sentencing drug offenders.

* Although the staff did not receive a response from the Anne Arundel County Circuit Court, the district court reported the DTC programs available in the circuit court in addition to the corrections options programs available at the district level.
Appendix 1-A

Summary of Available Alternatives to Incarceration for Drug Offenders

County: _________________________

Please mark “Yes” or “No” to indicate availability in your county for each of the specific alternatives to incarceration programs listed below. If there any programs available in your county that are not included in the list below, please identify those programs in the applicable “Other” option.

Please complete this questionnaire on the next page for each program you have identified.

☐ ☐ Adult Circuit Drug Court
Yes No
☐ ☐ Juvenile Drug Court
Yes No
☐ ☐ Adult District Drug Court
Yes No
☐ ☐ DUI/DWI Court
Yes No
☐ ☐ Intensive Supervision
Yes No
☐ ☐ DWI Monitor
Yes No
☐ ☐ High Intensity Drug Trafficking Area Program (HIDTA)
Yes No
☐ ☐ Felony Drug Initiative Program
Yes No
☐ ☐ Graduated Sanctions and Intensive Urinalysis (formally “Break the Cycle”)
Yes No
☐ ☐ HG, § 8-507 Commitments
Yes No

Other Residential Substance Abuse Treatment Program(s):
_____________________________________________________
_____________________________________________________

Other Outpatient Substance Abuse Treatment Program(s):
_____________________________________________________
_____________________________________________________

Any Other Program(s):
_____________________________________________________
_____________________________________________________
Appendix 1-B

Individual Program Questionnaire**
** Please complete this questionnaire for EACH of the available programs you have identified in your county.**

County: _______________________

Program Name: ________________________            Program Administrator:___________________________
Email: _________________________               Phone: _____________________________

1(a). Please indicate any specific eligibility requirements for this program (e.g. non-violent, assessment as a drug abuser, VOP charge).
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

1(b). Please indicate any specific disqualifiers for this program (i.e. multiple convictions, failed to complete treatment in the past, etc.).
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

2. Please provide a brief description of this program’s target population, or the “ideal candidate” for this program. (e.g. an individual with a long history of drug abuse and relapse vs. a first time offender; an individual who has only committed drug related offense vs. an individual deemed to be a substance abuser that has committed a variety of offenses).
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

3. Please advise whether this program has certain monetary requirements that may inhibit otherwise eligible individuals from participating in the program.
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

4. Have you collected any data to measure the effectiveness of this program? If so, please describe what was data was collected and describe what it indicates about program effectiveness.
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
Appendix 2

SENTENCING ALTERNATIVES FOR DRUG OFFENDERS:
Corrections Options Program Types

DRUG COURTS

Drug courts are judicially supervised court dockets that handle cases of nonviolent drug offenders under the adult, juvenile and family court systems. Most drug courts are either adult circuit or adult district court programs. Drug courts in both the district and circuit courts operate under a specialized model in which the judiciary, State’s Attorney, the Public Defender, Parole and Probation, law enforcement, mental health, social service, and treatment communities work together in a collaborative manner to help break the cycle of addiction and prevent recidivism.

Before treatment can begin, the offender must expressly agree in writing to the terms of a contract outlining the program’s responsibilities, behavioral requirements, and disciplinary sanctions. As a primary responsibility, drug court participants are required to regularly appear before a judge with specialized training on the drug court model designated by the jurisdiction. The State’s Attorney, defense counsel, and the defendant’s case manager may also be in attendance during these meetings. Drug courts utilize a set of rewards and sanctions to encourage compliance with the offender’s treatment plan contract and program rules.

DTC programs frequently use graduated sanctions, a method of negative reinforcement used to deter relapse and noncompliance with the treatment program requirements. Violations of the provisions of the drug treatment program contract results in the imposition of a system of graduated sanctions, such as increased urinalysis and “shock incarceration,” or incarceration based on a boot camp model. Shock incarceration is usually the last step in the set of sanctions designed to dissuade offenders from committing violations. The sanctions, especially shock incarceration, are designed to produce immediate consequences for the offender, compelling him to recommit to the treatment process.

Specialty Types of Drug Courts in Maryland

Juvenile Drug Courts

A juvenile drug court is a special docket within the Juvenile Division of the circuit court that handles the cases of youth offenders with a history of substance abuse and/or drug related delinquency. Like other DTCs, the juvenile drug court judge maintains close oversight of all cases and holds regular status hearings with the parties (the State’s Attorney, Public Defender, Probation Officer, etc.) involved. Program participants are closely monitored and are required to take regular drug tests. In addition to treating addiction and diverting offenders from criminal activity, juvenile drug courts also focus on education and generally contain life skills and

25 Maryland drug courts follow the model developed by the National Association of Drug Court Professionals (NADCP), consisting of ten key components. See http://www.courts.state.md.us/opsc/dtc/keycomponents.html.
vocational training components. The programs also contain a ‘social’ component, which limits the youth’s involvement in non-school related activities and imposes a curfew. The ultimate goal of a juvenile drug court program is to prevent delinquent youths from continuing a life of crime and addiction into adulthood.

Unlike some state juvenile drug court programs that specifically target younger, first time offenders, Maryland’s juvenile drug courts focus individuals in their late teens (ages 14-17) who may have committed multiple offenses before being referred to the program. Typical eligibility requirements for Maryland’s juvenile drug court programs include adjudication as a delinquent, conviction of a non-violent felony, and a referral by the State’s Attorney. Participation is voluntary and requires the cooperation of the participant’s parents and other family members.

**DUI/DUI Courts**

Recognizing that repeat DWI/DUI offenders pose a serious threat to society in a way very different from other offenders, some counties have established separate DWI/DUI courts or “hybrid” DTCs containing a DWI/DUI component (also known as DWI/Drug courts). DWI/DUI courts are dedicated to changing the behavior of alcohol-dependant repeat DWI/DUI offenders. The primary goal of a DWI/DUI court is to protect public safety by addressing the root cause of impaired driving: alcohol and substance abuse and addiction.

Like traditional drug court programs, DWI/DUI courts require frequent urinalysis testing, periodic court appearances, and attendance at the same cooperative regular status meetings. Compliance with treatment and other court-mandated requirements is verified by frequent alcohol/drug testing, close community supervision and ongoing judicial supervision in non-adversarial court review hearings. During the review hearings, the judge employs a science-based response to participant compliance (or noncompliance) in an effort to further the team's goal to encourage pro-social, sober behaviors that will prevent future DWI recidivism.

**Family Dependency Drug Courts**

Family Dependency Drug Courts, or FDCs (also known as Family Treatment Drug Court and Family Recovery Courts), are an increasingly popular program model designed to serve the complex needs of families involved in the child welfare system with parents who have substance abuse problems. A recent study conducted by NPC Research concluded that FDC programs can effectively improve treatment outcomes, increase the likelihood of family reunification, and reduce the time children spend in foster care.26

In Maryland, four jurisdictions including Baltimore City and Harford, Talbot, and Wicomico Counties currently have operational FDC programs. These programs aim to help parents break the cycle of addiction and attain a life of sobriety and stability. By improving the parent’s overall quality of life, the chance for family reunification is greatly increased. In order to be eligible for the program the parent must: (1) have lost custody of his or her children or is in danger of losing custody due to; (2) a pending charge of abuse and/or neglect filed in the court having jurisdiction; and (3) be assessed as a substance abuser. Harford County requires that the participating parent be named in a Child in Need of Assistance (CINA) petition in order to be eligible.

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Baltimore City Programs

I. **Felony ‘Drug’ Diversion Initiative (FDI)**

Baltimore City’s Felony Diversion Initiative (FDI) is a drug treatment court program run by the Circuit Court for Baltimore City. FDI is primarily funded by the Office of Problem Solving Courts, and also receives state and federal grants. The program targets nonviolent offenders who are addicted to drugs. The program allows defendants convicted of nonviolent offenses to be assessed by substance abuse experts. If the offender is found to be in need of treatment, he or she is transferred to an inpatient treatment program, rather than being incarcerated.

Unlike other drug courts, FDI placement is completely at the discretion of the sentencing judge. The FDI program is comprised of two components: (1) inpatient treatment; and (2) aftercare services including job training and placement, continued drug counseling, and re-entry assistance. Specially trained parole and probation officers work as a team to support program participants and attend monthly progress hearings overseen by a specially trained FDI judge. The FDI program limits enrollment to 112 cases at a time.

II. **Office of the Public Defender Client Services Program**

In addition to the Felony Diversion Initiative, another corrections option is available to Baltimore City residents represented by the Office of the Public Defender (OPD). The OPD’s Client Services Program provides more individualized assessment and some case management services for a limited number of clients in need of residential treatment. The Client Services Division works with clients to address several patient issues, including substance abuse, mental health, serious physical disabilities, and developmental disabilities.

Comprised of a team of social workers, the Client Services Division staff takes a holistic approach to treatment, assessing all aspects of a client’s life, including work related issues, relationships with family and friends, etc. Although Client Services works with people charged with both felonies and misdemeanors, the division provides mitigation

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27 Ryan E. Smith, Drug Court Coordinator, Circuit Court for Baltimore City, e-mail message to MSCCSP staff, October 27, 2009.

28 Id.


31 Id. at 7.

32 Id. at 8.

33 Id. at 10, 15.
services to individuals assessed as substance abusers who are charged with more serious crimes in an effort to ensure the most appropriate sentence.

According to a March 2008 report by the Justice Policy Institute (JPI), the OPD’s Client Services Division received positive reviews from several Baltimore City circuit court judges. At least one judge felt strongly that OPD’s Client Services provides far better treatment services than Parole and Probation. Another judge indicated that he felt the program’s success is attributed to the advocacy of residential rather than outpatient treatment, as residential programs provide participants with better access to treatment services.

HG, § 8-505/507 COMMITMENTS

Under Health General Article § 8-505, a sentencing judge has the authority to commit an offender into the custody of the Department of Health and Mental Hygiene (DHMH) to be placed in drug treatment, usually residential drug treatment, pursuant to HG, § 8-507. Once a judge signs an order for an 8-505 evaluation, the results potentially trigger an § 8-507 commitment, which is a separate order for an individual to be placed in residential treatment. There is often a waiting list for placement in residential treatment. A person recommended by a judge for residential treatment may still have to serve a period of incarceration before placement if an appropriate treatment facility is not yet available.

In general, there are three tracks to an § 8-505 commitment:

1. **Pre-sentence**: The offender is committed to both the DHMH and the local detention center as a pre-sentence detainee.

2. **Post-suspended sentence**: The offender is placed under the supervision of DPP and awaits placement at a residential drug treatment facility for an indeterminate amount of time (depending upon bed availability).

3. **DOC Incarceration Sentence modification**: The offender is originally sentenced to a DOC term, but receives an 8-505 evaluation order (and a suspension of sentence) from the judge upon a motion for modification of sentence. The offender is then placed under the supervision of DPP until placement occurs.

To qualify for an 8-505 commitment, the offender must meet the following prerequisites:

1. The evaluation must be conducted in accordance with Alcohol and Drug Abuse Administration (ADAA) regulations and is usually performed by an ADAA employee or designee.

34 *Id.* at 13.
35 Under HG § 8-507, the judge retains the case rather than referring it to drug court.
2. The defendant must sign a consent to treatment form. In addition, the defendant must sign a release of confidential information form allowing for the sharing of information on the defendant’s progress.

3. The judge considers the evaluation report and finds the recommended treatment to be appropriate and necessary.

4. The offender must not have any legal impediments such as outstanding warrants, detainers, consecutive, and concurrent sentences. However, the 8-505 evaluation may be ordered while steps are being taken to resolve the obstacles.

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**HIDTA FUNDED PROGRAMS**

The Washington/Baltimore High Intensity Drug Area Program (W/B HIDTA) provides funding to jurisdictions that offer integrated drug treatment services that utilize graduated sanctions and offender supervision services for substance dependent offenders. Data on the individuals who entered W/B HIDTA-funded treatment in 2004, 2005, and 2006 showed that this population was composed of offenders with long criminal histories, aged in their mid-thirties, low education, low income, and minimal attachment to the labor force. Unlike many treatment-based alternatives, HIDTA funded programs do not exclude individuals who were convicted of violent crimes. In order to receive funding, the treatment services provided by the jurisdiction must include the following:

1. An initial assessment of the individual’s drug use and criminal history;

2. Two or more treatment modalities; and

3. Coercion into the treatment program and sanctions for failure to participate.

W/B HIDTA funds are used by recipient jurisdictions to enhance their existing treatment programs, to extend their levels of care, and to support the use of urinalysis and progressive sanctions to promote compliance with program requirements. In addition, HIDTA funding is also used to enhance DPP supervision services. Two counties, Prince George’s and Montgomery, reported having one or more HIDTA funded treatment programs for drug offenders. The responses to the individual program questionnaires do not provide any additional information about these programs. However, according to the 2008 Washington/Baltimore HIDTA Technical Report, four jurisdictions currently have one or more HIDTA funded programs. A fifth jurisdiction, Baltimore City, phased out its program in 2005. In 2008, the following HIDTA funded programs were available:

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38 *Id.* at 10.
PAROLE AND PROBATION SERVICES

The Division of Parole and Probation (DPP) administers two distinct offender supervision programs. First, the DPP provides traditional supervision services to offenders sentenced to probation, as well as selected nonviolent repeat offenders participating in the Intensive Supervision Program (ISP). Additionally, the DPP administers the Drinking Driver Monitor Program (DDMP) for defendants with DWI/DUI convictions.

I. Drinking Driver Monitor Program (DDMP)

The Drinking Driver Monitor Program (DDMP) is designed to maximize monitoring and reporting to gain compliance with court-ordered treatment and/or education. Offenders are referred to DDMP by the courts (96.4 percent), or by the MVA Medical Advisory Board. The program monitors offender attendance at community treatment programs as well as compliance with the terms of their probation. Drinking driver monitors are responsible for ensuring that the offender:

- Submits to regular breathalyzer tests
- Attends treatment or self-help meetings
- Maintains employment
- Pays supervision fees (and restitution, if applicable)
- Complies with any other conditions of probation
- If the offender is a problem drinker, monitors identify relapse factors and proactively recommend and coordinate intervention strategies aimed at relapse prevention.


39 The DDMP was initially operated by the Motor Vehicle Administration. DPP took over the program in 1986.
In addition, drinking driver monitors supply the courts and MVA with information essential to making a determination to initiate:

- Violation of probation court proceedings or administrative hearings,
- Modification of special conditions of supervision, and
- Offender entry into inpatient treatment based on information from treatment providers and observation and documentation by the monitor.

II. **Intensive Supervision**

At the discretion of the sentencing judge, a non-violent drug offender may be sentenced to intensive supervision by the DPP as an alternative to incarceration.\(^\text{40}\) According to JPI’s 2008 Report, ‘high risk’ offenders, those who have a long history of substance abuse, are better candidates for intensive supervision. In fact, ‘low risk’ offenders, usually first time offenders with a short history of substance abuse, are more likely to fail the intensive supervision program than someone considered high risk.\(^\text{41}\)

To deter offenders from violating the terms of their supervised probation, DPP employs a variety of sanctions including increased drug testing, more intensive treatment (even short-term residential treatment in response to continued drug use or other minor non-compliance), or electronic monitoring. Reduced drug testing and referral for employment services serve as incentives for compliance.\(^\text{42}\)

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**PATUXENT INSTITUTION**

The Patuxent Institution is a treatment-oriented maximum-security correctional facility. While the Patuxent Institution is an agency of the Maryland Department of Public Safety and Correctional Services (DPSCS), it is functionally separate from the Division of Correction (DOC).\(^\text{43}\) Even with this distinction, Patuxent Institution maintains a close working relationship with the DOC and oversees a number of DOC programs.\(^\text{44}\) The Institution maintains a maximum capacity of 987 beds.

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\(^\text{40}\) Although the option for “intensive supervision” is available to the judge at sentencing, the DPP website indicates that the same enhanced monitoring services are offered through their Corrections Options Program (COP) where defendants are assessed post-sentencing by their DOC case manager. Offenders must be non-violent as determined through a review of their criminal history.


\(^\text{42}\) Like DTCs, the intensive supervision program utilizes graduated sanctions to improve compliance rates.

\(^\text{43}\) See Article 31B of the Annotated Code of Maryland (established in 1951, began operating in 1955).

\(^\text{44}\) Programs established by the Patuxent Institution include the Substance Abuse Transition Program (SATP); the Regimented Offender Treatment Center (ROTC); and, the Mental Health Transition Unit located in the Correctional Mental Health Center in Jessup.
**Patuxent Institution's Eligible Person (EP):** This program, established in 1977, is authorized to serve up to 350 offenders annually, including 300 male offenders and 50 female offenders.

**Patuxent Eligibility Requirements:**

- Have three years or more remaining on their sentence
- Have an intellectual impairment or emotional imbalance
- Be likely to respond favorably to the programs and services provided at Patuxent, and
- Be better able to respond to remediation through Patuxent Institution's programs and services than by other incarceration.

**Disqualifiers:**

- Individuals who have been convicted of 1st degree murder or a 1st degree sexual offense are generally excluded unless the sentencing judge specifically recommends the evaluation.

**Patuxent Institution’s Youth Program:** This program was established in 1994 by the General Assembly as a response to the increasing number of violent juvenile offenders tried as adults.45

**Eligibility Requirements:**

- Serving a sentence of three years or more,
- Have an intellectual impairment or emotional imbalance,
- Be likely to respond favorably to Patuxent’s programs and services,
- Be better able to respond to remediation through Patuxent’s programs and services than by other incarceration.46
- Referred to the Institution at the time of sentencing; and
- Must have been younger than 21 at the time of referral.

The primary focus of this non-voluntary program is developmental, with the goal of assisting young offenders in their transition into adulthood. The program is staff-intensive and requires increased direct contact and monitoring.

Once accepted into the program, the youth is not released until he or she:

45 Correctional Services Article, Section 4-401(c) of the Maryland Annotated Code.

46 See COMAR 12.12.27.04, .06.
1. Is paroled by the Institutional Board of Review with the approval of the Secretary;
2. Has completed the term of imprisonment; or
3. Is transferred by Patuxent Institution’s director to DOC.