



Adams County Court for Veterans

A Probation Alternative for Those Who Served

BY BRIAN BOWEN, WITH CONTRIBUTIONS
FROM DARNELLE O'HAIR

“**T**he things they carried were largely determined by necessity, . . . can openers, pocket-knives, [and] . . . chewing gum. Because you could die so quickly, each man carried at least one large compression bandage. . . . And each carried a green plastic poncho. . . . In April, for instance when Ted Lavender was shot, they used his poncho to wrap him up, then to carry him across the paddy, then lift him to the chopper that took him away.”¹

We owe those who served our country a debt we cannot repay, for the things they

carried and, for some, the things they carried home with them. This article discusses the genesis and work of the Adams County Court for Veterans (ACCV), formed specifically to serve those who served.

The Genesis

A large percentage of our veterans return home and transition back into productive, strong, and vital members of their communities. Indeed, on balance, veterans are more likely to be homeowners, own businesses, and vote than the general population.² But some veterans struggle

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when they return home. They may suffer from devastating injuries both seen—lost limbs or other physical injuries—and unseen—post-traumatic stress (PTS), traumatic brain injury (TBI), depression and anxiety, moral injuries, and substance use. In struggling with their injuries and acute traumas, a small portion of these veterans wind up in the criminal justice system.

It is against this backdrop that, in 2013, I learned that the U.S. Department of Veterans Affairs (VA) was using social workers to identify veterans serving jail time in an attempt to provide them additional services and treatment opportunities. As a trial judge, I knew we could do better for our veterans than simply sentencing them to jail. And intervention and treatment, as opposed to jail time, made sense. After all, we owe a great debt to our veterans, who have sacrificed so much to serve. This is where the ACCV journey began.

Getting Going

The Seventeenth Judicial District already had progressive, evidence-based specialty courts, including a drug treatment court. So, when approached about the formation of a specialty court with the express mission of treating veterans, then Chief Judge C. Vincent Phelps not only authorized the new court, but strongly supported it.

While hard data on the scope of the need was hard to come by, no one doubted the need

was there. To get going, we examined the 10 key components developed by the National Association of Drug Court Professionals, and later modified for veteran treatment courts.³ As modified, these key components are

1. integration of alcohol, drug, and mental health services;
2. a non-adversarial approach;
3. early identification of and prompt placement of participants;
4. access to a continuum of treatment;
5. monitored substance abstinence;
6. coordinated responses to participants' compliance;
7. ongoing individualized interactions;
8. evaluation to measure effectiveness of programming;
9. interdisciplinary education addressing planning, implementation, and operations; and
10. forging partnerships with VA agencies (public and private) and community-based organizations.⁴

With the key components identified, we spent the next 13 months building the program. This included forming a team, recruiting volunteers, devising protocols, and creating appropriate programs, all coordinated by Tasha Buettenback, the Seventeenth Judicial District's problem-solving court coordinator.

During the building phase, we attended national specialty court trainings and Colorado Collaborative for Nonprofits court trainings. We consulted with Judge David Shakes, the presiding judge of the Fourth JD's veteran's treatment court, who provided a wealth of practical guidance and insight. We partnered with key stakeholders, including the Adam's County District Attorney and Public Defender offices, the probation department, community treatment providers, Veteran Justice Outreach, and the Adams County Veteran Service office. And we provided training on, among other things, military culture, PTS, TBI, moral injury, and trauma informed practices for our team members, partners, and many tireless volunteers.

Beyond all this, we firmly embraced an element incorporated into the first veteran treatment court (established by Judge Robert Russell in Buffalo, New York). Judge Russell's pioneering

court included peer mentoring, a component that was unique to veteran treatment courts. To develop an effective mentoring program, the ACCV team asked Jack O'Connor, the mentor coordinator for Buffalo's veteran treatment court, to come train the ACCV mentors, and he graciously accepted our request.

And, finally, we named the court. In doing so, we intentionally omitted the word "treatment" from the name, recognizing the social and cultural stigmas that may be associated with the term.

The ACCV formally commenced in January 2014.

Eligibility

The ACCV is a probation alternative intended for high-risk, high-need individuals. Referrals to the ACCV may be made by anyone, including the public defender, private defense counsel,

the deputy district attorney, law enforcement, the court, or family members. To be eligible, an individual must have served in the U.S. military and must not be facing charges for a class 1 felony, a class 1 drug felony, or a sex offense.⁵

The ACCV team screens referrals biweekly. Screening includes an LSI-R (Level of Supervision Inventory-Revised) assessment to determine the level of community or probation supervision needed for a potential participant.⁶ To be eligible for ACCV consideration, a referral must have an LSI-R of 20 or more. Screening also includes a review of the charged offense, plea, and history. To determine whether a referral is eligible and recommended for ACCV, the ACCV uses a consensus model with voting and input from the district attorney's office, public defender's office, and probation team members. No one member is the gatekeeper. No one has a veto. The team is realistic, pragmatic, and in all things,

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hopeful. The screening team also receives victim input. Victims often support ACCV, recognizing that the veteran will get help.

Once the screening is complete, a memorandum is sent to the court where the charges are pending. The judge then uses the screening determination as part of the sentence. If the person was accepted by the ACCV, then ACCV may be considered as a probation alternative by the sentencing judge in determining the appropriate sentence. The ACCV accepts 48% of referrals, but about 7% decline entry into our rigorous program.

Treatment Phases

The treatment program is broken into four phases and is intended to last 12 to 24 months, although some participants take longer to complete the program. Each phase is intended to reorient participants to community resources, engage them in meaningful treatment, and help them achieve greater life satisfaction.

Phase I: Orientation

The participant is assessed for and referred to treatment with appropriate treatment providers. The team investigates the participant's housing, sobriety, employment, and education or appropriate equivalents. Sobriety is not required during this phase, but is strongly encouraged. This phase lasts for 30 days.

Phase II: Discovery/Continued Care

The participant has continued court contact and treatment engagement (monitored, if applicable, through random drug testing). There is exploration and engagement into stable housing or in-/out-patient treatment. Depending on the assessed needs, services may include domestic violence, DUI programing, individualized mental health treatment, cognitive behavioral treatment, moral recognition therapy, and increased mentor engagement. This phase continues for 90 days, with a requirement that the participant remain sober for 30 days.

Phase III: Stabilization

The ACCV team works on ongoing treatment and care with the participant. They work to secure ongoing long-term housing, employment or educational and post-educational planning, chronic health treatment and care, and earned benefits. The participant also explores pro-social activities and engagement. This phase lasts 120 days, with a 60-day sobriety requirement.

Phase IV: Maintenance and Mission Completion

The participant engages in continued treatment and explores aftercare and long-term planning for community reengagement. This phase lasts 120 days, while the sobriety requirement expands to 90 days.

Feedback

The ACCV team provides timely and appropriate responses to participants' compliance, or noncompliance, with their treatment programs. Positive responses include verbal praise, certificates, gift cards, gradual decreased court appearances, phase advancement, and "dog-tags" for each of the four phase advancements. Negative consequences include verbal admonishment, court time, community service, loss of time calculations (delay in advancement), and occasionally, limited time in custody.

And to encourage compliance and expand participant engagement, the ACCV has offered yoga, explored Phoenix Mission's multi-sport sober activities (even parachuting), hosted a barbeque, and offered a variety of presentations from motivational guest speakers and community programs.

The ACCV also provides TBI screenings to identify cognitive deficits and strategies to address these very real challenges. The TBI screenings are conducted through a partnership with Dr. Kim Gorgens, PhD, a clinical professor with the University of Denver, who adopted the TBI screening protocol.

Mentors

Judge Robert Russell, the founding father of veteran treatment courts, refers to mentors as the "secret sauce" to veteran treatment courts.

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Mentors are not probation officers or officers of the court. They are community volunteers who previously served in the military and understand the challenges of transitioning back to the civilian world. Mentors attend court hearings and engage with the participants before, after, and sometimes during the hearing. And as “battle buddies,” they can lend an ear, offer advice, and provide guidance to participants.

Darnelle O’Hair leads the ACCV mentor program. Mentors are oriented to the ACCV program and provided training about their role and the many resources available to participants. Mentors sometimes chat with the participant on the phone or over coffee, visit a participant in custody, or provide meal gift cards, bicycles, homewares, fresh socks, and the occasional ride. All of it adds up to a meaningful reminder that the participant is not alone.

Participants in the ACCV have indicated the value of the mentors. Even those participants who did not engage or rely on a mentor say they appreciated having the mentors as an available resource. It has been a powerful reminder of the importance that one-on-one contact can make. Tough times happen, folks get off track, but our mentors leave no veteran behind.

Tracking Success

We recognize data tracking is important; however, it is nonetheless challenging. The ACCV program has a 45% completion rate, a positive result for this high-risk, high-need population.

Currently, participants graduate from ACCV in an average of 445 days. Perhaps this is a result of improvements in the screening process and early engagement with participants to find and access appropriate resources and services.

Of participants who have successfully completed the ACCV program, we are aware of only one who had a later serious, non-traffic-related offense. Of the participants who concluded but did not complete the program, 6 out of 32 (18.8%) persons have picked up a new serious charge, much lower than the national average for the general population.

What the ACCV team has noticed is *harm reduction* in the lives of its participants. This appears to be related to the social and community

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resources and the connection or re-connection with other service members.

And a side benefit of the ACCV program is that the team has identified over 70 veterans currently on probation who are now able to benefit from our enhanced training, awareness, knowledge, and expertise regarding resources and community programing, even though their cases do not rise to the level of intensive programing.



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NOTES

1. O’Brien, *The Things They Carried* (Houghton Mifflin Harcourt 1990).
2. Fottrell, “Veterans are more likely to Be homeowners,” MarketWatch (Nov. 11, 2014), <https://www.marketwatch.com/story/veterans-are-more-likely-to-be-home-owners-2014-11-10>.
3. National Association of Drug Court Professionals, “Defining Drug Courts: The Key Components” (Jan. 2, 1997); Justice for Vets, “Ten Key Components of Veterans Treatment Courts” (Oct. 2004), <https://justiceforvets.org/wp-content/uploads/2017/02/The-Ten-Key-Components-of-Veterans-Treatment-Courts.pdf>.
4. Justice for Vets, *supra* note 3.
5. Adams County Court for Veterans Policy and Procedures: Model and Target Population at 5–6.
6. LSI-R: Level of Supervision Inventory–Revised, copyrighted assessment tool of MHS Assessments, Multi Health Systems, Inc.
7. <https://thephoenix.org>.

Recognition

All of us who work in the ACCV recognize and thank the many people and partners, private and public, who contribute to our work and without whom the ACCV would not be possible. We particularly thank Judge Robert Russel and Jack O’Connor, who helped lay the groundwork for the ACCV and its mentor program. We are also grateful to Chief Judge C. Vincent Phelps (ret.), Judge David Shakes, Judge Leroy Kirby, the judicial officers and staff in the Seventeenth JD, Brenidy Rice and Mike Burtis at the State Court Administrators Office, and our Veteran Justice Outreach social workers, including Todd Brossart, Nathan Viton, and Paul Deutsch. And finally, we thank those legislators who support our veterans and the ACCV.

Conclusion

While still in its relative infancy, the ACCV is working daily with our many partners to improve outcomes for our veterans who are entangled in the criminal justice system. We are seeing much success and continue to improve and tailor our treatment services to allow us to better serve veterans. The ACCV team, myself included, is honored to participate in the ACCV, and we are all enriched by the experience. For all those who have served, who have been deployed, or who took the oath and offered to lay down their life for our country, a sincere thank you and “Welcome home!” ^{CL}