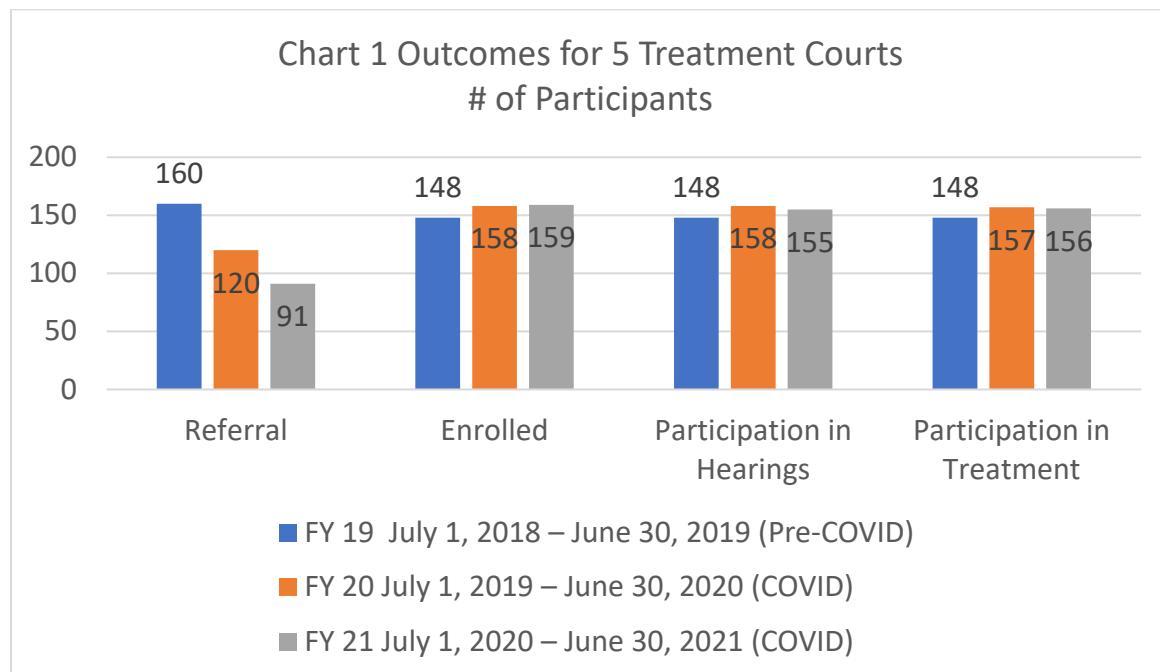


Vermont: The Significance of Teams During COVID-19

The Vermont Judiciary's five regional adult drug treatment court teams play a significant role during COVID-19. These teams keep participants engaged in remote treatment services and remote hearings. Even before the pandemic, it was harder for individuals with substance use disorders to seek treatment and recovery when they lacked basic resources like food, housing, and jobs. COVID-19 worsened these challenges for this segment of Vermont's population. Treatment teams throughout the country took responsibility for developing solutions to such challenges. In Vermont, the teams found success by addressing the dangers of isolation and the higher risk for their clients of getting COVID or from dying from an overdose amid the isolation caused by the pandemic.

On March 24, 2020, Governor Phil Scott issued "Stay Home, Stay Safe" orders. The Vermont Judiciary in turn closed courts and stopped cases from being processed. This resulted in a significant reduction in the number of referrals to treatment courts—from 160 before COVID to 91 during COVID (see Chart 1). Nonetheless, existing participants in the treatment courts, were retained because treatment teams identified what participants needed for remote services and what practices to change.

Chart 1 shows that the teams' strategies supported retention. We measured retention by the number enrolled (159), the number attending hearings (155), and the number participating in treatment (156). These numbers represent both newly enrolled participants for the referrals and individuals that were already enrolled in the program prior to COVID stayed in the program.



Another impact of COVID was the increase in overdose deaths, nationally and in Vermont. Overdoses among Vermonters who participated in treatment court docket, however, remained flat in Vermont. Of the 158 individuals enrolled in FY20 and the 159 enrolled in FY21, only one individual died from an overdose each year. This trend did not continue, however, as two overdose deaths were reported from July 1 to Sept 30, 2021.

Vermont treatment court teams saw successes throughout the early pandemic by adapting policies and procedures. They followed the National Association of Drug Court Professionals and the National Center for State Courts recommendations. The changes included:

- Participants were referred directly to treatment providers (e.g., no intake).
- Participants that struggled were scheduled for remote hearings.
- Participants in one court piloted mobile drug testing.
- Supervisors used social distancing practices.
- The treatment teams did not use jail, work crew, or in-person meetings as sanctions.
- Participants were not terminated after 30 days of disengagement; the team worked to re-engage participants.
- Participants received incentives focused on safety, health, and welfare.

The state team located in the Court Administrator's Office supported the efforts of the regional teams. They proposed and then made purchases to help with remote services using 2020 Coronavirus Aid, Relief, and Economic Security (CARES) Act funds. By December 2020, treatment courts had delivered tablets and a variety of phone cards to participants. Drug testing was available remotely and individuals received instruction on how to use oral swabs, sweat patches and remote alcohol monitoring devices.

By January 2021, remote court operations were underway. New written protocols were in place. Team members received training. A participant signed a technology equipment agreement to receive a tablet. Case managers passed out phone cards. Probation officers observed participants in the DUI court using the alco-sensor devices before sending them off with the device for remote testing.

Granted--even with these safeguards, there were challenges:

- Participants did not consistently use the camera for videoconferencing.
- Internet and cell phone coverage were limited, as Vermont's rural areas lack access to cell towers and broadband.
- Participants lost or damaged equipment.
- The equipment did not always work and needed to be replaced.
- Treatment teams were concerns about the reliability of the oral swab test results compared to urine testing.



Figure 1 Law enforcement outreach to participant to deliver incentives

Even with these challenges, the solutions the teams developed worked to a greater degree. For example, treatment teams successfully met virtually for pre-court staffing. Participants attended virtual peer-led groups. They found housing, job and other social services online using the tablets. The pilot mobile drug testing van offered both urine analysis and COVID testing at the courthouse parking lot. The treatment team and Judge did not hand out sanctions for positive drug tests. Law enforcement, probation officers, and case managers masked up to deliver gift cards, tokens, and phase advancement certificates to successful participants.

The drug court's multidisciplinary teams were tested by the pandemic. In Vermont the teams responded effectively. They identified the needs and filled gaps with resources. The team member's knowledge, skills, and experiences prior to COVID-19 ultimately led to the practical solutions during the public health crisis.