



Council of Accountability Court Judges

Chief Judge Kathlene F. Gosselin
Executive Committee Chair
Northeastern Judicial Circuit

Taylor Jones
Executive Director

Memorandum

TO: Council of Accountability Court Judges
FROM: Judge Kathlene F. Gosselin, Executive Committee Chair
RE: Executive Summary of Proposed CACJ Rules for Final Vote
DATE: January 22, 2020

Attached is a copy of the proposed CACJ Rules that have been developed and refined over the past year. This council received a copy of these rules on November 26, 2019, for a comment period. The comments were overwhelmingly in support of the rules, and the few concerns raised are being addressed through the Executive Committee's training and implementation plan. For a full explanation of how the rules will modernize, update, and expand the Council's operations, please see the memo circulated with the draft by Taylor Jones on November 26, 2019. A separate memo in these meeting materials provides an overview of the Committee's training and implementation plan.

The Executive Committee now asks for a vote of the full Council body to approve these rules. The Committee proposes an effective date of **July 1, 2020.**

**THE COUNCIL OF ACCOUNTABILITY COURT JUDGES
OF GEORGIA
Rules and Regulations**

Effective Date: _____

Table of Contents

Article 1. General Provisions..... 1

Article 2. Standards 4

Article 3. Certification 7

Article 4. Grant Application and Administration..... 12

Article 5. Peer Review Process 22

Article 6. Treatment Fidelity Monitoring..... 28

Article 7. Grievance Procedures..... 31

Article 8. Noncompliance, Decertification,
and Termination of Funding 36

Article 9. Data Collection 42

Article 10. Training, Case Management Systems,
and Other Resources 44

Article 11. Other Program Requirements..... 51

Article 12. Advisory Opinions..... 51

ARTICLE 1. GENERAL PROVISIONS

I. Purpose

The Council of Accountability Court Judges of Georgia created these Rules and Regulations pursuant to O.C.G.A. § 15-1-18(c), which states in part: “The council shall promulgate rules and regulations as it deems necessary.” The objectives and purpose of the Council are those proscribed by law and as stated in the Council’s Constitution.

II. Definitions

- A. “CACJ” refers to the Council of Accountability Court Judges of Georgia.
- B. “The Council” refers to the Council of Accountability Court Judges of Georgia.
- C. “CJCC” means the Criminal Justice Coordinating Council.
- D. “Certification” refers to the process by which the Council reviews accountability court divisions and assesses whether they are adhering to the Council’s standards, pursuant to O.C.G.A. § 15-1-15(a)(4)(C).
- E. “Certification Officer” refers to the Council staff who supervise and implement the certification process.
- F. “Council staff” refers to any person who conducts business on behalf of the Council, whether as employees, independent contractors, or volunteers. This term also includes the Council’s designees, who may be employed by other agencies, including but not limited to, the Judicial Council/Administrative Office of the Courts.
- G. “Complainant” means one who files a grievance pursuant to Article 7 of these Rules.
- H. “Division” under these Rules means an accountability court program operated by the judge of a superior, state, magistrate, probate, or juvenile court.
- I. “Executive Director” and “Director” mean the Executive Director of the Council.
- J. “Memorandum of Understanding,” or “MOU,” refers to a written agreement between one or more stakeholder groups and the accountability court program outlining the duties and responsibilities of each stakeholder, including outlining the duties of the individual team member representing that stakeholder group on the team.
- K. “State administering agency” means a state office designated to administer federal assistance programs.

- L. “Standards” as used in these Rules, refers to the Standards promulgated by the Council of Accountability Court Judges pursuant to Georgia law.
- M. “Sub-grantee” means the government or other legal entity to which a sub-grant is awarded and which is accountable to the grantee for the use of the funds provided.
- N. “Team” refers to the group of professionals who are primarily responsible for overseeing the day-to-day operations of an accountability court program and administering the treatment and supervisory interventions.
- O. “Team Member” refers to a person who serves on an accountability court team.

III. Tenses, Gender, and Number

As used in these Rules, the present tense includes the past and future tenses, and the future tense includes the present; the masculine gender includes the feminine, and the feminine includes the masculine; the singular includes the plural, and the plural includes the singular.

IV. Council Committees

- A. Pursuant to Article V of the Council’s By-Laws, the Council maintains an Executive Committee. The Council’s By-Laws are incorporated hereto by reference.
- B. The Council may also create Special Committees in its discretion, pursuant to the procedures set forth in Article VII § 1(b) of its By-Laws.
- C. Pursuant to Article VII § 4 of the Council’s By-Laws, the Council maintains Standing Committees on:
 - 1. Funding;
 - 2. Standards & Certification;
 - 3. Training;
 - 4. Legislation; and
 - 5. Nominations.

V. Council Staff

The Council is mandated by statute at O.C.G.A. § 15-1-18(d) to “further the improvement of accountability courts, the quality and expertise of the judges thereof, and the administration of justice.” To best effectuate this mission, and pursuant to its additional statutory authority under O.C.G.A. § 15-1-18(e), the Council shall utilize staff in sufficient numbers and with sufficient qualifications to carry out its purposes under the law. Staff may be retained as independent contractors or as employees.

VI. Immunity

No member of the Council, any Standing Committee or Special committee, their designees, staff of the Council or the AOC, or any individual reporting to or testifying before the Council, a Committee, the AOC, or Council staff, can be held liable for civil damages for any statement, action, omission or decision made in the course of carrying out any of the activities described in these Rules.

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ARTICLE 2. STANDARDS

I. Governing Statutes

Pursuant to O.C.G.A. §§ 15-1-15 through 15-1-19, and O.C.G.A. § 15-11-70, the Council is tasked with establishing standards and practices for accountability courts based on current research, findings, and developments published by expert organizations in the field. The Council is also tasked with updating its standards as the best practices in this field advance. As described in Article 3(A) below, Georgia law mandates that program certification and eligibility for state funding be based on program adherence to the Standards.

II. General Overview

The Standards were developed from a review of national research on best practices, and an analysis of practices and procedures used in Georgia's Accountability Courts. They are attached hereto as Appendix A.

The Standards incorporate the Key Components developed by the National Drug Court Institute, as well as concepts and best practices developed by other expert organizations. Courts shall adhere to the Standards and recommendations for operation. Program certification and eligibility for state funding will be based on adherence to these Standards, and each program will be subject to a performance peer review no less than once every three years. Programs may also be subject to Treatment Fidelity Monitoring on a regular basis as resources are available.

Council staff shall proactively monitor the latest research and best practices from expert organizations in the field, including but not limited to, the National Drug Court Institute, the Substance Abuse and Mental Health Services Administration, the Council of State Governments Consensus Project, the National GAINS Center, the National Center for DWI Courts, Children and Family Futures, the Department of Veterans Affairs and the Georgia Department of Veterans Service, and any other relevant expert organization in the accountability court field. Council staff shall actively seek out professional training to assist in the process of staying current on research and developments in the field.

Standards are currently in place for the following accountability court divisions:

- A. Adult Drug Court
- B. Adult Mental Health Court
- C. Veterans Treatment Court
- D. Adult DUI Court
- E. Family Treatment Court
- F. Juvenile Drug Court

The Standards & Certification Committee shall conduct a full review of all Standards once every three (3) years to ensure the Standards remain in line with best practices

recommended by expert organizations in the field. Council staff shall prepare recommendations for any changes in written form to the Committee. These recommendations shall be based on a review of national best practices and research, as well as on analysis of data collected by Council staff and by individual courts. The Standards and Certification Committee shall make a recommendation for revision of standards to the Executive Committee. If approved, the full Council body will then vote whether to approve the new Standards. Nothing in this section bars staff or any Council member from suggesting any changes at any time outside of this three-year review cycle, and the Council may vote on additional changes at any time. The Standards can be found on the Council's website.

III. The Standards & Certification Committee

Pursuant to the Council's By-Laws, the Standards & Certification Committee's objective is to develop and refine the "standards and recommendations for operation and approval by the Council" of accountability court programs operating in the State of Georgia that receive funding through the Council.

The Committee has the following responsibilities pursuant to the Council's By-Laws:

- A. Develop the program certification and standards for eligibility for state funding based on adherence to such standards pursuant to O.C.G.A §§ 15-1-15 thru -19, and 15-11-70;
- B. Update the Council's standards and practices to incorporate research, findings, and developments in the field;
- C. Establish a performance peer review process to ensure that each program is reviewed no less than once every three years;
- D. Identify elements necessary for performance measurement, including, but not limited to, recidivism, the number of moderate-risk and high-risk participants, drug testing results, drug testing failures, the number of participants who successfully complete the program, and the number of participants who fail to complete the program;
- E. Coordinate with the Administrative Office of the Courts and the Georgia Council on Criminal Justice Reform on the development and management of performance measurement and data system;
- F. Provide, in conjunction with the Funding Committee, a recommendation for funding of any data management, certification and peer review and similar projects;

- G. Recommend certification status for all programs in the state and provide such information to the Funding Committee for funding recommendations;
- H. Establish protocols for the use and dissemination of performance measurement and program data;
- I. Provide guidance to programs on the implementation of policies and procedures, including, but not limited to, guidance on the implementation of a risk and needs assessment; and
- J. Report at least annually or as otherwise directed to the Council as to its activities.

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ARTICLE 3. CERTIFICATION

I. Governing Statutes

Georgia law requires that the Council “create and manage a certification and peer review process to ensure drug court divisions are adhering to the . . . standards and practices.” O.C.G.A. § 15-1-15(a)(4)(C). The Council is tasked with the same duty for Adult Mental Health Court programs, Veteran Treatment Court Programs, DUI Court Programs, and Family Treatment Court programs under Georgia law. O.C.G.A. §§ 15-1-15 through -19 and O.C.G.A. § 15-11-70.

In order to receive state appropriated funds, Adult Felony Drug Court programs, Adult Mental Health Court programs, Veteran Treatment Court Programs, DUI Court Programs, and Family Treatment Court programs must be certified or be in receipt of a waiver of certification.

II. Publicly Available Information about Certified Courts

A list of certified courts will be made available on the Council’s website and is updated by staff every six months.

III. General Overview and Definitions

A. Overview

The certification process is designed to help improve court functioning and outcomes based on the standards promulgated by CACJ pursuant to its statutory duties. Certification, or a waiver thereof, is also required by statute before Adult Felony Drug, Adult Mental Health, Veteran Treatment, DUI, and Family Treatment Courts are eligible to receive state funding. The certification application, instructions on how to complete the application, and deadlines are provided under the Standards and Certification tab on the CACJ website. The Standards & Certification Committee ultimately reviews all applications and votes on whether a program shall be fully certified, provisionally certified, not certified, or granted a waiver of certification. A Certification Flow Chart is available as part of the Information Packet promulgated by Council staff on the CACJ’s website.

B. Fully Certified

A fully certified court is one that is meeting all mandatory Standards included on the certification application. Full Certification is good for two years and the court is eligible for funding during that two-year period.

C. Provisionally Certified

A provisionally certified court is meeting some of the Standards, but not enough to

receive full certification. Provisional Certification typically lasts three months and the court is required to resubmit its application for certification at that time. Court will receive targeted feedback and may request technical assistance. Technical assistance will be available at the discretion of Council staff and as resources permit.

D. Certification Waiver

A waiver of certification permits a new program in the implementation phase to obtain funding in order to utilize that funding to meet standards. Courts may qualify for a Certification Waiver which allows for a three to six-month extension on the certification requirements. A program should only apply for a waiver once it has reviewed the certification application and confirmed that it currently will not meet the requirements. More information and deadlines are provided on the CACJ website under the Standards and Certification tab. Waivers will only be granted to programs being newly implemented, and even then only rarely and under special circumstances.

E. Not Certified

A court whose application for certification or for a waiver has been denied is not certified and is not eligible to receive state-appropriated funds. Upon receipt of a waiver application that demonstrates that a program cannot meet sufficient Standards to become certified or provisionally certified even upon receipt of grant funds, the Standards and Certification Committee shall decline to grant a waiver of certification. An existing program (one not in the implementation phase) submitting an application for certification that demonstrates that the program is not meeting enough Standards to qualify for recertification or even provisional certification is subject to proceedings pursuant to Article 8.

IV. Certification Application Process

- A. Certification applications shall be made on the form provided by the Council, and are available on the Council's website. Applications will only be accepted online. New courts in the implementation phase should attempt to complete the certification application either before, or at the same time, that they complete their Notice of Intent to Apply for Funding pursuant to Article 4.
- B. Certification applications will be released by the Council online by the end of the first week in December. They are due 45 days after release.
 - 1. Currently, Adult Felony Drug Courts, Mental Health Courts, and Veteran Treatment Courts are all released for certification together one year, and DUI Courts and Family Treatment Courts are the next year, on a rotating cycle every two years. Upon the recommendation of Council staff, the Standards and Certification Committee has the authority to modify the

certification cycle in its discretion when appropriate to accommodate the logistical and technical needs of Council staff, or for any other good cause shown.

2. New courts in the implementation phase should contact Council staff for guidance on certification application if they will be unable to meet the certification application deadline for their type of court, or would like to apply sooner than the certification deadline for their type of accountability court program.
- C. Council staff will then have 45 days from the Certification Application deadline to complete their review and assessment of all applications received. Within that time, staff will follow up with courts regarding any incomplete applications or additional information needed. Courts should provide all requested information timely and submit any amended applications timely, as requested by Council staff. Staff will submit the applications with recommendations to the Standards & Certification Committee by the end of the 45 day review period.

V. Evaluation Process

- A. In February of each year, the Standards & Certification Committee will meet to review applications. The Committee will vote on each application and a simple majority vote of members attending the meeting will be sufficient to award certification status. The possible certification outcomes for applications are:
1. Fully certified;
 2. Provisionally certified;
 3. Not certified; and
 4. Granted a waiver.

However, waivers are only available to courts in the implementation phase that submit a completed waiver application. Existing courts that complete a certification application that demonstrates insufficient compliance with standards will not be certified and may be subject to Article 8.

- B. After the vote, Council staff shall inform the presiding judge of the results via status letter within ten (10) business days of the decision. Status letters may be sent via email.
- C. The Committee will also inform the Funding Committee of the results and make funding recommendations.

VI. Fully Certified Programs

- A. A program will be awarded full certification if it meets all mandatory standards.

- B. Full certification is valid for two years.
- C. All fully certified programs must reapply for certification every two years.

VII. Provisionally Certified Programs

- A. If a program is meeting some but not all of the mandatory standards, they may be awarded provisional certification.
- B. Provisional certification typically lasts three months. The Standards and Certification Committee may shorten or lengthen that time period in their discretion. At the end of that time, the program will be required to resubmit portions of its application for review by the Standards & Certification Committee. During the three month provisional period, the program will receive targeted feedback from Council staff and may request technical assistance. Technical assistance will be provided within the discretion of the Council and Council staff and as resources permit.
- C. Provisionally certified programs may apply for funding while in provisionally certified status.
- D. After a provisionally certified program responds to the Committee's request to resubmit their application, the Standards and Certification Committee will reevaluate the program and make a determination about whether they should be fully certified. The Committee has the authority and discretion to decline to certify a program upon reevaluation.

VIII. Waiver Process

- A. Courts may be awarded a waiver by the Committee. A waiver is intended for new programs still early in the implementation phase. Even if a program has filled out an application for certification, they may still be awarded a waiver if they do not reach provisional certification. A waiver allows a program to obtain funding while in the implementation phase. A waiver is good for six months.
- B. Waiver Applications are available upon request from Council staff. Waiver applications may be submitted at any time and will be accepted year round, every year, and are not tied to the two year certification cycle.

IX. Not Certified

Courts who do not meet a sufficient number of the Standards may be denied certification. A new program applying for certification or a waiver while still in the implementation phase which is denied certification and not granted a waiver will need to resubmit its certification application at the next cycle. Technical assistance may be provided by the Council and programs may be permitted to reapply for certification outside of the two year

certification cycle on a case-by-case basis in the discretion of the Council and staff.

X. Right to Review Certification Upon Receipt of Inconsistent Information

During the certification process, if the Committee receives credible information verified by Council staff that contradicts the information submitted with, or the statements contained within, the program's certification application, it may, in its discretion, conduct a review into any discrepancy and may place a certification application on hold pending this review. Prior to any official action regarding certification, the Chair of the Standards & Certification Committee will contact the presiding judge, and Council staff will work with the program to clarify the issue. The program will have ten days to respond to notice provided by the Chair. The program may be required to resubmit its certification application and supporting documents. Programs previously certified that are under review shall be considered to be provisionally certified pursuant to subparagraph G. Programs not certified previously that are under review shall be considered not certified but may apply for a waiver.

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ARTICLE 4. GRANT APPLICATION AND ADMINISTRATION

I. Overview

Pursuant to O.C.G.A. §§ 15-1-15 through 15-1-19, and O.C.G.A. § 15-11-70, the Council of Accountability Court Judges awards state appropriated funds to accountability court divisions who have been granted certification, provisional certification, or a waiver of certification requirements pursuant to Georgia law and Article 3 of these Rules. More information regarding the grant application process can be found on the CACJ website, and staff may promulgate an FAQ and any other guidelines or other documents as needed to explain and provide an overview of grant application, review, and administration processes.

While the CACJ may occasionally obtain grant funding from federal or other sources of funds, the vast majority of funds available through the Council comes from the state legislature. Grant fund availability is entirely and wholly contingent upon the amount of funding appropriated for accountability courts by the legislature. Grant awards are determined by the Funding Committee of the Council, and all funding decisions are made in the discretion of that Committee. The decision whether to fund a particular program and how much to award are entirely within the discretion of the Funding Committee. Funding is a competitive process, and no accountability court program is entitled to grant funds. Funding fluctuates year to year based on the amount of the state budget, and programs should continually seek out alternate funding sources.

II. Overview of Types of Grants Available

A. Fiscal Year Operating Grant

Each year, the CACJ releases a grant solicitation that runs concurrent with the state's fiscal year. The grant solicitation process is administered in conjunction with the CJCC. This grant is designed to provide the primary operating expenses for an accountability court.

B. Supplemental Grant

Supplemental grants are made available for existing courts to supplement operations in the second half of the fiscal year. They provide additional funds for existing courts only and are not available to courts in the implementation phase. Additionally, supplemental grants are not designed to supplement normal court operations that should have been anticipated and budgeted for appropriately. They are intended to support programs that desire to expand or improve on current operations. For example, supplemental grant funds may be used to implement a new Medication Assisted Treatment (MAT) program, expand the number of home checks or other surveillance, or purchase supplies for a new type of drug testing, or for personnel costs associated with adding an extra day of drug testing. This is a non-exhaustive list of demonstrative examples of appropriate requests for

supplemental grant funds. If awarded, supplemental grant funds are added into the court's current grant award and are available for use during the third and fourth quarters of the fiscal year.

C. Emergency Operating Grant

Occasionally, additional grant funds may become available for existing courts. Emergency funding is dependent on budget and on the amount de-obligated from existing courts and may not be available every year. If available, emergency grants are limited to participant treatment and drug testing needed as a result of unanticipated or unusual growth in the number of program participants. Requests for emergency funds may be made for other reasons, but funds will only be granted for reasons other than unusual growth in program participation for circumstances of extreme exigency and only as budget allows. If awarded, emergency grant funding will be made available for the fourth quarter of the current fiscal year.

D. Additional or One-Time Expenditure Grants

Occasionally, additional grant funds may be made available if the Council receives additional funding or an unusual amount of funds are de-obligated early in the fiscal year. The Council's Funding Committee will determine the grant funding cycle for these occasional or one-time grants, as well as the purpose of the grant and any funding criteria. Any additional grant opportunities under this section will be publicized via the CACJ website or listserv. These are one-time or occasional grants and will not be available every year, and application procedures for these grants may vary year to year. Instructions for application will be made available with the grant solicitation request.

III. Grant Application and Award Procedures for Fiscal Year Operating Grants

A. Notice of Intent to Apply for Funding

Any accountability court (existing or new) that seeks to apply for state appropriated funds through the CACJ is first required to complete and submit a Notice of Intent to Apply for Funding Form (NOI) to the CACJ. This form is mandatory for any court that intends to apply for state grant funds. A failure to complete the NOI timely will result in a denial of a program's subsequent fiscal year operating grant in that fiscal year.

The Notice of Intent Form asks for basic court and contact information and is designed to assist the CACJ Funding Committee in preparing for the upcoming fiscal year funding decisions. The Form and instructions are located on the CACJ website and must be completed before a court submits its grant application.

B. Court Operating Profile Report

After completing the NOI form, an accountability court seeking state funds must next complete and submit the CACJ Court Operating Profile Report. The Report is generally released in mid-January and must be completed pursuant to the deadline established by staff. CACJ publishes the deadlines for each year on their website along with the report.

C. Grant Solicitation Announcements

The grant solicitation is the invitation from CACJ to programs, and it requests that programs submit their grant applications. Announcements of the release of grant solicitations will be sent electronically and will be made available on the CACJ website by staff. CACJ staff will ensure the grant solicitation is released in a timely fashion such that courts will have sufficient time, generally four or five weeks, to complete their grant application.

D. Grant Application and Required Documents

Courts must complete the grant application in full and provide all requested documentation before their grants will be reviewed by the Funding Committee. Incomplete grant applications will not be considered. Grant applications require the submission of a lengthy and detailed budget, which can only be amended after award using a Subgrant Adjustment Request form, as outlined in Section __ below. Courts should ensure that grant applications are completed by trained personnel with the skills and experience necessary to establish a budget that accurately reflects court operations and needs.

Grant applications typically request a substantial number of documents, including but not limited to, copies of MOUS, contracts, copies of any relevant licenses and certifications, and personnel forms. Courts should be sure to maintain all documentation that will be needed during the grant application process in an organized and easily retrievable manner. Specific instructions will be included in the grant solicitation.

E. Funding Committee to Determine Awards

Pursuant to the Council's by-laws, the primary objective of the Funding Committee is the oversight of all grants and funds on behalf of the Council, and it is tasked with receiving and reviewing funding requests on behalf of the accountability court programs throughout the state. The Funding Committee allocates and administers state appropriated funds in its discretion to accountability courts on behalf of the Council as provided for in these Rules and in accordance with Georgia law.

F. Staff Recommendation

CACJ staff, as directed by the Council and the Funding Committee, shall prepare a recommendation as to grant awards in advance of the Funding Committee's

meeting. This recommendation is not binding on the Committee, and the Committee makes funding awards using its own discretion.

G. Allocation Procedures

The Funding Committee meets as a group to determine funding awards. However, it has the authority to delegate this task to sub-groups comprised of smaller groups of judges.

H. Notification of Grant Award

After the Committee has allocated all available funds for a given grant solicitation, CACJ staff shall inform each court of their grant award in writing. Award letters may be sent electronically.

I. Additional Special Conditions Permitted

All grant awards are contingent upon compliance with the grant conditions outlined in Section G of this Article below. The Funding Committee may attach additional special conditions to any individual grant award in the discretion of the subgroup assigned to allocate that court's grant award. Individualized special conditions may be imposed on the basis of information received via the peer review process, a referral from the Standards & Certification Committee, grievance process, treatment fidelity monitoring process, or any other source of information within the discretion of the Funding Committee. Additional special conditions are designed to ensure that a program is meeting state standards and is operating in line with best practices.

IV. Grant Application Procedures for Supplemental Grants

Supplemental grants are limited to courts that received a fiscal year operating grant. Grant procedures for supplemental grants are the same as for fiscal year operating grants with the following exceptions: supplemental grants do not require courts to complete an NOI or Court Operating Profile Report.

Generally, notice of availability of supplemental grant funding will be sent in the fall, usually in September, over the listserv. Grant applications are due back in October, reviewed by the Funding Committee in November, and funds are made available for the second half of the fiscal year (January 1 through June 30). Specific deadlines will be established each year by CACJ staff and all deadlines will be included in the grant solicitation. Courts will be notified of funding award decisions in writing, though notice may be sent electronically.

V. Grant Application Procedures for Emergency Operating Grants

Emergency Grants are limited to courts that received a fiscal year operating grant. The

procedures for applying for and awarding emergency grants are the same as for the fiscal year operating grant with the following exceptions: the NOI and court operating profile report are not required, and the Funding Committee may make emergency grant funding decisions via email or conference call rather than an in-person meeting.

Notice of the availability of emergency grant funds is generally released in January over the listserv. Grant applications are due back in February. Specific deadlines will be established each year by CACJ staff and all deadlines will be included in the grant solicitation. Courts will be notified of funding decisions via email. When awarded, funding is available for the fourth quarter of the fiscal year (April 1 through June 30).

VI. Grant Administration Procedures After Award

A. Overview

All grant awards are reimbursement grants that utilize a court's county finance department as the fiscal agent for the grant. Once a grant award is made, courts will expend county funds to pay for program expenses and then seek reimbursement using the procedures outlined below.

B. Subgrant Expenditure Reports (SER)

1. Overview

The SER form is used by courts to submit requests for reimbursement. It should be submitted to a court's assigned Grants Specialist at CJCC no later than 15 days after the end of each reporting period. The mandatory reporting period is quarterly, but reports can be submitted monthly in a program's discretion. The form should be completed by a person designated by the court for this purpose and sent directly to the program's assigned grant specialist at CJCC. Forms are due by the 15th of the month after the close of the reporting period. Specific instructions will be in each grant award.

2. Penalties for Late Filing

In order for the CACJ and CJCC to effectively and appropriately administer grant funds and account for the state appropriations, SERs must be timely filed. For this reason, filing SERs by the deadline is imperative. If a court fails to file a required SER by the established deadline, a 10% penalty will be assessed after expiration of a 10-day grace period. If assessed, the penalty will be based on the initial grant award and a de-obligation notice will be sent to the court's judge, coordinator, county commission, and finance director. A court can request an extension of the SER deadline to avoid penalty only if it has faced significant extenuating circumstances (such as a severe weather event

which required closure of offices).

C. Subgrant Adjustment Requests (SAR)

1. The SAR form is used by courts to request adjustments in the budget allocation in their grant award that modifies the scope, but not the amount, of the grant budget as outlined in the initial grant application and award. For example, if a program wants to switch from cup tests and install a lab, but has enough money allocated for cup tests to do so, the program may need to submit an SAR to pay for training and personnel associated with the lab and purchase of reagents. The purpose of the form is to reallocate funds between approved categories, thereby modifying the original budget request. The SAR form can also be used to designate personnel changes, points of contact, and other programmatic changes. SARs are submitted to a program's designated grant specialist at CJCC and may be rejected within the CJCC's discretion if a request does not comply with Georgia or federal law, or if the request impacts a program's ability to operate in accordance with the standards.
2. No SARs will be accepted in the first quarter of the fiscal year. However, after the first quarter, SARs will be accepted at any time for any reason within the grant period. However, an SAR cannot be used to move money from one fiscal year to another, and an SAR will not be accepted after the grant period closes.

D. Funding Waiver

Per grant requirements listed in Section VII, at least 25% of awarded funds must be spent in the first quarter. If this condition is not met, any unused, remaining funds from that quarter will be retained by the CACJ to be managed by the CACJ Funding Committee. If a court is unable to spend the required 25%, they may request a Funding Waiver. A Funding Waiver will only be considered in the first and second quarters of the fiscal year. A Funding Waiver will only be granted if a court can provide a sufficient explanation as to why funds were not spent as required. The Form can be found under the CJCC Website. If a Funding Waiver is granted, courts are still expected to expend 50% of their grant by the end of the second quarter. For assistance or details for the Funding Waiver, a program should contact their assigned Grant Specialist with CJCC.

VII. General Conditions of Any and All Grants Awarded by the Council

A. Requirement of Strict Compliance

1. All accountability court programs receiving state appropriated funds must strictly comply with all conditions of grant awards as outlined in Section b below. Any failure to comply with any condition of a grant award may

subject a court to decertification pursuant to Article 8.

2. Further, courts subject to additional special conditions must strictly comply with those conditions as well.
3. The term “subgrantee” refers to the court program receiving grant funding through the Council.

B. General Conditions of All Grant Awards

1. All project costs not exclusively related to activities of the funded accountability court must be approved with a Subgrant Adjustment Request, and only the costs of approved project-related activities will be reimbursable under the Subgrant Award.
2. The subgrantee must submit Subgrant Adjustment Request #1 with its signed completed award documentation. The adjustment request is accompanied by a detailed project budget that itemizes all projected expenditures as approved by the Funding Committee. This initial SAR is part of the grant activation process and enables the CJCC to initiate the grant. The project budget and summary will not be established, or officially approved, until the subgrantee receives a written approval notice from the Criminal Justice Coordinating Council. All project costs and project activities must coincide with the approved budget, summary, and implementation plan unless subsequent revisions are approved by the Criminal Justice Coordinating Council.
3. The subgrantee must submit subsequent Subgrant Adjustment Requests to revise the budget, project summary, and implementation plan prior to any substantial changes, but no later than 30 days prior to the end of the subgrant period.
4. The subgrantee agrees that no funds shall be expensed outside of the approved budget. In addition, any funds spent under this subgrant award must be expended by the grant end date and not encumbered.
5. The subgrantee agrees that at least 25% of the awarded funds will be spent in the first quarter, 50% in the second quarter and 75% in the third quarter. If this condition is not met, any unused remaining funds from that quarter will be retained by the Council to be managed by the CACJ Funding Committee.
6. Waivers for the 25% expenditure requirement may be granted at the committee’s discretion for the 1st and 2nd quarters only. If a waiver is granted, the funds held over to the next quarter must be spent in the next quarter.

7. This is a reimbursement grant. Requests for reimbursement must be made on a quarterly basis. Subgrant Expenditure Reports are due 15 days after the end of the reporting period. SERs may be submitted monthly.
8. The subgrantee certifies that state funds will not be used to supplant funds that would otherwise be made available for grant-funded initiatives. State funds must be used to supplement existing funds for program activities and not replace funds appropriated for the same purpose. Potential supplanting will be the subject of application review, as well as pre-award review, post-award monitoring, and audit. If there is a potential presence of supplanting, the subgrantee will be required to document that the reduction in non-state resources occurred for reasons other than the receipt or anticipated receipt of state funds.
9. Statistical and/or evaluation data describing project performance must be submitted to Council of Accountability Court Judges (CACJ) on a quarterly basis using the prescribed format provided to the Subgrantee. Failure to submit all requested data on a timely basis will result in the withholding of grant funds on this subgrant and/or any other subgrant administered by CJCC until compliance is achieved. If reports are not received, funds for subsequent quarters may be rescinded.
10. The subgrantee certifies that 1) title to all equipment and/or supplies purchased with funds under this subgrant shall vest in the agency that purchased the property; 2) equipment and/or supplies will be maintained in accordance with established local or state procedures as long as the equipment and/or supplies are used for program-related purposes; and 3) once the project concludes and/or equipment is no longer utilized for its grant-funded purpose, the Criminal Justice Coordinating Council and the Council of Accountability Court Judges will be informed of the available equipment and determine its future use to assure it is utilized in furtherance of the goals and objectives of the grant program and the State of Georgia.
11. If a court uses a CSB/DBHDD enrolled provider for treatment and receives specific contracted funds for mental health and/or addictive disease treatment court services, these funds have been awarded provisionally. Prior to use, the court must meet with the CSB/DBHDD enrolled provider to determine what services are billable and are not being provided. These funds should only be applied to services that are not billable by the CSB/DBHDD enrolled provider. The court should work to enter into agreement with the CSB/DBHDD enrolled provider that outlines billable and non-billable services.
12. All drug, veteran, mental health, family, and DUI courts must use a

validated assessment tool approved by the Council of Accountability Court Judges. All courts are required to use evidence-based treatment modalities.

13. Subgrantees must comply with the training requirements as determined by the Council of Accountability Court Judges. All evidence-based training attendees will be required to sign and submit the Evidence-Based Training MOU upon registering for CACJ supported training sessions. The court shall implement the evidence-based treatment within 60 days of the training attendee achieving certification.
14. All evidence-based training attendees that achieve certification are subject to fidelity monitoring by the CACJ Treatment Support Fidelity Specialist and/or by comparable assigned staff. Subgrantees shall provide treatment scheduling documentation to CACJ to support the fidelity visit.
15. Subgrantees in receipt of funds to support participant treatment are subject to fidelity monitoring by the CACJ Treatment Support Fidelity Specialist and/or by comparable assigned staff. Subgrantees shall provide treatment scheduling documentation to CACJ to support the fidelity visit.
16. Subgrantees in receipt of funds to support internally provided, grant supported, evidence-based trainings must comply with the following: notify the CACJ of scheduled training sessions; enter into agreements with qualified evidence-based facilitators; submit an evidence-based MOU for each attendee to the CACJ prior to the start of training session; and provide the CACJ with documentation of each attendee achieved certification.
17. CACJ may designate preferred vendors or suppliers of products or services that are either on state contract or with which the CACJ has an agreement or contract in place. Subgrantees may be required to utilize such contracts or agreements for designated products or services or be required to justify that their purchases are less costly.
18. Non-compliance with any of the special conditions contained within this document, by the authorized official, project officials and/or employees of this grant, will result in a recommendation to the CACJ Funding Committee that the award be rescinded.
19. Subgrantees must follow all accountability court standards as approved by the Council of Accountability Court Judges.

VIII. Miscellaneous

- A. Nothing in these Rules is intended to contradict any federal or state law or policy,

or any CJCC rule or policy, and should not be construed as such.

- B. CACJ and CJCC have the right to promulgate and require courts to use additional forms not outlined in these Rules. Courts will be notified of any additional requirements by staff in a timely and reasonable manner.

IX. Request for Reconsideration

- A. Program may request a one-time reconsideration of their fiscal year operating grant award by appealing directly to CJCC.
- B. Programs must file their request for reconsideration within ten business days of their receipt of the award. The request must include a copy of the original grant request, as well as a written statement explaining the ground for their request. Additional documentation is recommended but not required.
- C. Requests for reconsideration will be considered in the order in which they are received. In any event, the Funding Committee will issue a final decision within 45 days of receipt by CACJ staff.

ARTICLE 5. PEER REVIEW PROCESS

I. Governing Statutes and Overview

Georgia law requires Adult Drug Court programs, Adult Mental Health Court programs, Veteran Treatment Court programs, DUI Court programs and Family Treatment Court programs receiving state funds to undergo a peer review process every three years “for the purpose of improving drug court division policies and practices and the certification and recertification process.” O.C.G.A. § 15-1-15(a)(4)(F). The Council is tasked by Georgia law with creating and implementing the peer review process for each type of accountability court. Any court receiving state-appropriated funds is required to submit to the peer review process pursuant to Georgia law. CACJ staff are tasked with developing the peer review process and ensuring that the process is continually improved to stay up-to-date with national best practices for peer review, and to take advantage of innovations in technology and training. Since peer review is required by Georgia law, a program must comply with the peer review process to continue receiving state-appropriated funds.

II. Peer Review Initiation and Scheduling Procedures

A. Definitions

1. “Peer Team” refers to the court staff who visit the Peer Site and conduct the peer review process.
2. “Peer Site” refers to the program undergoing peer review and being evaluated by the Peer Team.
3. “Peers” refers to both groups.

B. Peer Review Manual

A sample manual is available upon request from Council staff. Council staff shall provide teams with manuals sufficiently in advance of the date of the scheduled peer review.

C. Duties of Peer Teams and Peer Site and Requirement of Good Faith Cooperation

1. Peers must be willing to commit the time and energy required for successful peer review process and must participate in the process in good faith.
2. Peers must follow the processes outlined in the manual provided by Council staff. If peers have questions, they should consult with the Council staff attending the peer review.
3. Staff and the peer team must be permitted by the peer site to observe the

program's normal day-to-day operations.

4. Peers must follow the direction of Council staff as instructed. Council staff have the final decision-making authority about the logistics of a peer site visit.
5. Council staff and the peer team must have access to peer site personnel and program participants in order to be able to talk openly with primary team members and a random selection of program participants. Program participants to be interviewed shall be selected by a methodology determined by Council staff.

D. Site Visit Procedures

1. Timing

Peers must be willing to commit to a minimum of two days for a peer site visit. For multi-county, multi-judge, or multi-track programs, the suggested time is three days.

2. Selection of Peer Team and Peer Site Members

- a. Staff will select teams with an eye toward minimizing travel costs for all participants as much as possible. However, Council staff ultimately have discretion and final decision-making authority over the matching process.
- b. New courts will not be visited prior to 18 months from the date of the court's implementation. Determination of the date of implementation shall be in Council staff's discretion.
- c. Ultimately, the selection of peer teams and peer sites, and of which team members attend for each peer team and peer site, is completely within the discretion of Council staff.
- d. If selected, a peer team must commit to no fewer than two site visits per calendar year.

3. Observations

- a. At a minimum, the peer team and staff must observe one staffing and one court session at the peer site. Where multitrack programs are visited, the peer team and staff must observe a staffing and a court session for each program at the peer site.
- b. The peer site must operate court normally and should not alter

procedures simply because the peer team is visiting. If procedures are altered for the peer visit, additional observations by the peer team or staff may be necessary.

4. Participant Focus Group

- a. Peer sites will be required to assist in coordinating a focus group of select participants and must do so in good faith. The focus group shall be representative of the program's composition, including representatives from each phase.
- b. Focus group participants will be chosen in a manner determined by Council staff.

5. Debrief and Exit Interviews

- a. Peers must participate in the exit interview process as outlined in the peer review manual, and the exit interview must be scheduled as close to the end of the site visit as possible. Peers should also make themselves available for a debrief call to take place no less than one month after the peer site visit concludes. Staff has discretion to extend that time where they deem it necessary and appropriate.

III. Peer Review Summary Report, Blended Learning Plan, and/or Action Plan

- A. Council staff will generate a draft peer review summary report, which will be circulated around the peer team for comments. The report will contain any necessary operational changes identified during the peer review process. Compliance with the report is mandatory in order for a program to continue to receive state-appropriated funds.
 1. The report may include a blended learning plan, an action plan, or a customized combination of implementation tools. CACJ staff have discretion to determine whether to implement operational recommendations via a blended learning plan, action plan, or only via a summary report. Throughout these Rules, the term "report" refers generally to the peer review summary report, blended learning plan, action plan, or any of these.
 2. In addition to operational changes, the report may require the peer site to engage in additional training or meetings, such as a strategic action planning session. These meetings may result in the generation of additional recommendations, such as an action plan. The action plan will be added to the summary report or blended learning plan and is also mandatory.

- B. The report, when finalized, will be sent by Council staff to the presiding judge and coordinator to be shared with their team. The report contains a section for the presiding judge to confirm acknowledgement of receipt of the report, and the judge must respond to the report within the deadlines established by staff. The peer site's acknowledgment must contain a statement from the program, signed by the judge, that they have received the report and will work to meet the recommendations.
1. If the peer site disagrees with the contents of the report, they must include that in their letter/statement along with their reasoning. If a program disagrees because they believe they already meet the requirement, then they can supply additional supporting documentation. There may also be cases where a program disagrees with a recommendation that was not related to standards. Programs that disagree with these operational recommendations should still articulate why they cannot or will not follow the recommendation. Council staff/peer review team is authorized to continue communication with the program until a satisfactory result is reached.
 2. CACJ staff have authority and discretion to amend or add recommendations to the report if new information arises during the implementation process that indicates that a program is not in compliance with the standards, with Georgia or federal law, or was altering the operations during the peer visit. CACJ staff may amend the recommendations with the consent of the presiding judge of the peer team.
- C. CACJ staff will follow up with the program on the status of implementation of the report on a timetable to be determined by staff in staff's discretion. If the program is found to be out of compliance with state standards, in violation of Georgia or Federal law, or in violation of any condition or special condition of funding, staff may require reporting by the program on a more frequent basis, up to and including weekly. This will allow staff to monitor progress made and provide assistance needed in a timely fashion. Through this process, Council staff shall offer resources and/or technical assistance to support the program's efforts to meet the peer review recommendations, as budget permits. Staff has discretion to amend the timetable for compliance upon written request from the program.
- D. If the program has not been able to implement the operational changes recommended in the report on the recommended timetable, Council staff will prepare a written report assessing the program's progress toward compliance with the recommendations in the report. This report may contain additional recommendations and may discuss additional information that developed after the finalization of the peer review summary report. This report will be sent to the Chair of the Standards and Certification Committee and to the program coordinator and presiding judge. This report shall be completed by staff pursuant to the timetable in the report.

- E. The program will have 10 business days to respond in writing to the contents of the report.
 - 1. If the program disputes the contents of the report, it must submit an explanation in writing. If the program feels it has now corrected any deficiencies, it may submit additional documentation along with its written response.
 - 2. If the program does not dispute the report but plans to continue implementing the operational recommendations in the original peer review summary report, the program shall outline a timeline for implementation and explain what specific steps will be taken. The program may satisfy this by updating the original strategic planning action plan table.
- F. After receipt of the program's response, the Chair or its designee shall review the matter within 30 days of receipt. In the Chair's discretion, he or she may assemble the full Committee to conduct the review. The Chair may grant a program additional time to become compliant, in the Chair's discretion. If a program remains noncompliant, the Chair will issue written findings detailing the manner in which the program remains noncompliant with the standards, Georgia or federal law, or any condition of its funding. The Chair will then move forward with the procedures outlined in Article 8(C) below.
- G. All responses and letters related to the peer review process will be kept on file at Council offices along with other peer review materials.

IV. Staff Discretion and Authority to Refer Matters at Any Time to the Chair of the Standards and Certification Committee

- A. In the event a program's peer review findings contradict information submitted during certification, or the program is found to be out of compliance with state standards, in violation of Georgia or Federal law, or in violation of any condition or special condition of funding, or is generally found to have significant deficiencies, Council staff may, in their discretion, notify the Chair of the Standards and Certification Committee at any time during the peer review process, and are not bound by any timelines established in these Rules or in the summary report or blended learning plan if the deficiencies appear significant and need immediate attention from the Chair.
- B. After Chair review, if the matter cannot be resolved informally, the Chair will send a letter to the presiding judge and to the program coordinator that outlines the issues in detail and encourages the program to correct the deficiencies as quickly as possible. A copy of the letter will be sent to the full Standards and Certification Committee. Staff will offer technical assistance and resources as budget allows. This letter will provide additional details as to how the program should report

progress to the Standards and Certification Committee. If this process does not result in resolution of the issues in the Chair's discretion, the matter may be referred to the full Standards and Certification Committee pursuant to Article 8.

- C. If a program refuses to work toward correcting a failure to meet a mandatory standard, a practice that implicates a violation of Georgia or federal law or regulation, a violation of any condition or special condition of funding, or which represents a significant departure from best practices, Council staff may refer the matter to the Standards and Certification Committee to proceed pursuant to Article 8(D)(d).

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ARTICLE 6. TREATMENT FIDELITY MONITORING

I. Overview

Nationally recognized and established research in the accountability court field demonstrates that participant outcomes are significantly improved when participants receive evidence-based treatment interventions delivered reliably and with fidelity to the treatment model by appropriately trained treatment providers.

The CACJ has created this treatment fidelity monitoring process to provide technical assistance and to ensure adherence to treatment models for accountability court programs utilizing evidence-based treatment programs. By ensuring fidelity to the treatment model, the CACJ will assist in improving evidence-based programs' effectiveness. To ensure model fidelity, programs should regularly provide proper training and ongoing support for staff.

The term "Treatment Fidelity Monitoring" refers to the Council's process for ensuring that courts receiving state-appropriated funds are delivering evidence-based treatment with fidelity to the treatment model. The process centers around a site visit conducted by a Treatment Support Fidelity Specialist or similar Council staff personnel.

Fidelity to program model integrity includes three parts: (1) Training of treatment providers in evidence-based curricula; (2) supervision and coaching of treatment providers, and (3) adherence to fidelity of evidence-based curricula.

II. Process

A. Site Selection

1. Treatment Fidelity Monitoring sites will be selected by Council staff in their discretion. Council staff will strive to visit as many sites as possible as budget and logistics constraints permit, with a focus on providers trained by CACJ and on courts that receive funding for evidence-based treatment listed in subsection (B)(1)(c) below. Programs may request a site visit but are not guaranteed to be visited.
2. Programs selected for a site visit, either at their request or otherwise, must comply with the process and must participate in good faith. As outlined in Article 4, compliance with this process is a special condition of all state-appropriated funds administered pursuant to these Rules.
3. To be selected, a program must be administering an evidence-based treatment curriculum including, but not limited to, Cognitive Behavioral Interventions for Substance Abusers (CBI-SA), Thinking for A Change (T4C), and Moral Reconciliation Therapy (MRT). Upon approval by the CACJ, a program may administer an experimental treatment modality that

is being evaluated as an evidence-based treatment.

B. Pre-Site Preparation

1. Once selected, the site should familiarize itself with the procedures in the handbook available on the CACJ's website. The site must comply with procedures in the handbook.
2. Prior to the site visit, the site will be required by staff to submit certain documentation timely and must comply with all deadlines.
3. Programs must cooperate with the scheduling process in good faith.

C. Site Visit

1. Most site visits will last one or two days depending on the program's schedule. CACJ staff may extend the length of a visit in their discretion.
2. Council staff and program staff shall work together to schedule on-site activities in the most efficient manner and with great consideration for group schedules and program routines, with a focus on limiting disruption to both participants and treatment providers.
3. The Treatment Support Fidelity Specialist will observe at least two group sessions. Staff, in their discretion, may observe additional program activities, including but not limited to, groups, staffing, or court.

D. Post-Site Visit and Model Fidelity Report

1. After the site visit, staff will complete a Model Fidelity Report within one month of the conclusion of the site visit. The Report will outline Council staff's findings and give constructive feedback to treatment providers.
2. If any training or coaching needs are identified in the Report, Council staff will provide technical assistance to ensure those needs are met. These needs may be met by Council staff or by referral to other training or coaching resources. This may require a program to adjust its training budget to accommodate these needs.
3. Additional follow up site visits may be conducted by Council staff in their discretion and as needed.
4. If the Treatment Fidelity Monitoring process reveals significant noncompliance with standards, Council staff may at any time immediately refer the program to the Standards and Certification Committee to conduct an investigation pursuant to Article 8.

III. Noncompliance with Model Fidelity Report

- A. Where a program does not or cannot implement the recommendations in the Model Fidelity Report such that it places that program in violation of grant conditions under Article 4, Council staff will alert the Chair of the Funding Committee. Where a program's deficiency implicates a significant failure to meet standards, Council staff may refer the matter to the Standards & Certification Committee pursuant to Article 8 in staff's discretion.
- B. Upon receipt of a referral, the Chair of the Funding Committee will review the matter and send a letter to the program outlining the deficiencies and recommending changes that need to be implemented to avoid a violation of special conditions. The letter shall include a timeline tailored to the program's needs and nature of the violations.
- C. If the program disputes the contents of the Model Fidelity Report or the letter from the Chair or both, it must submit an explanation in writing. If the program feels it has now corrected any deficiencies, it may submit additional documentation along with its written response. If a program refuses to comply with this process, the Chair will refer the matter to the full Funding Committee for review of whether the matter violates special conditions and if deobligation is necessary.
- D. If the program does not dispute the Model Fidelity Report or the letter from the Chair, it should indicate this in writing as well and outline its plan for returning to compliance with treatment fidelity principles and for implementing the recommendations of the Report and letter.
- E. After receipt of the program's response indicating that they are planning to comply or believe they are now in compliance, Council staff will provide a report to the Chair on the program's status and progress pursuant to the timeline in the Chair's noncompliance letter.
- F. If staff believes the program has achieved compliance, staff shall inform the Chair and the program in writing. The Chair may request additional information and may refer the matter to the full Funding Committee for review if the Chair differs from staff's recommendation.
- G. If staff conclude, in their discretion, that the program remains noncompliant, staff will inform the Chair in writing in a report that outlines their findings. A copy shall be sent to the program. The Chair may, in his or her discretion, grant a program additional time to become compliant, in his or her/its discretion. If a program remains noncompliant, the Chair will refer the matter to the full Funding Committee and will include written findings detailing the manner in which the program remains noncompliant with conditions of its funding. The Committee will then move forward with the procedures outlined in Article 8.

ARTICLE 7. GRIEVANCE PROCEDURES

I. Overview

A. General Overview

Any accountability court participant, member of the general public, accountability court team member or staff, or any person whatsoever may use these procedures to file a grievance with the Council. The Council wants to assist in the resolution of any legitimate concerns regarding an accountability court's compliance with the standards, and will provide technical assistance, as budgets permit, to assist in the resolution of any issues.

B. Summary of Process

Grievances will be reviewed first by Council staff, who may dismiss a grievance in their discretion. Council staff will escalate any grievances with merit to the Grievance Committee, which may attempt to resolve it informally. If it cannot be resolved, they will escalate the issue to the Standards & Certification Committee. If a grievance is found to have merit, and is not corrected after the procedures outlined below, the Council may, but is not required to, proceed to decertification as described in Article 8 below.

C. Jurisdiction

The Council can only receive and act on grievances regarding accountability courts within its jurisdiction. This includes certified courts, provisionally certified courts, and courts operating under certification waivers, as well as any other accountability court in Georgia that may otherwise be receiving state funds through the Council. The Council does not have jurisdiction over any other type of court, including any accountability courts that may be operating without certification and/or without funding through the Council.

D. Anonymity and Confidentiality

Complainants may choose to remain anonymous and to keep their grievances confidential from the relevant accountability court program, and the Council will take all practicable steps to preserve that anonymity when requested. However, if a complainant chooses to remain anonymous and requests that their grievance be kept confidential, the Council will be inherently limited in what action it can take to resolve a grievance without revealing the identity of the complainant or of the complainant's connection to a program. Complainants who wish to remain anonymous will need to be aware that the Council may be extremely limited in its ability to conduct a review of the issues raised by their grievance without jeopardizing confidentiality, however, the Council will strive to respect a complainant's wishes in this matter. However, even if a complainant desires

confidentiality, if the Council deems the matter serious enough to warrant breaching the confidentiality of the grievance and/or anonymity of the complainant, the Council has the authority to do so.

E. Informal Resolution

At any point during the process outlined in this Article, Council staff, the Council's designee, the Grievance Committee, or the Executive Committee may determine that a matter raised as a grievance is best resolved via informal action, rather than by a formal adherence to these procedures. Situations that would best be resolved informally include, but are not limited to, a grievance that is based on a misunderstanding of the standards, Georgia law, or the nature of accountability courts themselves. When resolving a grievance informally in this matter, Council staff will strive to explain the misunderstanding to the complainant, and they may do so in writing or verbally. The decision to resolve a grievance informally is wholly within the sole discretion of the Council's staff, Council's designee, or a Council Committee doing so. The Council may also resolve other grievances with dismissal in its sole discretion. When a grievance is resolved informally, Council staff or the Council's designee will document the grievance and prepare a short written report of how the grievance was resolved and why.

F. Representation or Advocacy of behalf of Any Person, Including Participants and Applicants, is Prohibited

Neither the Council nor Council staff can act as advocate for an individual person or complainant in the grievance process or in any accountability court program. In particular, Council staff cannot act to take any action on an individual participant's case, nor can they represent a participant or applicant. The Council does not have the power to compel a program to take any particular action regarding a participant or applicant, nor can the Council or Council staff stop a program from proceeding with a particular course of action. Complainants should retain an attorney if legal action needs to be taken on behalf of a participant or applicant.

G. Composition of Grievance Committee

The Grievance Committee is a special committee created pursuant to Article VII, Section 1(b) of the Council's by-laws. The Chair of the Executive Committee has designated the power to appoint the members of the Committee, and to set their terms and to replace or remove them in the Chair's discretion, to the Chair of the Standards and Certification Committee.

II. Filing Procedures

A. Initial Filing of a Grievance

- I. Any person, including but not limited to, any accountability court

participant; family member, acquaintance, or friend of an accountability court participant; former or current accountability court staff or team member, may file a grievance with the Council, so long as they have knowledge of the subject matter of the grievance. A person who files a grievance will be referred to as the “complainant” for the purposes of these rules. An online form is available on the Council’s website. Persons wishing to file may also call Council staff if they prefer to submit their grievance verbally rather than in writing. Contact information for Council staff is available on the Council’s website.

- II. The Council itself and Council staff are not limited by these procedures, and should the Grievance Committee receive information demonstrating a court’s failure to comply with the standards or Georgia or federal law, it may refer the matter immediately under Article 8 procedures regarding decertification.
- III. If a grievance is received by phone, Council staff will complete a Grievance Form with the information. If filled out online, the complainant must fully complete the Grievance Form for it to be accepted.

III. Preliminary Review by Council Staff

- A. Council staff will make an initial evaluation of the grievance to determine whether or not if, on its face, the grievance constitutes a violation of the standards or of best practices generally. Council staff will also evaluate the grievance to determine whether it is not credible on its face, and may dismiss a grievance at that time, without consultation with the Grievance Committee. Council staff may consult with a Council member, or the Council’s designee, in their discretion, during this process.
- B. If a grievance can be resolved by an informal explanation to the complainant of the applicable standards and best practices, then Council staff will attempt to resolve the issue in this manner.
- C. If the grievance is not dismissed at that time, the staff member will then forward the grievance form (or create one, if the grievance was received via phone call), with staff’s summary and analysis, to the Council’s designee for review.

IV. Investigation

- A. Upon receipt of the Grievance Form, the Council’s designee will review the Grievance Form and conduct an initial assessment. If the Council’s designee determines that the allegations, on their face, do not indicate that a program has violated any standards or best practices, the Council’s designee may dismiss the grievance at that time.

- B. If the Council's designee determines that the grievance arises from a misunderstanding regarding the standards, best practices, key components, Georgia law, or from any other source, the Council's designee may resolve the grievance by informally explaining and informing the complainant of the misunderstanding.
- C. If the Council's designee determines that the grievance may represent a violation of the standards or some other violation that would implicate a program's compliance with certification and/or with program requirements tied to state funding, the Council's designee will prepare a short, written initial assessment of the matter within ten (10) business days of receipt.
- D. After preparing the written assessment, the Council's designee will begin an informal investigation into the grievance. This investigation may include, but is not limited to, interviewing relevant witnesses, and requesting documents and written information from the relevant program. Programs must comply with the requests of Council staff and the Council's designee during this process.
- E. During this time, Council's designee may continue to monitor a situation, rather than continuing on with this process, particularly where the complainant requests or consents to this. Ongoing monitoring may be followed by dismissal or by an escalation of the grievance, in the Council's designee's discretion, as the situation develops.

V. Grievance Committee Procedures

- I. If the Council staff, in conjunction with the Council's designee, determine that an investigation has developed potential evidence of a violation of standards, of Georgia law or Federal law, or of the conditions of any funding source, the Council's designee will prepare a written investigative summary within sixty (60) days of making this determination.
- II. The investigative summary will be forwarded to the Grievance Committee for their review. This summary can include a staff recommendation on action and proposed letters, but it is not required to do so.
- III. The Grievance Committee will review the investigative summary and will make a determination regarding any additional investigation needed, in its discretion. If additional investigation is needed, the Grievance Committee will instruct Council staff accordingly.
- IV. Upon conclusion of any investigation, if the Grievance Committee determines either that a matter has been sufficiently corrected or resolved, or that the facts developed do not merit movement towards decertification but can be resolved with ongoing technical assistance, the Grievance Committee may resolve a grievance at this time. The Grievance Committee is not required to escalate a grievance if it

concludes that escalation is not necessary.

- V. However, if, upon conclusion of any investigation, the Grievance Committee determines that there is some evidence that a program is, or has been:
1. in violation of the standards;
 2. in violation of Georgia or Federal law;
 3. operating in a manner contradictory to information provided in its certification application; and/or
 4. in violation of any condition or special condition of funding received from the Council or the CJCC;

then the Grievance Committee will cause a written report to be prepared and sent to the program coordinator and presiding judge outlining the program's deficiencies and encouraging the program to correct the deficiencies as quickly as possible. The report will also recommend specific action the program must take to become compliant, and will also outline any technical assistance the Council can offer to assist with this process. The report will include a timeline in which the program will be required to correct the deficiencies. It may include a strategic planning table that the program will be required to complete during this process, but is not required to contain one.

- VI. Council staff will monitor the program's compliance with the Grievance Committee's report pursuant to the timeline in the report and provide any technical assistance as needed and as budget allows. If the deficiencies are not corrected within the timeframe provided for in the report, Council staff will report back to the Grievance Committee. The Committee may extend the time for compliance based on a showing of material progress toward compliance.
- VII. If the program successfully returns to compliance and corrects any and all deficiencies outlined in the report, the grievance will be dismissed. Council staff shall keep the written record associated with the grievance in compliance with record retention policies.
- VIII. If the program fails to correct the deficiencies outlined in the report in a timely fashion, the Grievance Committee will cause a summary report, along with all relevant documents regarding the program, to be forwarded to the Standards and Certification Committee.
- IX. The program will be required to prepare a written explanation of its position in the matter, which will be included in the report submitted to the Standards and Certification Committee. It may include any supporting documentation as needed.

ARTICLE 8. NONCOMPLIANCE, DECERTIFICATION, AND TERMINATION OF FUNDING

I. Overview

The Council, pursuant to its statutory duty to create a certification process to ensure that state-funded accountability courts adhere to the standards, must correspondingly take action to decertify a program that is unable or unwilling to adhere to the standards. As programs must remain certified to receive state funding, decertification can ultimately lead to termination of funding if a program does not become compliant pursuant to these Rules. Similarly, the Council must take action to decertify programs that are in violation of Georgia or Federal law, or those that are in violation of any condition or special condition of any funding received through the state.

Any member of the Standards and Certification Committee who presides over a court in the same circuit as a program undergoing procedures under this Article shall recuse themselves from consideration. The Chair of the Executive Committee shall appoint a Council member to serve in any recused Committee member's place.

II. Receipt of Information that a Program may be Non-Compliant

A. When the Chair of the Standards & Certification Committee receives information that a program is, or has been:

1. in violation of the standards;
2. in violation of Georgia or Federal law;
3. operating contradictory to information provided in its certification application; and/or
4. in violation of any condition or special condition of funding received from the Council or the CJCC;

then the Chair will review the information and any other documentation as needed, in the Chair's discretion, to evaluate the allegation, within thirty (30) days of receipt of the information.

B. The Chair, in his or her discretion, may cause additional investigation to be conducted through Council staff, but is not required to do so. If the Chair finds that the noncompliance has been corrected, he or she may resolve the matter without further action. Written notice will be sent to the presiding judge and coordinator by Council staff.

III. Initial Notice of Noncompliance to Program

A. After review and evaluation, if the Chair determines that a program is noncompliant, the Chair will cause a written Notice of Noncompliance report to be prepared outlining the program's continued deficiencies and noncompliance. This

report will include the following information:

1. A detailed statement of the factual nature of the alleged deficiency;
2. An explanation of why the deficiency is a violation of standards, in violation of Georgia or Federal law, contradictory to information submitted with certification, or in violation of any condition or special condition of funding received from the Council or the CJCC;
3. Specific operational recommendations that will need to be implemented to return to compliance, which may include an action plan or strategic planning table;
4. A timeline for compliance;
5. A statement of any technical assistance that will be provided to assist in correcting the deficiency; and
6. An acknowledgement form to be completed by the program and signed by the presiding judge.

The report may include other requirements for the program or other information based on the nature of the program's noncompliance.

CACJ staff or the Chair will transmit this report to the presiding judge and coordinator of the program.

IV. Acknowledgement by Program

- A. Within two weeks of receipt, the presiding judge must acknowledge receipt of the report to the Chair and to the Executive Director. Acknowledgment may be sent via email.
- B. Acknowledgement of receipt must include a copy of the acknowledgement form, which must be signed by the presiding judge.
- C. The program must also indicate in its acknowledgement:
 1. Whether it accepts the report's findings and plans to follow the report's operational recommendations, or
 2. Whether it disputes the report's findings, or
 3. Whether it acknowledges that it was previously noncompliant but can show it has achieved compliance since the report was issued. If so, it shall submit additional documentation and an explanation supporting this assertion.
- D. If a program has come into compliance since the original report was issued, the Chair may deem the matter resolved, however, a letter will be sent to the presiding judge and coordinator of the program and will be kept in the program's grant file.

V. Procedure Where Program Indicates Intent to Comply with Operational Recommendations

- A. If a program indicates that it plans to follow the report's operational recommendations, the presiding judge and all program staff must cooperate in good faith with Council staff in implementing the directives and timeline in the report.
- B. Council staff will coordinate with the program, in compliance with the report's timeline, for the provision of any technical assistance that may be needed, as budget permits.
- C. Council staff will submit a summary report by the deadline set in the noncompliance report, informing the Chair of the Standards and Certification Committee of whether the program has complied with the operational recommendations and/or is now in compliance.
- D. If new deficiencies are uncovered during this process, Council staff may ask the Standards and Certification Committee to amend the original noncompliance report accordingly.
- E. The Chair has discretion to extend any deadline for good cause shown.
- F. If a program remains in noncompliance as determined by the Standards and Certification Committee, Council staff will prepare a report summarizing the matter and then proceed to Section G below.

VI. Procedure Where Noncompliance Report is Disputed by Program; Submission of Response

- A. When a program disputes the content of the noncompliance report, it must submit a detailed written response outlining its reasoning. This response must be received by the Standards and Certification Committee within thirty (30) calendar days of the program's receipt of the noncompliance report. The response may contain additional supporting documentation and any other material the program deems relevant. A program may request and be granted a one-time extension of forty-five (45) days from the original deadline.
- B. If a program disputes that it is deficient because it disputes the factual allegations contained within the noncompliance report, it must indicate what specific facts it disputes and provide documentation supporting its position with its response.
 - 1. The Standards and Certification Committee will review the response and will attempt to reconcile the alleged factual disputes. The Committee may cause additional investigation to be conducted, but is not required to do so.

- C. If a program accepts the factual findings in the noncompliance report but disputes that these facts represent a failure to comply with standards, Georgia or Federal law, or that they violate a condition of funding, the program must indicate, in detail, why it feels its practices are in compliance in its response. The program's response must indicate in detail why the presiding judge and coordinator believe that the program's practices are in compliance.
 - 1. The program should cite to national expert sources to defend its position where possible. The program may also cite to other state's laws and best practices if applicable, or to any other source to support its position.
- D. If a program disputes both the facts of the noncompliance report as well as whether it is functioning in a noncompliant manner, it shall include an explanation of both those facts in its response, including all requirements outlined above in Sections b and c.

VII. Procedures for Committee's Final Determination of Failure to Comply

- A. After receipt of a program's response pursuant to Section F, or of the final report by Council staff of noncompliance pursuant to Section E, the Standards and Certification Committee shall convene a deliberation meeting to consider the merits.
 - 1. This meeting will be private. This meeting may be conducted via conference call.
 - 2. CACJ staff shall inform the presiding judge and coordinator of the date of the meeting at least 60 days in advance.
 - 3. The Committee may, in its discretion, permit a program to send representatives to appear in person before the Committee at the meeting. The presiding judge, coordinator, and other team members may be invited to attend the meeting, however, the meeting may occur without their presence.
 - 4. The presiding judge or their designee may offer a written brief and any supporting documentation as well, but it must be received by CACJ staff at least 30 calendar days prior to the date of the meeting. This brief may include affidavits of staff supporting its position, and any other documentation in the program's discretion.
 - 5. At this meeting, the Committee must make findings of fact regarding the nature of the program's noncompliance. If the Committee finds evidence that the program has violated any standard, violated any Georgia or Federal law, or is in violation of any condition or special condition of

funding, then the Committee must determine whether the program's certification should be removed or altered.

6. If the Committee determines that a program is in violation of the standards, grant conditions, or any law, but that the deficiencies does not merit decertification, the Committee may reduce the program's status from fully certified to provisionally certified. The Committee may provide additional technical assistance, in its discretion and as resources are available, to assist the program in achieving full certification again.
- B. After the meeting, the Committee will issue written findings of fact regarding whether the program has violated any standard, violated any Georgia or Federal law, or is in violation of any condition or special condition of state funding.
1. If the program is found to be in violation of a law, rule, standard, or condition, the written findings shall indicate whether the Committee is decertifying the program or changing its status to provisionally certified.
 2. If the program is found to be in compliance with all applicable standards, Georgia and Federal law, and all the conditions and special conditions of state funding, in addition to issuing findings to that effect, the Committee will also issue findings to that effect.
 3. A record of the findings shall be kept in the program's grant file.

VIII. Decertification and Termination of Funding

- A. If the Committee decertifies a program, it will send a copy of its written findings to the Funding Committee and to the Executive Committee. The Executive Committee will review the matter and forward a recommendation regarding certification and funding to the CJCC and to the Funding Committee within ten business days. Records regarding this matter will be maintained in the program's grant file.
- B. Council staff will update the Council's website and any applicable records and internal files to indicate that the program has been decertified or had its status reduced to provisionally certified.

IX. Record Retention

All records pertaining to any proceeding under this section will be retained by Council staff pursuant to any applicable record retention schedule and Georgia law.

X. Recertification

If a program is decertified, it may apply for certification again. However, it must

apply for certification as though it were a newly implemented program and must complete a new certification application in full, including completion of a new NOI. It must also submit a written report of what changes have been implemented to address the issues raised by its earlier decertification.

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ARTICLE 9. DATA COLLECTION

I. Overview

Pursuant to Georgia law, the Council of Accountability Court Judges is tasked with developing and managing an electronic information system for performance measurement and with accepting submission of performance data in a consistent format from accountability courts. The Council is further tasked to identify elements necessary for performance measurement. OCGA § 15-1-15(b)(4)(E), et al.

Data collection is not only required by statute, but it is also a research-based best practice. Programs that maintain data in an electronic database and regularly review that data have better outcomes than programs that do not. Data collection can lead to programmatic changes that improve participant outcomes and may help the program identify inefficiencies and potential cost savings. Reliable data can be a powerful tool when teams are requesting additional funding from local governments. Finally, aggregate data from all of the state's accountability court programs, which demonstrate reductions in criminal recidivism, help convey the power of the accountability court model to all stakeholders.

To carry out this statutory mandate, the Council has developed a data collection process. Accountability court programs that are certified, provisionally certified, or are in receipt of state funds through the CACJ or CJCC shall report data as provided by these Rules, the Data Collection Manual ("manual"), Data Collection Toolkit ("toolkit"), and as directed by CACJ staff. The manual and the toolkit are described in detail below. CACJ staff or their designee shall perform quality control on the data and shall contact courts where they detect irregularities in the reported data, or where the received data does not contain all requested data elements. Where reported data contains irregularities, courts may be permitted by CACJ staff or their designee to resubmit data. Courts shall work collaboratively and in good faith with staff and the case management vendors to ensure prompt and accurate data reporting.

Data shall be reported by courts quarterly through the court's case management system. Data shall be reported by courts via their case management system no later than the 15th of the month following the end of the quarter of the state's fiscal year. Courts are required to report all requested data elements and shall not skip or omit requested data elements. Courts that wish to report data after the deadline must contact CACJ staff prior to the reporting deadline to request an extension. Extensions will only be granted to courts facing significant extenuating circumstances (such as a severe weather event which required closure of offices). A failure to report data accurately and timely may subject a court to the decertification procedures of Article 8.

II. Data Collection Manual

The Data Collection Manual outlines the data collection process and provides definitions of each data element. It describes the requested data elements in detail, outlining possible options for reporting for each element. It is available on the CACJ website.

III. Data Collection Toolkit

The Data Collection Toolkit provides practical guidance about accountability court workflow at every stage, from referral to graduation, for the purpose of streamlining a court's data collection and reporting process. The toolkit contains sample forms, workflow guides, and best practices lists to help inform daily operations in all accountability courts. The goal of this toolkit is to improve data collection and precision by providing a practical guide for data collected at each stage in a participant's time in accountability court.

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ARTICLE 10. TRAINING, CASE MANAGEMENT SYSTEMS AND OTHER RESOURCES

I. Statement of Principal

Ongoing training is critical to the success of accountability courts. CACJ strongly encourages accountability court team members to go beyond the required mandatory minimum training and recommendations described below. New team members should take advantage of all available training, including NDCI and other national training resources, before they begin work on a team and while they are being on-boarded. Current team members should regularly utilize additional training opportunities whenever possible. The field of accountability courts is a fast-changing one, and new research develops every year. Staying aware of current national best practices and research should be a goal of each and every team member. Whether a team meets or exceeds training requirements will be considered by the Funding Committee in the grant process.

II. Requirements and Recommendations for Training for Accountability Court Team Members

A. CACJ Annual Training Conference

1. Attendance Requirement

All core team members shall attend the CACJ Annual Training Conference every other year. Core team members are defined in Section 4 below. When conference attendance is limited to fewer team members than those on the list below, the team may use its discretion in determining which members to bring. If a program does not have team members currently serving in all the defined roles, it may bring additional team members in other roles to fill those slots.

2. Substitution of NADCP National Conference

If a team attends the NADCP national conference, it can substitute that conference for the CACJ Annual Training Conference. However, in that event, the team must attend the CACJ Annual Training Conference the next year after the national conference (and not the year after). Thus, the substitution of the national does not permit a team to leave a four-year gap between attendance at CACJ Annual Training Conferences. If the team attends the national conference, they will have to attend the CACJ Annual Training Conference the third year after their last attendance at the CACJ Annual Training Conference.

3. Substitution of Team Members

- a. If one or more core team members cannot attend, a substitute may

be sent in their place, as long as that team member generally fulfills the same function. Thus, for example, if the defense attorney is unavailable, the team may substitute another member of the public defender's office. Similarly, if one of the primary law enforcement officers is unable to attend, another officer involved in the program may attend. A team may substitute a team member with a different role with the written permission of CACJ staff. A judge cannot be substituted for the presiding judge of the accountability court.

- b. If no substitute is available and permission is not granted for a substitute from a different role, the team may apply for a waiver of that team member's attendance. Waiver forms are available on the CACJ website. The absent team member will be required to complete an equivalent number of hours of training as directed by CACJ staff.
- c. When a core team member cannot attend, even if a substitute attends in their place, the absentee team member is strongly encouraged to complete an equivalent number of hours of training. Absent team members should contact CACJ staff for direction on appropriate substitute hours.

4. Core Team Members Defined

- a. The core team members defined below are those defined by NDCI and NCDC for use in their tune-up trainings. Not all accountability courts will have team members serving in each role. Where teams have fewer team members than the number of core team members defined below, they may bring a substitute team member from a different role to fill that slot, as outlined in Section (B)(a)(iii) above.
- b. Adult Felony Drug Court, Juvenile Drug Court, Adult Mental Health Court, DUI Court:
 - i. Judge
 - ii. Coordinator
 - iii. Prosecutor
 - iv. Defense Attorney
 - v. Treatment Provider
 - vi. Law Enforcement Officer
 - vii. Probation Officer
 - viii. Case Manager (if applicable)
- c. Veterans Treatment Court:
 - i. Judge

- ii. Coordinator
- iii. Prosecutor
- iv. Defense Attorney
- v. Treatment Provider
- vi. Law Enforcement Officer
- vii. Probation Officer
- viii. Case Manager
- ix. Veteran Mentor Coordinator

d. Family Treatment Court:

- i. Judge
- ii. Special Assistant Attorney General (SAAG)
- iii. Parent Attorney
- iv. Child Attorney
- v. Prosecuting Attorney
- vi. Defense Attorney
- vii. Program Coordinator
- viii. Department of Family and Children Services (DFCS)
- ix. Court Appointed Special Advocate (CASA) or other child advocate
- x. Community Policing Officer or Surveillance Officer
- xi. Case Manager
- xii. Treatment Provider or Substance Abuse Professional

B. Tune-Up Training and Refresher Training

1. Applicability

This section only applies to court programs for which NDCI tune-up training or CACJ refresher training is available.

2. Attendance Requirements and Recommendations

All accountability court programs, with all core team members present, must attend tune-up or refresher training every three to five years. Programs should strive to attend every three years, but may attend every fourth or fifth year if attending every third year is not possible. In their certification and grant applications as applicable, the team will be asked to explain why they could not attend every third year.

3. Substitution and Waiver

Teams shall use the same process for substitution and waiver as for the CACJ Annual Training Conference described in Section (B)(a)(iii) above.

C. Requirements for New Judges

New presiding judges are required to attend new judge orientation.

D. Requirements for New Coordinators

1. New coordinators are required to attend the next available new coordinator orientation after hiring. Programs should ensure that this requirement will be able to be satisfied by any prospective coordinator candidates before hiring. Substitute new coordinator training may be available in extraordinary circumstances for good cause shown. However, this requirement can only be waived with the written permission of CACJ staff. Teams should contact CACJ staff for more information.
2. New coordinators will be required to become certified within two years of date of hiring. If a coordinator's start date with the court is later than their date of hiring, the later date may be used for this calculation. Coordinators must complete 21 hours of online training and a minimum of 3 hours of in-person training during the first twelve months of employment. The failure to obtain certification timely may result in the deobligation of grant funding pursuant to Article 8.
3. Coordinators may be required to attend and complete additional training in order to comply with state Standards. If additional training is necessary, CACJ staff will work with the coordinators to implement training in a timely fashion, and coordinators must work in good faith to complete all necessary training in a timely fashion.

E. Requirements and Recommendations for Treatment Providers

1. Before beginning to administer any treatment services or curricula to accountability court participants, all treatment providers must be appropriately licensed and certified to administer those curricula and services. Similarly, they must be appropriately licensed and certified to administer any clinical services to any accountability court participant.
2. Certification in certain evidence-based curricula may be available through CACJ training. However, treatment providers are responsible for obtaining the appropriate certifications and licenses to administer the curricula and services that they were retained to provide, and if CACJ training is not available, they must become certified or licensed appropriately through another training provider before beginning to administer curricula or services. Treatment providers must obtain the appropriate certification prior to administering evidence-based curricula on their own via other training if CACJ training is not available. CACJ is not required to provide certification training to all treatment providers,

and spots in CACJ training may be limited by available funds.

3. In addition to mandatory training via the CACJ Annual Training Conference and attendance at any applicable tune-up or refresher training, it is highly recommended that treatment providers who administer Moral Reconation Therapy (MRT), Cognitive Behavioral Interventions for Substance Abusers (CBI-SA), and Thinking for a Change (T4C) curricula attend booster training every three years at a minimum.
4. Treatment providers must keep any licenses and certifications that they hold current and in good standing and are required to report any lapse in licensure or professional discipline to the coordinator and presiding judge. When making a report to the coordinator and presiding judge under this paragraph, the report must be in writing and signed by the treatment provider. These reports shall be kept confidential unless disclosure is deemed appropriate in the discretion of the presiding judge.

F. Requirements for Attorneys

1. All attorney team members must stay current with CLEs and state bar dues. Attorneys must report any lapse in license and any professional discipline (public or private) to the presiding judge.
2. When making a report to the coordinator and presiding judge under this paragraph, the report must be in writing and signed by the attorney. These reports shall be kept confidential unless disclosure is deemed appropriate in the discretion of the presiding judge.

G. Requirement of Training of New Team Members

Standard 9.1 for Adult Felony Drug Courts, Veterans Courts, DUI Courts, Family Treatment Courts, and Juvenile Drug Courts requires that programs have a formal policy for the training of new team members. In order to implement this standard, all certified accountability court programs are required to create and maintain a written policy detailing how new team members are trained.

H. Reporting of Training and Effect of Failure to Meet Training Requirements

1. Mandatory and recommended training requirements will be reported primarily during the certification and grant application process. However, CACJ staff may request proof of training attendance from a program at any time.
2. Failure to attend mandatory training may subject a program to Article 8 proceedings. Additionally, failure to keep adequate records of training and irregularities in record-keeping may subject a program to Article 8

procedures as well.

I. Funding and MOUs

1. Teams are encouraged to anticipate the cost of funding training attendance, both mandatory and recommended, and to include it in their grant requests.
2. Teams are also encouraged to incorporate mandatory and recommended training requirements into their MOUs with stakeholder agencies. MOUs should specify that the team member from that agency is expected to be available to attend mandatory and recommended training.

II. CACJ-Provided Training

- A. Each year, the CACJ provides trainings for the Accountability Courts. Trainings include team tune-ups and evidence-based practice and assessment trainings.
- B. Technical assistance and training will be provided as budget allows and at the discretion of Council staff. The training calendar may fluctuate year-to-year based on the availability of resources. While CACJ strives to provide a wide variety of training opportunities tailored to the needs of Georgia's accountability courts and that instruct in national best practices, CACJ is not required to provide any training opportunities other than the mandatory minimum training required above.
- C. The next fiscal year's training schedule will be released at the end of the fiscal year, and will be located on the CACJ's website as well as emailed to courts via the mailing list. A link to the current fiscal year training calendar can always be found on the CACJ website.
- D. Registration: each court's coordinator is responsible for registering their team members for training. As point of contact for the court, the coordinator will receive an announcement of when registration opens, how/who to register, how to reserve lodging for the attendee (if applicable), and how to receive reimbursement for travel and meals.

III. Sample Forms on Website

CACJ staff shall maintain a list of sample forms on the CACJ website. These are subject to change at any time. The sample forms are a collection of documents generated by other courts as a resource pool to be used as reference guides for courts, and they are not created or promulgated by the Council.

IV. Case Management Systems

In order to improve the efficiency of operations in all certified and state-funded

accountability court programs, and to streamline the data reporting process required by Georgia law, the Council has contracted with two service providers to provide case management systems to courts.

Through these contracts, the vendors have agreed to provide each state-funded court a case management system and training for the system. Each vendor provides the basic case management software; an integrated document management module; a randomizer module for randomizing drug screens; court analysis, system implementation, and implementation training services; conversion of active participant data if needed; system hosting and maintenance services, and ongoing help desk support.

CACJ provides accountability courts a one-time opportunity to select one of the two contracted case management systems, typically selected during the court's implementation phase. Pursuant to the state contract, CACJ funds the one-time implementation cost and the ongoing annual hosting and maintenance expense associated with each system. Hosting and maintenance costs are funded bi-annually.

On or about the beginning of each state fiscal year, CACJ will contact any new implementation courts and provide each with a Case Management Selection Form. The court should then contact each vendor separately to set up a meeting to review the product. Courts shall participate in demonstrations of both case management systems to determine which system will best meet the needs of the court. Once a court has decided on a preferred system, the court shall return their completed selection form to CACJ.

Once the selection form has been received, CACJ will contact the selected vendor and system implementation can begin. Court staff shall actively participate in and complete the case management system implementation process as directed by the selected vendor. Once system implementation is complete, the selected vendor provides the court with a system acceptance form to be signed by the court. A copy of the acceptance form shall be forwarded to CACJ staff by the vendor along with a final system implementation invoice for processing.

As with all resources provided by the Council, the availability of case management systems is subject to state funding and any ongoing hosting and maintenance may be eliminated, reduced, or otherwise changed in the discretion of the Council. Case management system training is a one-time opportunity for a court, and the state contract does not provide for additional training of replacement staff. Courts shall institutionalize case management system knowledge and use (either through cross training or standard operating procedures) to ensure that the continuity of case management system use is seamless in the event of staff turnover. A court's new team member orientation policy shall outline how new team members will be trained on the use of the selected case management system.

V. Other Resources

On the CACJ website, CACJ staff will host a list of links to a variety of other state, federal, and national policy organizations. CACJ staff should ensure the resource directory is

maintained and that links are updated and that new content is added as new resources become available. Court programs should regularly consult the resources section of the CACJ website.

ARTICLE 11. OTHER PROGRAM REQUIREMENTS

I. Confidentiality

Programs must comply with HIPAA and any and all other state and federal privacy laws. Any program that appears to be operating in violation of HIPAA, or which had previously operated in violation of HIPAA, is subject to the decertification procedures of Article 8. Programs unsure of whether they are in compliance may seek the input of Council staff.

II. Intellectual Property Laws

Programs must comply with any and all applicable intellectual property laws and must obtain all necessary permissions and training for use of any intellectual property utilized in the treatment and in their program. Any program found to violating any intellectual property law, or which had previously operated in violation of any intellectual property law, is subject to the decertification procedures of Article 8. Programs unsure of whether they are in compliance may seek the input of Council staff.

III. Compliance with Georgia and Federal Law

Programs must comply with Georgia and Federal law. Programs that have violated Georgia or Federal law, or those which are currently not in compliance with Georgia or Federal law, will be subject to the decertification procedures of Article 8.

ARTICLE 12. ADVISORY OPINIONS

I. Overview

The Executive Committee may issue either Private or Public Advisory Opinions. The decision to issue an Opinion of any type is solely within the Executive Committee's discretion. Advisory Opinions shall be authorized by a majority vote of the Executive Committee. Advisory Opinions include any official opinions or policy statements issued pursuant to Article XIII, Section 1 of the by-laws of the Council, and any official opinions or policy statements issued under that section shall follow these procedures.

II. Private Advisory Opinions

A Private Advisory Opinion may be requested by any accountability court staff member, team member, any judge in the state, or Council member who seeks guidance as to the Council's position on a certain matter. The person requesting the Private Advisory Opinion

shall include all information relevant to their request. The Executive Committee may request additional information.

The Board shall keep confidential the identity of the person making the request for a Private Advisory Opinion. A Private Advisory Opinion will only be sent to the person making the request and shall not be disseminated in any manner whatsoever. It is not binding on the Council in any matter other than the one specific factual situation giving rise to the Opinion and has no precedential value.

III. Public Advisory Opinions

The Executive Committee may, from time to time, publish a Public Advisory Opinion which illuminates one or more issues in the standards, key components, or any other issue relevant to accountability courts. These opinions may also contain recommendations for the improvement and administration of accountability courts, including the recommendations of new legislation or repeal or modifications of existing laws. These opinions may be based on facts derived from requested Private Advisory Opinions, deleting reference to the names and places of the parties, or upon an assumed statement of facts.

Public Advisory Opinions may be requested by any accountability court staff member, team member, or Council member and the Council may decide to issue an Opinion without being requested to do so. The Executive Committee may, in its discretion, grant a request for a Public Advisory Opinion to other persons or groups, however, it is not required to do so. The Council has no duty to offer an Opinion when requested, and the decision to issue an Opinion rests in the sole discretion of the Executive Committee.

IV. Retention and Publication of Advisory Opinions

Council staff shall store all Private and Public Advisory Opinions in an easily retrievable manner, organized by date and by topic, so that any and all Advisory Opinions may be easily consulted and retrieved.