

FY 2022 JAG APPLICATION CHECKLIST

Please check the list below against the items returned in this packet to ensure that all pertinent information is enclosed.

- Subgrant Application summary Form
- Statement of the Problem
- Objectives and Projected Impact
- Implementation Plan/Project timeline
- Sustainability Plan
- Budget Summary
- Budget Narrative
- Evaluation Plan
- Non-Supplant Certification
- Equal Employment Opportunity Plan Certification
- One Original copy of the application package
- Copy of SAM Registration (sam.gov)
- 2022 Drug Court Data Sheet
- Waiver Letter & Supporting Documentation
- Award Letter & Budget from AOC *No letter yet*
- Ten Key Components of Drug Court
- 2022 Certification and Assurances by the Chief Executive of the Applicant Government

All of the above award documents should be returned by June 30, 2023.

SUB-GRANT CONTACT PERSON

DATE



STATE OF MISSISSIPPI
DEPARTMENT OF PUBLIC SAFETY
DIVISION OF PUBLIC SAFETY PLANNING

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 Grant No.

SUBGRANT APPLICATION SUMMARY

1. Applicant (Name, Address, Zip, Phone, Email) Madison County Juvenile Drug Treatment Court 146 W. Center Street Canton, Mississippi 39046	2. Project Director (Name, Address, Zip, Phone) Amy Nisbett 601-855-5698 146 W. Center Street Canton, Mississippi 39046	3. Financial Officer (Name, Title, Address, Zip, Phone) Greg Higgenbotham 601-855-5580 146 W. Center Street Canton, Mississippi 39046
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4. Project Title <p style="text-align: center; font-weight: bold;">FY 2022 JAG Drug Court</p>	5. DUNS Number: <u>8843887370000</u> Tax ID. Number: <u>1646000658A2</u>
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6. Type of Application <input type="checkbox"/> Initial <input type="checkbox"/> 2 nd Yr. or <input checked="" type="checkbox"/> <u>9</u> Yr. Funding <input type="checkbox"/> Continuation of Grant No. _____	7. Desired Project Duration <u>12</u> Months Start Date: August 1, 2023 End Date: July 31, 2024
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8. Brief Project Summary (required)
 Developing Strategies to motivate juvenile offenders to change. Juvenile substance abusers have never hit the floor bottom. It is the desire of the Madison County Juvenile Drug Treatment Court to develop that bottom so the offender can realize what substance abuse leads to such as crime and a desolate life.

9. Budget Category	Requested	Approved by DPSP
a. Personnel	78,700.00	
b. Fringe Benefits	32,170.72	
c. Equipment	0.00	
d. Travel	0.00	
e. Operating Expense	0.00	
f. Contractual Services	0.00	
g. Miscellaneous	0.00	
Total Project Budget	110,870.72	

10. Source of Funds	Federal	%	St/Local Match	%	Total	%
Requested Budget						



11. Number of pages in this application	
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 Chief Administrative Officer (Signature and Date)

 Project Director (Signature and Date)

 Chief Administrative Officer (Type or Print)

 Financial Officer (Signature and Date)



**STATE OF MISSISSIPPI
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PROJECT PLAN AND SUPPORTING DATA

PART I. STATEMENT OF PROBLEM

Madison County is a suburban County that borders Jackson, the capital city of Mississippi. As crime increases in our Capital city, we have seen an increase in drug use among juveniles. Madison County has a very diverse population. Our county contains two school districts. In the northern part of the county our problem is poverty, poor education and broken family units putting youth at risk. In fact, it is one of the lowest performing school districts in the entire country. In the southern part of the county, the schools are successful and the graduation rates are high. However, drug abuse is no respecter of socioeconomics. Drug use among the youth throughout our county extends beyond the typical gateway drugs to opioids, spice, heroin, crystal meth and benzodiazepines.

Our Juvenile Drug Treatment Court services youth from all corners of the county. In some cases, we service youth who reside in Jackson. For our youth located in the northern part of the county, the courthouse facilities are available for youth services. In the middle and southern parts of the county, our counselors are meeting juveniles in public places to accommodate transportation issues. Our parents have difficulties being engaged in the program due to the distance required to travel for court appearances or meetings. We need office space in the southern portion of the county to be most effective.

Madison County juvenile drug court participants ranged in age from 14 to 18 and of the 44 Madison County juvenile drug court participants there were 34 white/Anglo (79.5%). Gender was coded as 35 males (81.8%) and 8 females (18.2%). Due to the lack of diversity in the population and manageability race was dichotomized. Of the total juvenile drug court, 88.6% were Protestant. None of the 44 juvenile drug court participants reported being married or ever having been married, and no children were reported. Physical Disability Status was coded as 31 (70.5%), 1 Past Disability (2.3%), and 12 Present Disability, (27.3), Mental disability.

Three-fourths (75%) of Madison County participants had not graduated high school (16% had an 8th grade education or below and 59% had some high school). Five percent of participants had graduated high school, and 2% had obtained a G.E.D. Eleven percent of Madison County participants had some college education (likely through dual enrollment programs).

Seven (7%) percent of Madison County participants had unavailable or missing education data-substance abuse history among client status categories for Madison County participants. Alcohol use was prevalent in all client status categories, with 93.3% of active participants, 62.5% of graduates, 50% of absconded participants, and 100% of terminated participants reporting use at intake. Marijuana use, was reported by 90% of active participants, 87.5% of graduates, 100% absconded participants, and 100% of terminated participants. Powder or unspecified cocaine use was only reported by active participants, or (26.7%). No Madison County participants reported using crack cocaine at intake. Reported methamphetamine use was limited to active participants (16.7%). Little heroin use was reported among Madison County participants. Prescription drug use was elevated among active participants (46.7%), but slightly lower for graduates (25%) and absconded participants (25%). Other drug use was reported by 53.3% of active participants, 25% of graduates and 25% of absconded participants.

Substance abuse history with regards to race for Madison County participants; Alcohol use was reported by 88.6% of Caucasians and 66.7% of minorities. Marijuana use was nearly equivalent among Caucasians (82.9%) and minorities

(88.9%). The use of powder or unspecified cocaine was limited to Caucasians (22.9%). No crack cocaine use was reported by Madison County participants. Methamphetamine use was also limited to Caucasians (14.3%). No heroin use was reported. Prescription drug use was more prevalent among Caucasians (42.9%) than minorities (22.2%). Other drug use was, reported by 51.4% of Caucasians and 11.1% of minorities.

Another issue we face is parent ignorance. Every generation seems to be lost with the issues of the next generation. However, the drug culture has rapidly changed in the last 15 years in our area and parents are not equipped to understand or battle the current drug culture. We have had several waves of tragedies involving synthetic drugs leading to death or severe injuries. Our resources in Mississippi are few. Our tax base is the poorest in the country and our options for juvenile treatment are limited. Our JDTC team members field calls on a weekly basis from community parents who are struggling to parent teenagers through a drug crisis. We need to educate and equip our parents and provide treatment resources for our youth.

Data Demonstrating the Problem in Madison County

Madison County received six hundred forty six (646) referrals to youth court in 2017. The cases were split evenly between the southern portion of the county and the northern portion of the county. Our JDTC currently serves 32% of the youth on probation who were assessed to be moderate or high risk for reoffending. This percentage also coincides with a general public survey wherein 33% said that their family had been directly affected by drug abuse of a teenager.

A general survey of Madison County was conducted to measure public opinion as to the prevalence of drug abuse in Madison County. The results overwhelmingly demonstrate that there is a significant drug crisis in Madison County and the JDTC is the **only** community based resource (free of charge) for parents and youth in our community. The results of the public opinion survey are below:

3. To your knowledge, how prevalent is marijuana use among teenagers in Madison



Prevalence	Percentage	Count
A lot	46%	117
A moderate amount	42%	107
A little	11%	27
None at all	1%	2

4. To your knowledge, how prevalent is prescription drug abuse among Madison County teenagers?



Prevalence	Percentage	Count
A lot	28%	70
A moderate amount	50%	125
A little	20%	50
None at all	3%	7

Target Population- Our target population is juveniles between the ages of 14-18 involved in delinquent acts or chronic CHINS offenses **and** involved in substance use **and** who have a moderate to high risk of reoffending.

Current Attempts to Address the Problem and Proposed Changes

We currently have a Juvenile Drug Treatment Court and hold regular hearings in both the northern and southern part of the county. Our current attempts to address the problem of no office space in the southern part of the county are to utilize public spaces and public libraries for counseling purposes. While this has increased our ability to service the southern part of the county, it is not an ideal space for effective counseling.

In addition, we propose to add a family counselor to our JDTC team and require families to go through a minimum of three sessions of family counseling. See other sources used in the development of the program profile.¹

The State of Mississippi created a state strategy for sustainable drug court funding that established an administrative foundation for drug courts through the passage of legislation.

As a result, Mississippi Code Ann. § 99-19-73, stating that monies from this fund derived from assessments under Section 99-19-73 shall be distributed "to the drug courts where the respective violations occur in the state, and funds from other sources Municipalities and counties without drug courts), shall be distributed to the drug courts based on a formula set by the State Drug Court Advisory Committee". This law generated approximately \$5.1 million for Mississippi's drug courts. At present there are twenty-one (21) Circuit Drug Courts, three (3) Municipal Drug Courts and thirteen (13) county Juvenile Drug courts.

The Madison County Juvenile Drug court has been in existence since 2002. Since the beginning, we have seen approximately 800 youths come through our program with a very high success rate. More and more, these youths are presenting with co-occurring mental disorders; such as, drug induced mental illnesses. They have been placed on probation for either drug possession charges or the crime they committed was caused by their drug use. MCJDTC program has three phases totaling a minimum of ten months. The program consist of frequent counseling, urinalysis drug tests and sometimes referral to other programs such as outpatient counseling, inpatient counseling and/or AA or NA attendance.

Grants such as this in conjunction with the minimal funding from the Administrative Office of Courts allow MCJDTC to properly function and care for juveniles with drug abuse issues. We are well aware with concerns of the financial state of our state and country, but we believe that the youth of this country are our future and deserve a chance to be rehabilitated. The youth should be considered first.

Juvenile Drug Treatment Court is the first form of awareness of rule of responsibility and law which is foreign to many young people in today's society. One can imagine the type of life these juveniles' have to live through such as the drunken parent(s) or poverty and what they may have already experienced before making it to the court. From the life of survival to a life of fear; the value of knowing right and wrong, importance of education, and use of talent; "that many of these young clients did not have the luxury to develop." We are investing in today's youth because they will be tomorrow's parent, citizen and deserve a spiritual and wholesome life.

¹ Lattimore, Pamela K., Christopher P. Krebs, Phillip Graham, and Alexander J. Cowell. 2004. *Evaluation of the Juvenile Breaking the Cycle Program*. Research Triangle Park, North Carolina: RTI International. <https://www.ncjrs.gov/pdffiles1/nij/grants/209799.pdf>

Henggeler, Scott W., Jason E. Chapman, Melisa D. Rowland, Colleen A. Halliday-Boykins, Jeff Randall, Jennifer Shackelford, and Sonja K. Schoenwold. 2008. "Statewide Adoption and Initial Implementation of Contingency Management for Substance Abusing Adolescents." *Journal of Counseling and Clinical Psychology* 76(4):556-67. <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2603081/>

Sheidow, Ashli J., Jayani Jayawardhana, W. David Bradford, Scott W. Henggeler, and Steven B. Shapiro. 2012. "Money Matters: Cost-Effectiveness of Juvenile Drug Court With and Without Evidence-Based Treatments." *Journal of Child and Adolescent Substance Abuse* 21:69-90. <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3290130/>



**STATE OF MISSISSIPPI
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PROJECT PLAN AND SUPPORTING DATA

PART II. OBJECTIVES AND PROJECTED IMPACT

Our program goals were developed by our JDTC Team after spending several planning sessions carefully reviewing our current program in light of OJJDP's *JDTC Guidelines*. Our JDTC Team came up with the following Program Goals that, if achieved, will enhance our success and also bring our program into full compliance with the guidelines.

Program Goals

GOAL 1 - Reduce substance abuse among JDTC participants.

GOAL 2 - Reduce delinquent behavior among JDTC participants.

GOAL 3 - Reduce Educational failure.

GOAL 4 - We will bring our JDTC into full compliance with JDTC Guidelines during the funding period.

GOAL 5 - We will educate and equip JDTC parents to prevent or reduce delinquency or substance abuse.

GOAL 6 - We will reduce recidivism by providing semi-open aftercare community support groups for youth.

(Open to persons ages 14-18)

GOAL 7 - Increase parent engagement.

GOAL 8 - We will provide services that can restore familial relationships and provide stability for participants.

GOAL 9 - Enhance JDTC capacity for program quality assurance

INSTRUCTIONS FOR COMPLETING SUBGRANT APPLICATION SUMMARY

(DPSP Form A)

1. Enter the name, address, zip and telephone number of the Agency or unit of Government that will administer the project.
2. Enter the name, title, address, zip and telephone number of the person who will be charged with the responsibility of implementing and operating the project.
3. Enter the name, title, address, zip and telephone number of the person who will be responsible for financial matters relating to the project, such as accounting and financial reports, and who will be authorized to sign request for reimbursements of expenditures.
4. Enter or select the project title type.
5. Enter Jurisdiction DUNS # and Tax Id.
6. Enter Email address of the primary contact person.
7. Enter the desired project duration in months. (DPSP only awards 12 month maximum contracts.)
8. Develop a brief summary for the project. Explain the project operation and how objectives will be accomplished.
9. Enter total funds proposed to be spent on the project in the eight (8) major budget categories brought forward from DPSP Form A-3 Budget Summary.
10. Enter the appropriate match ratio in both dollar amount and percentage.
11. Enter the total number of pages in application.

NOTE: The application must be signed by a person duly authorized to enter into a contract, or contractually obligate funds on behalf of the agency or unit of government of the subgrantee: The head of the implementing agency and/or the financial officer. The application should be dated when signed and the appropriate title of the signor should be in the space provided.



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Goal 3- Reduce Educational failure among JDTC participants.

Goal 4- We will bring our JDTC into full compliance with JDTC Guidelines during the funding period.

Goal 5- We will educate and equip JDTC parents to prevent or reduce delinquency or substance abuse.

Goal 6- We will reduce recidivism by providing semi-open aftercare community support groups for youth
(Open to persons ages 14 to 18)

Goal 7- Increase parent engagement.

Goal 8- We will provide services that can assist to restore familial relationships and help provide stability for participants.

Goal 9- Enhance JDTC capacity for program quality assurance.

Program Objectives

Our program objectives are as follows:

Goals	Objectives
GOAL 1	80% of participants will reach phase III within 12 months. 85% of participants will successfully graduate from the program. Disciplinary discharges will be less than 5%. 85% of participants will be testing clean every week. 85% of participants will attend weekly counseling sessions for Phase 1.
GOAL 2	80% of participants will not be adjudicated with a delinquent act after enrollment in JDTC.
GOAL 3	30% of participants will show improvement in school attendance and grades. 90% of students who drop out of school will pursue a GED.
GOAL 4	50% of JDTC Guidelines will be followed after 6 months of the funding period. 80% of JDTC Guidelines will be followed after 8 months of the funding period 100% of JDTC Guidelines will be followed after 11 months of the funding period.
GOAL 5	40% of JDTC parents will attend drug education parent classes.
GOAL 6	40% of participants will attend a youth support group at least 3 times or more during Phase II or III of JDTC. 60% of participants will attend a youth support group 1 time during the program year. 85% of participants who attend support groups will not relapse after attending 3 or more group meetings.
GOAL 7	JDTC will host two (2) annual community awareness events reaching at least 500 people.
GOAL 8	20% of participants will participate in six (6) sessions of evidence based family counseling. 50% of participants will participate in at least one (1) session of family counseling.
GOAL 9	Create baseline descriptive data of JDTC participants. Conduct program evaluations every six (6) months.

Program Measures

Currently our Drug Court uses the Drug Court Case Management software—Caseworkx—to track performance of participants. In addition, the Judge has her Court Reporter attend all staff meetings and Court hearings to ensure an accurate record. Our Drug Court stands ready and willing to submit performance data as part of the reporting requirements under an award. We have identified the following performance measures related to our stated goals:

Goals	Objectives
GOAL1- Reduce substance abuse among JDTC participants	<p># of participants who reach phase III within 12 months.</p> <p># of participants who successfully graduate from the program.</p> <p># of disciplinary discharges.</p> <p># of participants testing clean each week.</p> <p># of participants meeting with JDTC counselor every week.</p>
GOAL 2- Reduce delinquent behavior among JDTC	<p># of participants who are adjudicated with a delinquent act after enrollment in JDTC.</p>
GOAL3- Reduce Educational failure.	<p># of participants whose grade point average increases.</p> <p># of participants who drop out of school without entering a GED program.</p>
GOAL 4- We will bring out JDTC into full compliance with JDTC Guidelines during the funding period.	<p># of Guidelines implemented after 6 months.</p> <p># of Guidelines implemented after 8 months.</p> <p># of Guidelines implemented after 11 months.</p>
GOAL 5- We will educate and equip JDTC and community parents to prevent or reduce delinquency or substance abuse.	<p># of JDTC parents who attended drug education parenting classes.</p>
GOAL 6- We will reduce recidivism by providing semi-open aftercare community support groups for youth. (Open to persons ages 14-20)	<p># of participants who attended a youth support group.</p> <p># of times each youth attended a support group.</p> <p># of youth who relapse.</p> <p># of youth who relapse after attending three (3) or more meetings</p>
GOAL 7- We will raise community awareness about juveniles drug use.	<p># of people in attendance at two (2) events</p>
GOAL 8- We will provide services that can restore familial relationships and provide stability for participants.	<p># of JDTC families participating in family counseling.</p> <p># of JDTC families participating in six (6) weeks of family counseling.</p> <p># of family counseling sessions less than six (6) times.</p>
GOAL 9- Enhance JDTC capacity for program quality assurance.	<p># of participants entered into CaseWorx.</p> <p>Creation of bi-annual report on JDTC outcomes and evaluation findings.</p> <p># of biannual reports disseminated/presented to stakeholders.</p> <p># of program improvements.</p>

Our project evaluations are intended only to generate internal improvements and are conducted only to meet OJJDP's performance measure data reporting requirements. We have determined that these evaluations are not "research" within the technical meaning of that term and therefore no other information is required.

B. PROJECTED IMPACT

The incorporation of individuals as active stakeholders in all issues of implementation and evaluations are a central goal of the program. Dialogue, will be maintained through interactive forums at several levels (e.g. weekly meetings at school and/or home, and semi-annual review meetings). Analysis and interpretation of program-related data will be subject to review by the project coordinator, the staff and juveniles. Identification of areas for program re-structuring will be informed both by data-driven strategies and from on-going, more qualitative input from juveniles and staff. Likewise, action plans to program improvement will represent a collaborative effort by juveniles, Judge and former program graduates. In addition and supportive services for clients, this venture, project coordinators, designed to involve additional features including the following:

- Both individually and corporately, juveniles would play an active and central role in the operation, maintenance and governance of this program; While some differences will exist between juveniles and staff, in terms of roles, responsibilities and functions, the juveniles will be regarded as co=partners with the staff in fulfilling the mission of the project.
- Staff will serve as mentors who assist juveniles in moving from the role of a passive recipient of social services provided to him/her by staff to being an active, responsible, and empowered partner. This partnership will pay dividends not only in enhanced services and operations, but also in heling the juvenile develop a repertoire of skills and self-confidence that form a solid foundation upon which to build true self-determination.
- Focus on developing juveniles into invested individuals and corporate stakeholders in their community organizations and projects. It also means becoming an invested and integral member of the juvenile's neighborhood and/or community. In the role of case manager and counselor, the Drug Court Staff will assist juveniles in identifying and linking with community investment opportunities (e.g. Habitat for Humanity, AA groups, animal shelters, churches). In the role of mentor, the Drug Court Staff will join the juveniles in actual participation of these opportunities. Not only will this program modification feature assist the Drug Court in becoming a full member of his/her home community, it will also facilitate the community's acceptance of the Drug Court as one of their own.
- Inclusion of a motivational enhancement-training component as a central program feature, this project will utilize a structured program module that focuses on identifying and actually manipulating the personal motivational factors that influence the juvenile's decisions regarding both lifestyles (incarceration vs. freedom from incarceration). We do not present that juveniles are and will remain sufficiently committed to making and maintaining the behavior changes necessary to escape the social behaviors that contributed to detention and able to deal with all the factors that contributed to it. However, we do know this will have a challenging effect on recidivism.

The Drug Court project will make evident that for a person to overcome the obstacles in recovery and the attributes of a wholesome lifestyle, a series of goals and tasks, must be accomplished. This unique and innovative program allows the Judge, staff and juveniles to form a working relationship with "freedom" from incarceration as the acquired goal and independence as the ultimate reward. Should a juvenile become a hindrance or stumbling-block, the juvenile will the be reported for the proper sanctions. Should the juvenile maintain a working relationship, helping each other and not having been a problem, the Coordinator will recommend the juvenile for incentive reward.

A key feature will be its focus on developing juveniles into invested individuals and corporate stakeholders in their community through a program of active participation in self-selected community activities and projects. It is

the philosophy of this program that the resolution of reentry means becoming an invested and integral member of the neighborhood and community. As case managers and/or counselors, staff will assist juveniles in identifying and linking community investment opportunities (e.g. Habitat for Humanity, AA/NA groups, churches, animal shelters and other community service organizations). As mentors, staff will join their residents in actual participation. Not only will this program-feature assist the juvenile in becoming a full member of their community, it will also facilitate the community's acceptance of the juvenile as one of their own.

Phases of Program:

1. To provide a IV Phase Treatment setting and Aftercare
2. Programs for early Drug Court entrance at first detection.
3. To provide a quality-counseling program within a total therapeutic environment, including individual, family, and group counseling.
4. To develop juveniles' personal, social and vocational skills needed to lead a productive and satisfying life. (Coping skills, solution training, financial management, Budget training, etc.)
5. To assist in developing participant's spiritual experiences by means of a spiritual support group program and spiritual lectures.
6. To provide the opportunity to raise the functional literacy level of participants. (General Equivalency Diploma/Coping Living Skills classes presented don a weekly basis).
7. To encourage juveniles continued participation with Drug Court, Church, Alcoholics Anonymous, Narcotics Anonymous, other support groups and/or Aftercare.
8. To provide therapy/education for family members to enhance successful re-entry into the home and community and to implement relapse prevention planning.
9. To provide aftercare for persons who have successfully completed the Madison County Juvenile Drug Treatment Court program, if needed.
10. To assist Juveniles and their families in obtaining adequate understanding of the Drug Court procedures.



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PART III. IMPLEMENTATION

A. As soon as funds are received, all areas of implementation will be put to use within the first two (2) months. Full forty (40) hour case management will be continued and instrumented along with officer, public defender and prosecutor.

This will add a great meaning to the Juvenile Drug Treatment Court due to many of our juveniles have never been taught accountability and consequences of their actions and of the legal system as a result of drug use or other criminal activity that drug abuse causes.

The Madison County Juvenile Drug Treatment Court goal is to have around the clock case managers/counselors available to all juveniles involved in the program. The ability to train and maintain staff members make this a functional reality. More juveniles will have access to the program because staff will be able to give them the specialized attention that they need.

The Madison County Juvenile Drug Treatment Court Program consists of four (4) phases that can be completed in twelve (12) months and an Aftercare.

Phase 1-Engagement:

Phase I is composed of orientation of the program and a complete assessment done by a counselor at Healthconnect of America. Phase I also includes education concerning alternatives to criminal and addictive thinking. Participants will start building the tools for their success on a clean drug free life. Phase I can be completed in between 2 to 4 months.

Minimum requirements:

1. Complete the Orientation Checklist with Case Manager and creation of Case Management Plan
2. Complete Assessment by Counselor at Healthconnect of America
3. Minimum of 8 weekly meetings with Case Manager
4. Attend court as required
5. Drug test when requested
6. At least two home compliance reports via parent
7. Weekly school attendance report
8. Attend treatment as required by Court

Phase II-Personal Responsibility and Skill Development:

Treatment, case manager meetings and education continues in this phase. Additionally added are life skill modules through Life Skills Reimagined. Random alcohol and drug screens continue at the same frequency as Phase I and at the discretion of case manager/counselor. Court appearances are usually about every other week. Phase II can be completed in between 3 to 5 months.

Minimum requirements:

1. At least 5 modules of Life Skills reimagined as assigned by case manager
2. Minimum of 10 weekly meetings with Case Manager
3. Attend court as required
4. Drug test when requested
5. At least two home compliance reports via parent
6. Weekly school attendance report
7. Attend treatment if required by Court

A failed drug test results in the participant meeting with the Judge for potential sanction. Drug screens are sent off for levels. The participant must have four (4) consecutive weeks of negative drug screens to promote to Phase III.

Phase III-Life Skills and Relapse Prevention:

Treatment, case manager meetings, life skill modules through Life Skills Reimagined and education continues in this phase. Random alcohol and drug screens continue at the same frequency as Phase II and at the discretion of case manager/counselor. Court appearances are usually about every other week. Phase III can be completed in between 3 to 5 months.

Minimum requirements:

1. At least 6 modules of Life Skills reimagined as assigned by case manager
2. Minimum of 12 weekly meetings with Case Manager
3. Attend court as required
4. Drug test when requested
5. At least two home compliance reports via parent
6. Weekly school attendance report
7. Attend treatment/family counseling if required by Court

A failed drug test results in the participant meeting with the Judge for potential sanction. Drug screens are sent off for levels. The participant must have six (6) consecutive weeks of negative drug screens to promote to Phase IV. A hair test may be required to advance also to Phase IV.

Phase IV-Independence and Recovery Protection:

Treatment, case manager meetings, life skill modules through Life Skills Reimagined and education continues in this phase. Participant will be required to develop an Aftercare plan. Random alcohol and drug screens should decrease but are at the demanded discretion of case manager/counselor. Court appearances are usually not as frequent as previous phases. Phase IV can be completed in between 4 to 6 months.

Minimum requirements:

1. At least 7 modules of Life Skills reimagined as assigned by case manager
2. Meetings with Case Manager –Minimum of 1 meeting a week for at least 12 weeks
3. Attend court as required
4. Drug test when requested
5. At least two home compliance reports via parent
6. Weekly school attendance report
7. Develop Aftercare Program and Action Plan

A failed drug test results in the participant meeting with the Judge for potential sanction. Drug screens are sent off for levels. The participant must have eight (8) consecutive weeks of negative drug screens to promote to Phase IV. A hair test may be required to advance also to Phase IV. A failed drug test at graduation will result in repeating Phase IV. Once a participant completes this phase, they are ready for graduation and advancement to aftercare.

Aftercare → During this phase, a participant is not required to come to Court. This phase last anywhere from two(2) to four (4) months. Participants are required to check in with their case managers/counselors via phone bimonthly. The participants can continue meeting with their case manager/counselor if they wish. Once participant completes Aftercare, they are off Youth Court Probation.

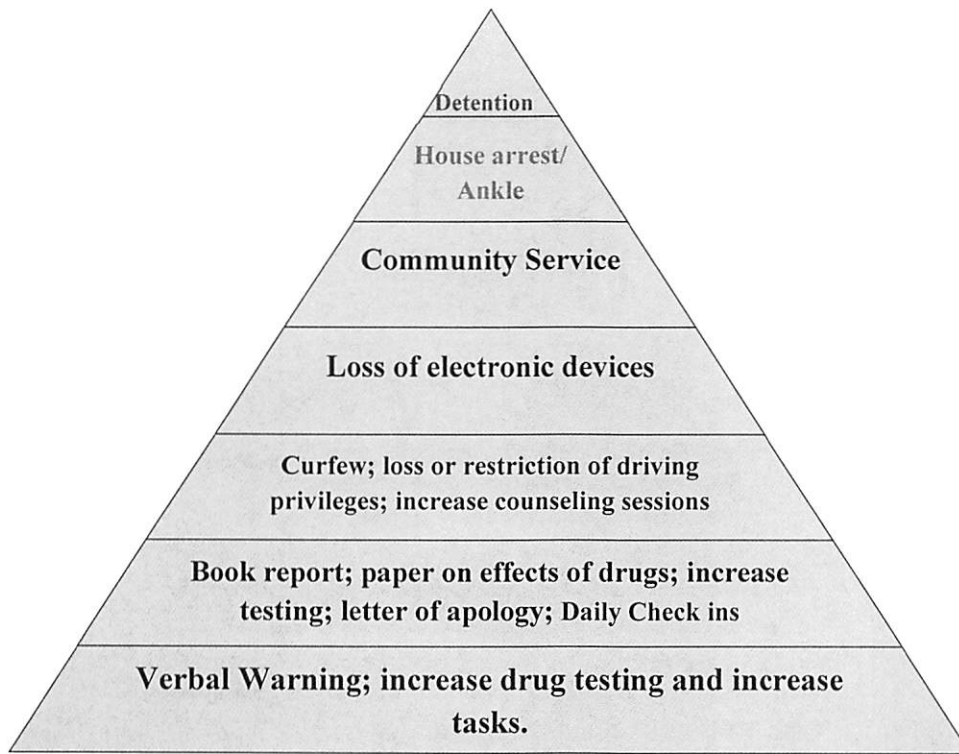
INCENTIVES

Madison County Juvenile Drug Treatment Court uses incentives to help motivate responsible behavior choices. A participant will receive tokens for various drug court responsibilities. At court hearings, a participant my redeem their tokens.

BEHAVIOR	TOKEN
Attend Court	1
Attend Treatment	1 for each week
Negative Drug Screen	1
Perfect week of school attendance	1
Case Management Meetings	1 per meeting
Phase Promotion	10
Life Skill Completion	1 per Life Skill

ITEM	TOKENS
Journal and pen	5
\$5 gift card	10
\$10 gift card	15
\$15 gift card	20
\$20 gift card	25
\$25 gift card	30
Mystery Box	35

GRADUATED SANCTIONS



- You may be sanctioned by increased tasks in any category for non-compliance resulting in extending the length of time in the program with each sanction.
- You may be sanctioned by having to repeat an earlier phase of the program.

B.

1. First month continue employment of current staff.
2. Refine operating procedures (second month-six month)
3. Recent National trends training for attorney, case managers and coordinator (first month - twelve months)
4. Perform designated tasks (first month - twelfth month).

C. Prepare a Bar Task Timetable.

Example:

TASK TO BE PERFORMED	MONTHS IN PROJECT PERIOD											
	01	02	03	04	05	06	07	08	09	10	11	12
1. Continue Staff Employment	-----											
2. Refine operating procedures	_____											
3. Develop Operating Procedures	_____											
4. Perform Designated Tasks	_____											

D. Attach a current resume for each person employed in the conduct of grant activities.

E. Attach a job description of proposed positions.

Case Manager: We have one full time case manager, two part time case managers and one part time counselor who also serves as a case manager. The Drug Court Case Manager/Counselor will provide case management services for all drug court participants and will participate fully as a drug court team member. The Drug Court Case Manager/Counselor will:

- Conduct intake interviews with clients and gather all relevant treatment and demographic information. This information should be preserved in the CaseWorx system as soon as practical after contact.
- Formulate a written individual treatment plan (“ITP”) for each participant within the first month of admission into Drug Treatment Court and submit same to the Drug Treatment Coordinator for approval. Once approved, the ITP shall be uploaded to CaseWorx. The ITP will be reviewed and updated as necessary at the beginning of each new phase and upon exit from the program. Each ITP shall consist of the following:
 - Weekly counseling sessions unless otherwise approved by the Judge;
 - Random Drug Testing;
 - Educational Goals;
 - Any probation requirements ordered by the Judge; and
 - Any other matter deemed necessary by the Counselor/Case Manager.
- Meet with participants according to their ITP.
- Monitor and facilitate where possible the terms of each ITP.
- Provide in writing when the ITP is completed.
- Perform necessary substance screening to determine presence or absence of unapproved substances.
- Refer participants to available substance abuse treatment services as well as to other necessary social health services.
- Participate in weekly staffing.
- Attend Youth Court on Thursdays and be available for consultation with existing or prospective Drug Court Participants and their parents. This may include Drug Testing or intake services. (Full-time employees only).
- Attend Drug Court hearings and be prepared to make recommendations to the Court for incentives and sanctions when necessary.
- Attend and participate in Staff Meetings.
- Be available during business or “on call” hours by phone or email for impromptu staffing as needed.
- Maintain journal entries in CaseWorx for each participant or parent contact (by phone or in person). The content or substance of the contact is not necessary. However, the CaseWorx should be an accurate representation of all contact points between staff and participants. Insignificant texting contact need not be entered into CaseWorx. CaseWorx should be updated weekly.
- In addition to journal entries for contacts, Counselors should also make monthly journal entries as needed for outside treatment, progress or lack thereof if the same information has not already been provided in a previous journal entry.
- Visit participants twice monthly who are in detention or monthly for those in inpatient treatment, if permitted.
- Utilize the team calendar to reserve office space for individual or group counseling.
- If participants fail to show for a scheduled counseling session, this should still be noted in CaseWorx that the participant was a “No-Show.” Also document whether their failure to appear is excused.

The Drug Court Prosecutor will ensure community safety concerns are met and will participate fully as a drug court team member.

Drug Court Prosecutor: The Drug Court Prosecutor will:

- Make legal eligibility determinations.
- Have input in the determinations for termination and new charges.
- In status hearings, he/she will operate in a non-adversarial manner, promoting a sense of a unified team presence.

Drug Court Defense Attorney: The Drug Court Defense attorney will ensure his/her client's legal rights are protected and will participate fully as a Drug Court Team Member.

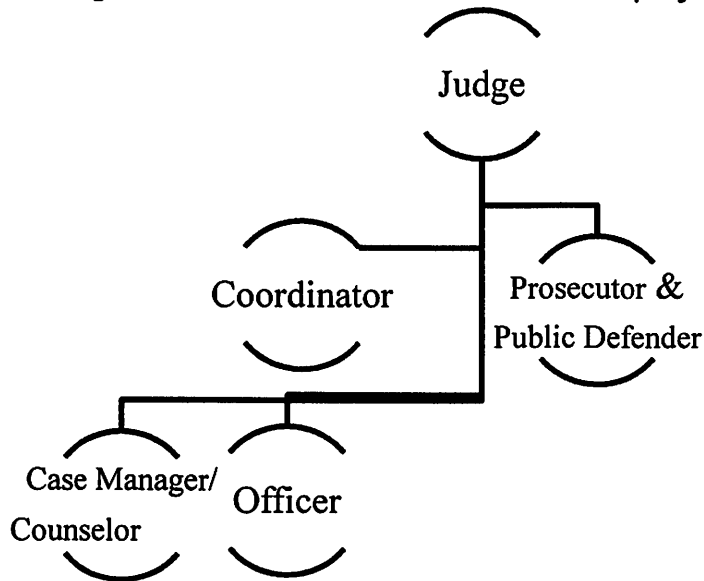
When assigned the Defense Attorney will:

- Advise the participants on their legal rights, legal options, program conditions and potential sanctions.
- Monitor participant progress in the Drug Court Program.
- Participate in a manner at status hearings as an advocate for the participant as well as trying to promote a unified Drug Court Team presence.

Law Enforcement Officer: The officer will assist in drug testing participant when needed. The officer provides security for the court with the flow of participants and families come and go. Officer monitors violations by participants in drug court. When needed, the officer arranges transportation by law enforcement when needed by the Court.

- Submit a monthly timesheet as required by JAG grant.

F. Include an organizational chart associated with the project.





STATE OF MISSISSIPPI
DEPARTMENT OF PUBLIC SAFETY
DIVISION OF PUBLIC SAFETY PLANNING

DPSP USE ONLY Grant No.

SUSTAINABILITY PLAN

PART IV:

A well-conceived and implemented Madison County Juvenile Drug Treatment Court (“MCJDTC”) is certainly going to experience some team turnover. The innovative and creative professionals it takes to implement and successfully run a juvenile drug court are going to be in high demand for promotions into new positions at their home agency or by other competing agencies. Therefore, the remaining team must see turnover as a natural part of the program, just as relapse is for drug and alcohol abusers – it needs to be viewed as a positive change, not as self-defeating. New team members must be quickly trained in the Drug Court’s model philosophy, mission and goals. Collaborative processes must be reconnected to make sure that new members understand their importance as a stakeholder. The team must constantly monitor the political climate between the MCJDTC, the county and the community. Very often political support begins to wane when funding sources are threatened within and between agencies such as the MCJDTC is facing now. The MCJDTC team has become advocates for the program by reporting to key stakeholders about the success of the program, planning for future funding opportunities, and using positive media relations to keep information available to the public. Although a Juvenile Drug Treatment Court stabilizes, it should never be stagnant. As new members join the team and as new challenges arise in the juvenile justice system or the community regarding substance-abusing juveniles, the Court must make informed, data-driving decisions about how best to respond. For examples, as these new evidence-based practices are introduced to a proven project successful such as to the field, the MCJDTC is poised to become educated about them and ready to adopt/adapt such services.

If for some reason, federal funding becomes unavailable, we would attempt to utilize and restructure our State Budget as well as seek possible assistance from Madison County. When funding was halted previously, Madison County stepped up to sustain the staff this grant funds for several months. As a last resort, we could make budget cuts.



STATE OF MISSISSIPPI
DEPARTMENT OF PUBLIC SAFETY
DIVISION OF PUBLIC SAFETY PLANNING
BUDGET SUMMARY

DPSP USE ONLY Grant No.

BUDGET CATEGORY	REQUESTED BUDGET	DPSP USE ONLY APPROVED BUDGET
A. PERSONNEL:	78,700.00	
TOTAL PERSONNEL		
B. FRINGE		
2. FICA Match	6,020.55	
3. Retirement Match	13,693.80	
4. Other	12,456.37	
TOTAL FRINGE	32,170.72	
C. EQUIPMENT		
TOTAL EQUIPMENT		
D. TRAVEL		
2. Commercial Carrier		
3. Meals		
4. Lodging		
5. Other		
TOTAL TRAVEL		
E. OPERATING EXPENSE		
2. Rental		
3. Printing and Reproduction		
4. Communications (Telephone, Postage)		
5. Other		
TOTAL OPERATIONAL EXPENSES		
F. CONTRACTUAL SERVICES		
2. Contracts w/Organizations		
TOTAL CONTRACTUAL SERVICES		
G. MISCELLANEOUS		
2. Training Materials		
3. Other		
TOTAL MISCELLANEOUS		
H. TOTAL PROJECT BUDGET	110,603.88	

SUMMARY FUNDING DATA

	Federal	%	State/Local	%	TOTAL	%
REQUESTED BUDGET						
APPROVED BUDGET						

Budget Prepared By: Amy D. Nisbett, Coordinator



STATE OF MISSISSIPPI
DEPARTMENT OF PUBLIC SAFETY
DIVISION OF PUBLIC SAFETY PLANNING
BUDGET NARRATIVE

DPSP USE ONLY Grant No.

PART VI:

In the personnel category, the Madison County Juvenile Drug Treatment Court (hereafter "MCJDTC") is seeking funds to allow our full-time case manager, John Barnts, to remain at his full time salary of \$48,000.00 per year. We are also asking for benefits to match his full salary. The Officer, Ryan Wigley, aids and ensures compliance within the program. Officer Wigley's part-time salary is \$7,200.00 along with FICA, PERS, Unemployment and Workers' Compensation. Due to our increase 40 plus participants that we usually carry at any given time, we would like to keep our part-time case manager—Steven Ross. Mr. Ross's salary is \$3,500.00 along with benefits to match this requested salary. This counselor continues to meet our tremendous need and help MCJDTC meet its goals of our juveniles receiving lifelong rehabilitation from alcohol, drugs and possible trauma and attempts to ensure the participants never return to the legal system once completion of Drug Treatment Court. Likewise, the prosecutor (Lindsey Herr) and public defender (Josh Coe) assist in keeping the MCJDTC on track with their legal expertise. The \$10,000 per year for each along with the respective fringe would compensate then for their time and skills.

MCJDTC is not asking for any equipment funding, travel or operating expenses at this time because MCJDTC believes that other categories have much more significance to our juveniles.

INSTRUCTIONS FOR COMPLETING BUDGET NARRATIVE: Part VI

(DPSP Form VI)

GENERAL

The purpose of this form is to provide *full explanation, and justification* for all items budgeted to support project activities. After using DPSP Form A-4-b, add as many 8 1/2" x 11" continuation pages as necessary. Show Computations for totals, including all other information needed to derive at the total. *Provide the information required below in the order and format shown.* Transfer totals to Budget Summary.

A. PERSONNEL:

<u>Name of Employee</u>	<u>Title</u>	<u>% of Time Devoted to Project</u>	<u>Date Hired</u>	<u>Salary Rate</u>
John Barnts	Case Manager	100%	07/01/2017	48,000 (annual)
Josh Coe	Public defender	50%	01/01/2023	10,000 (annual)
Lindsey Herr	Prosecutor	50%	01/01/2023	10,000 (annual)
Steven Ross	Case Manager	50%	04/01/2021	3,500 (annual)
Ryan Wigley	Officer	50%	07/01/2012	7,200 (annual)

Total Salaries & Wages \$78,700.00

= Total Personnel \$78,700.00

Note: Specify other fringe benefits in detail not as one group. (Health insurance, life insurance, workman's Comp, Unemployment etc.) Justify each category as it relates to project activities in the Project Plan. If the employees are not to be hired specifically for this project, but will be transferred from other duties, explain how the resulting vacancies will be filled.

B. FRINGE: Based on gross salary.

John Barnts:
+ FICA 7.65% \$3,672.00
+ Retirement 17.40% \$8,352.00
+ Total Insurance and Dental \$9,382.92
+ Total Worker's Comp 3.8% \$ 1,824.00
+ Unemployment \$ 35.00
= Total Fringe \$23,265.92

Josh Coe:
+ FICA 7.65% \$ 765.00
+ Retirement 17.40% \$ 1,740.00
+ Worker's Compensation 3.8% \$ 380.00
+ unemployment \$ 4.76
= Total Fringe \$ 2,889.76

Lindsey Herr:
+ FICA 7.65% \$ 765.00
+ Retirement 17.40% \$ 1,740.00
+ Worker's Compensation 3.8% \$ 380.00
+unemployment \$ 4.59
= Total Fringe \$ 2,889.59

Steven Ross:
+ FICA 7.65% \$ 267.75
+ Retirement 17.40% \$ 609.00
+ Worker's Compensation 3.8% \$ 133.00
+unemployment \$ 3.50
= Total Fringe \$ 1,013.25

D. Ryan Wigley:
+ FICA 7.65% \$ 550.80
+ Retirement 17.40% \$ 1,252.80
+ Worker's Compensation 3.8% \$ 273.60
+unemployment \$ 35.00
= Total Fringe \$ 2,112.20

PART VI: (continue)

D. TRAVEL:

= Total Travel \$ 0.00

E. OPERATING EXPENSES:

= Total Operating Expenses \$ 0.00

F. CONTRACTUAL SERVICES:

= Total Contractual Services \$ 0.00

G. MISCELLANEOUS:

= Total Miscellaneous \$ 0.00

H. TOTAL PROJECT BUDGET:

\$110,870.72



**STATE OF MISSISSIPPI
DEPARTMENT OF PUBLIC SAFETY
DIVISION OF PUBLIC SAFETY PLANNING**

DPSP Use
Only

Grant No.

PART VII: EVALUATION PLAN

There are generally two types of evaluations that might take place in a drug court setting. The first is called a process evaluation, which tells the team what is or is not working in the program's day-to-day operations.

The Madison County Juvenile Drug Treatment Court (hereafter "MCJDTC") uses the state data system called Caseworx to record data from the juvenile participants. This data helps the MCJDTC monitor the ongoing progress of each participant.

The second type of evaluation is an outcome evaluation, which measures the effectiveness of the program. Such an evaluation might look at graduation rate in the program, and the recidivism rate of both successful and unsuccessful participants. A comparison group of similar offenders handled by traditional methods and/or a control group of eligible but randomly selected participants will be beneficial to have for baseline information and comparison.

The Madison County Juvenile Drug Treatment Court will make an argument that for a juvenile participant to overcome obstacles presented to them and the attributes of a wholesome lifestyle, a series of goals and tasks must be accomplished. This unique and innovative program allows the Judge, staff and juveniles to form a working relationship with "freedom" from incarceration as the acquired goal and independence as the ultimate reward. Should a juvenile become a hinderance of stumbling block to himself/herself, then the juvenile will then be reported for the appropriate sanction. Should the juvenile maintain a working relationship, helping each other and not be a problem, incentive plans are in place to reward this juvenile. The Coordinator evaluates the juvenile's behavior, incentives v. sanctions, and tracks drug tests through Caseworx database in addition to his/her case manager/counselor.

This program starts with a comprehensive bio-psycho-social-spiritual assessment package that will be modeled after that which has been accredited with distinction by the county of Madison and the State of Mississippi. The juvenile first completes the following assessments: Universal Assessment, Columbia Suicide Severity Assessment, DSM-5, Child Adolescent Trauma Screen (CATS), CANS and/or DLA-20, UA comprehensive assessment, Modified Poverty Aggression Scale, Human Trafficking assessment, and Trauma History with a counselor. The juveniles and case manager/counselor will develop a problem-oriented treatment plan, a case management plan and standardized checklist that identify all relevant objectives associated with the three (3) main treatment goals: (a) juvenile stability, (b) increase skill level, academics and/or income, and (c) greater self-determination. This data will be used as a primary source during monthly treatment planning meetings, which will include each staff member and the judge. During these meetings, the progression and goals obtained of each juvenile's treatment plan will be discussed and modified when necessary.



STATE OF MISSISSIPPI
DEPARTMENT OF PUBLIC SAFETY
DIVISION OF PUBLIC SAFETY PLANNING

NON-SUPLANT CERTIFICATION

DPSP Use Only
Grant No.

PART VIII:

The Madison County Juvenile Drug Treatment Court via Madison County Board of Supervisors hereby assures that the federal funds will not be used to supplant state or local funds and those federal funds will be used to supplement existing funds for program activities and not to replace those funds that have been appropriated for the same purpose.

Signature: _____
(Chief Executive Officer)

Title: Board President

Date: _____



STATE OF MISSISSIPPI
DEPARTMENT OF PUBLIC SAFETY
DIVISION OF PUBLIC SAFETY PLANNING

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Grant No.

EQUAL EMPLOYMENT OPPORTUNITY COMPLIANCE

PART IX:

A. The Madison County Juvenile Drug Treatment Court via Madison County Board of Supervisors hereby certifies that it has formulated an Equal Employment Opportunity Program in accordance with 28 CFR 42, 301, et seq., Subpart E of the Code of Federal Regulations, and that it is on file in the office of:

Name Loretta Phillips

Address Post Office Box 606, Canton, MS 39046

Title Human Resources Director

for review or audit by officials of the Division of Public Safety Planning or the Office Programs, U.S. Department of Justice as required by relevant laws or regulations.

B. The Madison County Juvenile Drug Treatment Court via Madison County Board of Supervisors hereby certifies that it is in compliance with the terms and conditions of 28 CFR 42, 301, et seq., and is not required to file an Equal Employment Opportunity Program.

INSTRUCTIONS FOR COMPLETING EEOC CERTIFICATION

(DPSP Form IX)

GENERAL

The purpose of the EEOC Guidelines is set forth in Title 28, Chapter 1, Subpart E of Part 42 of the Code of Federal Regulations. It provides recognition of the fact that full and equal participation of women and minority individuals in employment opportunities is a necessary element of the Office of Justice Programs by requiring that certain recipients of OJP funding make a careful evaluation of their employment practices as these affect minority persons and women and then develop a comprehensive EEO Program.

WHO MUST PREPARE AN EQUAL EMPLOYMENT OPPORTUNITY PROGRAM?

Any criminal justice recipient of funds may be required to formulate, implement and maintain an Equal Employment Opportunity Program as it relates to minority persons and women or women only. A recipient criminal justice agency must develop and implement a program if either of the following sets of criteria are fully met:

- I. For minority persons and women.
 - a. Has fifty or more employees.
 - b. Has received grants or subgrants of \$25,000 or more.
 - c. Has a service population with a minority representation of less than 3%.

- II. For women only.
 - a. Has fifty or more employees.
 - b. Has received grants or subgrants of \$25,000 or more.
 - c. Has a service population with a minority representation of less than 3%.

COMMENTS:

1. When determining the number of employees in an agency, all employees are to be counted, including clerical, custodial, etc.
2. The "recipient" agency is defined in terms of the implementing agency. For example, if a grant is made through a municipality to the police department for conducting a program or purchasing equipment, the recipient is considered to be the police department.
3. The criterion of \$25,000 in grant money is cumulative for the recipient (may be the sum of several small grants) and does not require a single grant of \$25,000 or more.
4. For the purpose of these guidelines, the relevant "service population" shall be determined as follows:
 - A. For adult and juvenile correctional institutions, facilities and programs (including probation and parole programs), the service population shall be the inmate or client population served by the institution, facility, or program during the preceding fiscal year.
 - B. For all other recipient agencies (e.g., police and courts), the service population shall be the state population for state agencies, the county population for county agencies, and the municipal population for municipal agencies.

PROCEDURE FOR COMPLETION OF FORM IX

Complete section on the reverse of this form if the implementing agency meets the criteria set out above and has formulated an Equal Employment Opportunity Program. If the implementing agency meets the criteria and this program has not been formulated, your application may not be accepted. For assistance, contact the DPSP EEOC officer at the central office.

May 16, 2023

**Office of Justice Programs
Request for Match Waiver
(Madison County)**

Waiver Requested by: Madison County Board of Supervisors
Madison County Juvenile Drug Treatment Court

Award Number: (subgrant Number)
Award Project Period: 2022
Amount of Award: \$110,870.72
Amount of Match: \$0

Madison County Juvenile Drug Treatment Court

Current Budget Recommendation for County expenditures Attachment A
Mississippi's Unemployment Rates by County (June 2022) Attachment B

The Madison County Juvenile Drug Treatment Court and Madison County are submitting a Request for a Match Waiver for the 2022 Edward Byrne Memorial Justice Assistance Grant (JAG) award. Madison County Juvenile Drug Treatment Court and Madison County is applying for this waiver on the basis of no budgeted allocation to fund match.

Madison County has funding going towards higher priority items such as public safety, roads, other infrastructure and emergency management. Madison county, as administrator of said funds, does not have the resources allocated to fund a 35% match of any funds that Madison County Juvenile Drug Treatment Court may receive from the JAG subgrant.

Madison County is in need of this assistance to ensure that Madison County Juvenile Drug Treatment Court is able to continue providing direct and intervention core services for justice-involved youth that have substance abuse issues. It is MCJDTC's understanding that this letter will serve as a formal waiver from such requirement that no further documentation is required; however, if that is not the case you may contact Amy Nisbett, MCJDTC Coordinator at 601-506-7556.

Best regards,

Madison County Board President



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County Employment and Wages in Mississippi — Second Quarter 2022

Among Mississippi's two largest counties, employment in Harrison increased 2.4 percent from June 2021 to June 2022, the U.S. Bureau of Labor Statistics reported today. (Large counties are those with annual average employment levels of 75,000 or more in 2021.) Regional Commissioner Victoria G. Lee noted that employment in Hinds County declined 0.1 percent over the year. (See [chart 1](#) and [table 1](#).)

News Release Information

23-6-ATL
Thursday, January 05, 2023

Contacts

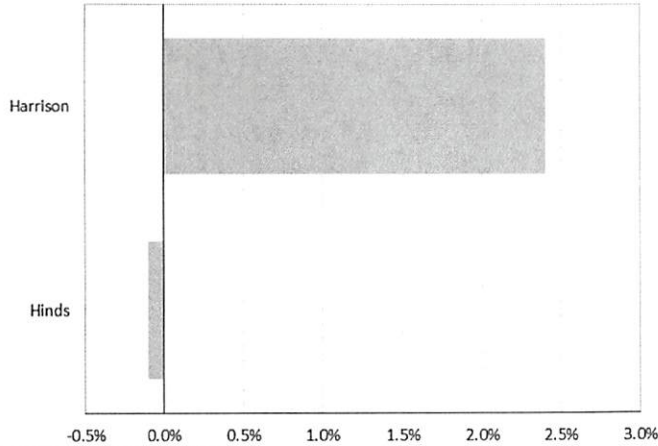
Technical information:

(404) 893-4222
BLInfoAtlanta@bls.gov
www.bls.gov/regions/southeast

Media contact:

(404) 893-4220

Chart 1. Over-the-year percent change in covered employment among the largest counties in Mississippi, June 2022



Source: U.S. Bureau of Labor Statistics.

[View Chart Data](#)

National employment increased 4.0 percent over the year, with 338 of the 355 largest U.S. counties reporting gains. Orange, FL, had the largest over-the-year increase in employment with a gain of 9.7 percent. Kanawha, WV, had the largest over-the-year percentage decrease in employment with a loss of 1.0 percent.

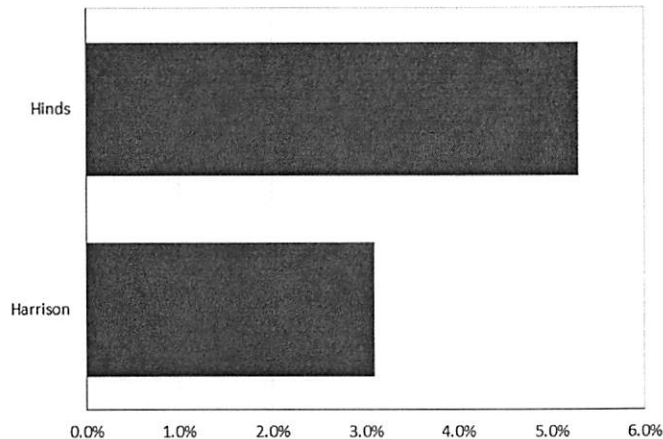
Among Mississippi's two large counties, employment was higher in Hinds County (111,200) in June 2022. Within Hinds County's private industry, health care and social assistance accounted for the largest employment. Together, Hinds and Harrison Counties accounted for 17.4 percent of total employment within the state. Nationwide, the 80 largest counties made up 72.8 percent of total U.S. employment.

Employment and wage levels (but not over-the-year changes) are also available for the 80 counties in Mississippi with employment below 75,000. Wage levels in 79 of the 80 smaller counties were below the national average of \$1,294 in the second quarter of 2022. (See [table 2](#).)

Large county wage changes

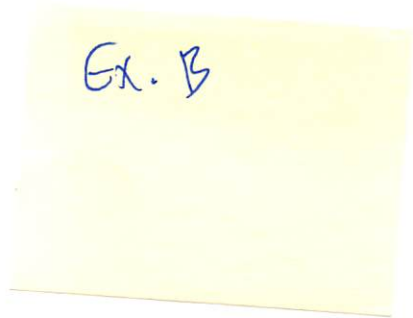
Average weekly wages increased in both of Mississippi's large counties from the second quarter of 2021 to the second quarter of 2022. (See [chart 2](#).) Hinds County (+5.3 percent) had a rate of wage gain that was above the national rate of 4.3 percent.

Chart 2. Over-the-year percent change in covered average weekly wages among the largest counties in Mississippi, second quarter 2022



Source: U.S. Bureau of Labor Statistics.

[View Chart Data](#)



Among the 355 largest counties in the United States, 340 had over-the-year wage increases. Saratoga, NY, had the largest percentage wage increase (+16.3 percent). Benton, AR, had the largest over-the-year percentage decrease (-16.1 percent).

Large county average weekly wages

Average weekly wages in Hinds County (\$1,018) and Harrison County (\$853) were below the U.S. average of \$1,294 and ranked 295th and 350th nationwide, respectively, in the second quarter of 2022.

Among the largest U.S. counties, 91 reported average weekly wages above the U.S. average in the second quarter of 2022. Santa Clara, CA, had the highest average weekly wage at \$3,262. Average weekly wages were at or below the national average in the remaining 264 counties. At \$767 a week, Hidalgo, TX, had the lowest average weekly wage.

Average weekly wages in Mississippi's smaller counties

Among the 80 smaller counties in Mississippi—those with employment below 75,000—Claiborne (\$1,341) reported an average weekly wage above the national average. Simpson County (\$635) reported the lowest average weekly wage in the state.

When all 82 counties in Mississippi were considered, 22 had average weekly wages of less than \$750, 23 had wages from \$750 to \$799, 17 had wages from \$800 to \$849, 7 had wages from \$850 to \$899, and 13 had wages of \$900 or higher.

Additional statistics and other information

QCEW data for states have been included in this release in [table 3](#). For additional information about quarterly employment and wages data, please read the [Technical Note](#) or visit www.bls.gov/cew.

Employment and Wages Annual Averages Online features comprehensive information by detailed industry on establishments, employment, and wages for the nation and all states. This publication is typically published in September of the following year of the reference period or shortly after the QCEW first quarter full data update. The *Employment and Wages Annual Averages Online* is available at www.bls.gov/cew/publications/employment-and-wages-annual-averages/.

The County Employment and Wages release for third quarter 2022 is scheduled to be released on Wednesday, February 22, 2023. The County Employment and Wages full data update for third quarter 2022 is scheduled to be released on Wednesday, March 8, 2023.

Improved Usability of QCEW State and Local Government Employment and Wages

With the Second Quarter 2022 QCEW data released December 6th, 2022, state and local government employment and wage measures include data for some states that were previously suppressed for confidentiality reasons. Publication of these data is possible because state and local government employment and wages are fully disclosable by law in many states. The improved data account for an employment of about 4.2 million in June 2022. Suppressed data were always included in totals and do not represent an increase in employment.

More information is available on the website about the [improved usability of state and local government data](#).

Technical Note

Average weekly wage data by county are compiled under the Quarterly Census of Employment and Wages (QCEW) program, also known as the ES-202 program. The data are derived from summaries of employment and total pay of workers covered by state and federal unemployment insurance (UI) legislation and provided by State Workforce Agencies (SWAs). The average weekly wage values are calculated by dividing quarterly total wages by the average of the three monthly employment levels of those covered by UI programs. The result is then divided by 13, the number of weeks in a quarter. It is to be noted, therefore, that over-the-year wage changes for geographic areas may reflect shifts in the composition of employment by industry, occupation, and such other factors as hours of work. Thus, wages may vary among counties, metropolitan areas, or states for reasons other than changes in the average wage level. Data for all states, Metropolitan Statistical Areas (MSAs), counties, and the nation are available on the BLS web site at www.bls.gov/cew. However, data in QCEW press releases have been revised and may not match the data contained on the Bureau's web site.

QCEW data are not designed as a time series. QCEW data are simply the sums of individual establishment records reflecting the number of establishments that exist in a county or industry at a point in time. Establishments can move in or out of a county or industry for a number of reasons—some reflecting economic events, others reflecting administrative changes.

The preliminary QCEW data presented in this release may differ from data released by the individual states as well as from the data presented on the BLS web site. These potential differences result from the states' continuing receipt, review and editing of UI data over time. On the other hand, differences between data in this release and the data found on the BLS web site are the result of adjustments made to improve over-the-year comparisons. Specifically, these adjustments account for administrative (noneconomic) changes such as a correction to a previously reported location or industry classification. Adjusting for these administrative changes allows users to more accurately assess changes of an economic nature (such as a firm moving from one county to another or changing its primary economic activity) over a 12-month period. Currently, adjusted data are available only from BLS press releases.

Information in this release will be made available to individuals with sensory impairments upon request. Voice phone: (202) 691-5200; Telecommunications Relay Service: 7-1-1.

Table 1. Covered establishments, employment, and wages in the United States and the two largest counties in Mississippi, second quarter 2022

Area	Establishments, second quarter (thousands)	Employment			Average weekly wage (1)			
		June 2022 (thousands)	Percent change, June 2021–22 (2)	National ranking by percent change (3)	Second quarter 2022	National ranking by level (3)	Percent change, second quarter 2021–22 (2)	National ranking by percent change (3)
United States (4)	11,460.8	149,902.0	4.0	—	\$1,294	—	4.3	—

Footnotes:

- (1) Average weekly wages were calculated using unrounded data.
- (2) Percent changes were computed from employment and pay data adjusted for noneconomic county reclassifications.
- (3) Ranking does not include data for Puerto Rico or the Virgin Islands.
- (4) Totals for the United States do not include data for Puerto Rico or the Virgin Islands.

Note: Data are preliminary. Covered employment and wages includes workers covered by Unemployment Insurance (UI) and Unemployment Compensation for Federal Employees (UCFE) programs.

Area	Establishments, second quarter (thousands)	Employment			Average weekly wage (1)			
		June 2022 (thousands)	Percent change, June 2021–22 (2)	National ranking by percent change (3)	Second quarter 2022	National ranking by level (3)	Percent change, second quarter 2021–22 (2)	National ranking by percent change (3)
Mississippi	79.5	1,136.6	2.4	—	887	51	5.3	28
Harrison	4.7	87.0	2.4	220	853	350	3.1	271
Hinds	5.5	111.2	-0.1	340	1,018	295	5.3	128

Footnotes:
(1) Average weekly wages were calculated using unrounded data.
(2) Percent changes were computed from employment and pay data adjusted for noneconomic county reclassifications.
(3) Ranking does not include data for Puerto Rico or the Virgin Islands.
(4) Totals for the United States do not include data for Puerto Rico or the Virgin Islands.

Note: Data are preliminary. Covered employment and wages includes workers covered by Unemployment Insurance (UI) and Unemployment Compensation for Federal Employees (UCFE) programs.

Table 2. Covered establishments, employment, and wages in the United States and all counties in Mississippi, second quarter 2022

Area	Establishments	Employment June 2022	Average weekly wage (1)
United States (2)	11,460,819	149,901,995	\$1,294
Mississippi	79,452	1,136,558	887
Adams	798	10,077	766
Alcorn	827	13,288	807
Amite	201	1,910	847
Attala	387	4,550	787
Benton	88	1,053	821
Bolivar	810	10,088	789
Calhoun	262	3,010	692
Carroll	137	1,105	698
Chickasaw	356	5,092	732
Choctaw	151	2,198	922
Claiborne	135	3,088	1,341
Clarke	235	2,685	748
Clay	379	6,379	829
Coahoma	580	6,623	775
Copiah	459	6,345	691
Covington	371	5,868	767
De Soto	3,386	69,740	810
Forrest	1,871	39,461	885
Franklin	128	1,461	870
George	373	4,851	747
Greene	149	1,867	689
Grenada	564	9,845	775
Hancock	926	14,086	1,087
Harrison	4,737	87,005	853
Hinds	5,549	111,248	1,018
Holmes	280	2,974	757
Humphreys	171	2,111	640
Issaquena	34	169	662
Itawamba	395	5,918	762
Jackson	2,505	49,235	1,037
Jasper	229	3,901	892
Jefferson	68	944	755
Jefferson Davis	149	1,417	742
Jones	1,365	26,662	841
Kemper	128	1,723	780

Footnotes:
(1) Average weekly wages were calculated using unrounded data.
(2) Totals for the United States do not include data for Puerto Rico or the Virgin Islands.

Note: Data are preliminary. Covered employment and wages includes workers covered by Unemployment Insurance (UI) and Unemployment Compensation for Federal Employees (UCFE) programs.

Area	Establishments	Employment June 2022	Average weekly wage (1)
Lafayette	1,463	23,902	865
Lamar	1,481	20,107	765
Lauderdale	1,829	31,257	824
Lawrence	205	2,588	903
Leake	331	4,864	746
Lee	2,533	54,548	899
Leflore	797	14,044	754
Lincoln	836	12,857	791
Lowndes	1,505	24,179	944
Madison	3,665	55,629	986
Marion	587	8,214	824
Marshall	504	10,424	863
Monroe	629	10,133	846
Montgomery	231	2,421	719
Neshoba	548	11,733	834
Newton	372	5,306	779
Noxubee	224	2,167	760
Oktibbeha	1,011	19,758	826
Panola	626	10,127	792
Pearl River	923	10,848	730
Perry	170	2,291	840
Pike	989	14,624	738
Pontotoc	536	12,043	755
Prentiss	526	7,545	735
Quitman	139	1,022	662
Rankin	4,228	63,762	908
Scott	512	12,893	834
Sharkey	141	1,027	666
Simpson	458	7,018	635
Smith	190	2,312	921
Stone	310	4,759	754
Sunflower	524	8,009	703
Tallahatchie	210	2,405	802
Tate	412	5,727	749
Tippah	379	6,832	777
Tishomingo	451	6,638	789
Tunica	253	5,735	760
Union	576	12,002	945
Walthall	213	2,398	666
Warren	1,059	19,089	997
Washington	1,181	14,860	756
Wayne	389	4,514	811
Webster	201	2,039	750
Wilkinson	138	1,508	729
Winston	345	4,893	832
Yalobusha	206	2,675	811
Yazoo	434	5,951	903

Footnotes:

- (1) Average weekly wages were calculated using unrounded data.
- (2) Totals for the United States do not include data for Puerto Rico or the Virgin Islands.

Note: Data are preliminary. Covered employment and wages includes workers covered by Unemployment Insurance (UI) and Unemployment Compensation for Federal Employees (UCFE) programs.

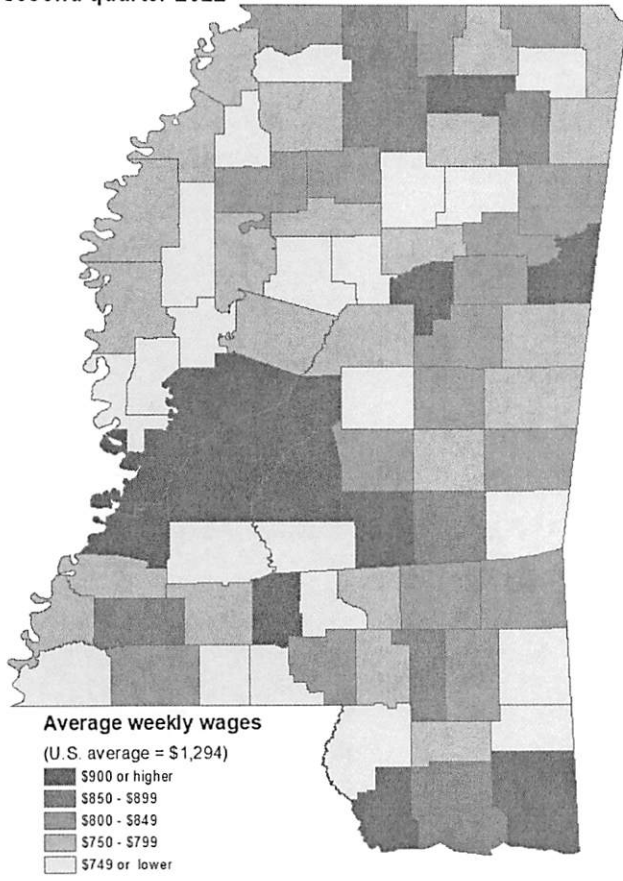
Table 3. Covered establishments, employment, and wages by state, second quarter 2022

State	Establishments, second quarter (thousands)	Employment		Average weekly wage (1)			
		June 2022 (thousands)	Percent change, June 2021-22	Second quarter 2022	National ranking by level	Percent change, second quarter 2021-22	National ranking by percent change

State	Establishments, second quarter (thousands)	Employment			Average weekly wage (1)		
		June 2022 (thousands)	Percent change, June 2021–22	Second quarter 2022	National ranking by level	Percent change, second quarter 2021–22	National ranking by percent change
United States (2)	11,460.8	149,902.0	4.0	\$1,294	—	4.3	—
Alabama	147.8	2,007.0	2.1	1,069	37	6.2	16
Alaska	24.4	329.5	4.4	1,237	17	4.7	36
Arizona	199.8	2,962.1	3.3	1,220	21	5.8	22
Arkansas	98.5	1,240.4	2.8	997	49	2.4	47
California	1,706.1	17,915.3	5.6	1,572	4	-0.6	51
Colorado	242.3	2,838.5	4.1	1,361	9	6.2	16
Connecticut	137.6	1,654.7	3.1	1,458	6	3.5	42
Delaware	39.1	456.4	2.5	1,227	18	5.8	22
District of Columbia	48.2	747.6	3.2	2,139	1	2.0	48
Florida	858.7	9,126.7	5.0	1,186	22	6.5	10
Georgia	369.2	4,669.6	4.9	1,221	20	7.2	5
Hawaii	51.6	612.6	3.4	1,152	26	3.2	44
Idaho	83.2	824.2	2.7	1,009	48	8.5	1
Illinois	408.0	5,959.3	3.7	1,325	11	5.2	29
Indiana	184.6	3,087.8	2.5	1,083	35	6.9	8
Iowa	110.2	1,555.3	1.7	1,057	40	5.8	22
Kansas	93.8	1,381.2	1.5	1,039	44	4.6	38
Kentucky	140.9	1,886.9	1.8	1,070	36	7.1	7
Louisiana	149.9	1,837.0	1.2	1,067	38	6.5	10
Maine	61.6	637.6	1.9	1,086	34	8.0	3
Maryland	184.9	2,640.3	1.5	1,378	8	4.6	38
Massachusetts	288.5	3,654.3	4.3	1,637	2	2.8	46
Michigan	289.6	4,326.6	3.7	1,183	23	3.5	42
Minnesota	197.8	2,876.6	2.0	1,289	13	4.0	40
Mississippi	79.5	1,136.6	2.4	887	51	5.3	28
Missouri	231.6	2,852.0	3.3	1,106	32	5.1	32
Montana	59.4	504.8	2.7	1,028	45	7.4	4
Nebraska	79.9	988.5	1.2	1,060	39	6.3	13
Nevada	106.9	1,462.4	7.8	1,163	24	5.2	29
New Hampshire	62.4	671.9	2.0	1,349	10	0.4	50
New Jersey	321.7	4,221.9	5.8	1,440	7	3.8	41
New Mexico	69.6	822.4	3.6	1,040	43	5.5	25
New York	672.2	9,341.5	5.1	1,587	3	3.1	45
North Carolina	344.0	4,695.0	4.0	1,160	25	6.3	13
North Dakota	33.9	416.9	2.3	1,131	30	6.0	19
Ohio	322.7	5,404.1	2.6	1,127	31	5.4	26
Oklahoma	121.9	1,610.4	2.5	1,016	46	5.4	26
Oregon	176.7	1,956.6	2.7	1,253	15	4.8	35
Pennsylvania	387.9	5,901.3	3.9	1,252	16	4.9	34
Rhode Island	45.7	488.6	3.3	1,227	18	5.0	33
South Carolina	162.7	2,170.7	3.5	1,043	42	6.8	9
South Dakota	38.4	454.0	2.6	997	49	6.5	10
Tennessee	201.0	3,151.9	4.7	1,152	26	5.2	29
Texas	796.9	13,135.7	5.2	1,284	14	6.1	18
Utah	130.3	1,644.0	3.7	1,137	28	7.2	5
Vermont	29.9	297.7	1.2	1,135	29	8.1	2
Virginia	320.6	3,949.1	2.4	1,316	12	4.7	36
Washington	264.9	3,547.2	4.7	1,569	5	1.6	49
West Virginia	56.5	672.1	1.2	1,013	47	6.0	19
Wisconsin	197.9	2,897.0	1.6	1,097	33	5.9	21
Wyoming	29.5	280.6	1.6	1,048	41	6.3	13
Puerto Rico	49.2	910.1	4.8	597	(3)	5.3	(3)
Virgin Islands	3.6	33.7	-5.2	1,014	(3)	9.1	(3)

State	Establishments, second quarter (thousands)	Employment		Average weekly wage (1)			
		June 2022 (thousands)	Percent change, June 2021–22	Second quarter 2022	National ranking by level	Percent change, second quarter 2021–22	National ranking by percent change
Footnotes:							
(1) Average weekly wages were calculated using unrounded data.							
(2) Totals for the United States do not include data for Puerto Rico or the Virgin Islands.							
(3) Data not included in the national ranking.							
Note: Data are preliminary. Covered employment and wages includes workers covered by Unemployment Insurance (UI) and Unemployment Compensation for Federal Employees (UCFE) programs.							

Chart 3. Average weekly wages by county in Mississippi, second quarter 2022



[View Chart Data](#)

Last Modified Date: Thursday, January 05, 2023

U.S. BUREAU OF LABOR STATISTICS Southeast Information Office Suite 7T50 61 Forsyth St., S.W. Atlanta, GA 30303
Telephone: 1-404-893-4222 www.bls.gov/regions/southeast [Contact Southeast Region](#)

Ten Key Components of Drug Court

1. Drug Court integrates alcohol and other drug treatment services with justice system case processing.

A Madison County Juvenile Drug Court team member will identify if the potential participant has a substance abuse problem and determine the appropriate level of treatment. In addition, the Drug Court treatment staff will assess the family's willingness to participate, as well as their strengths. The assessment is designed to evaluate motivation for treatment, provide details of prior and current legal status, family and social relationships, mental and medical health histories, and education status. The Drug Court treatment staff member will assess each participant before he/she is formally entered into the Drug Court. The Drug Court treatment staff member can administer an objective substance abuse measure called the Substance Abuse Subtle Screening Inventory for Adolescents (SASSI-3). The Drug Court treatment staff member reports the assessment findings to Youth Services and the Drug Court team.

At this assessment, the treatment staff member will orient the participant and family as to what to expect and have the parent/guardian and participant sign all necessary paperwork for admittance into the program.

The treatment options are determined based on the juvenile participants needs at the time of the assessment and as an on-going process. Many options are available to the participant such as out-patient services, weekly group meetings, in-patient treatment, long-term in-patient treatment and monitoring throughout the program. Madison County Juvenile Drug Court's (MCJDC) case manager has an established relationship with all treatment facilities in the state of Mississippi. This gives our participants numerous options for treatment both local and statewide.

2. Using a non-adversarial approach, prosecution and defense counsel promote public safety while protecting participants' due process rights.

The MCJDC uses the non-adversarial approach. Both the prosecutor and public defender are at every court session and staff meeting. They are an integral part of the drug court. Working with the rest of the MCJDC staff the prosecutor and public defender are able to help best formulate the most effective treatment plan for the participant.

3. Eligible participants are identified early and promptly placed in drug court.

A Madison County Juvenile Drug Court team member will identify if the potential participant has a substance abuse problem and determine the appropriate level of treatment. In addition, the Drug Court treatment staff will assess the family's willingness to participate, as well as their strengths. The assessment is designed to evaluate motivation for treatment, provide details of prior and current legal status, family and social relationships, mental and medical health histories, and education status.

Often, MCJDC is notified when a juvenile first makes an appearance at their detention hearing before the youth court. From that point, MCJDC can speak with the juvenile and the juvenile's family as well as the youth court counselor. Juveniles are identified as possible candidates for any number of reasons, such as: drug offense (possession or paraphernalia), committing another offense and testing positive for drugs or having a known drug problem to the parents or youth court counselor.

4. Drug Court provides access to a continuum of alcohol, drug and other related treatment and rehabilitation services.

The treatment options are determined based on the juvenile participants needs at the time of the assessment and as an on-going process. Many options are available to the participant such as out-patient services, weekly group meetings, in-patient treatment, long-term in-patient treatment and monitoring throughout the program. Madison County Juvenile Drug Court's (MCJDC) case manager has an established relationship with all treatment facilities in the state of Mississippi. This gives our participants numerous options for treatment both local and statewide. Assessment is an on-going process. MCJDC's main goal is rehabilitation and as such our focus is on the participant at all stages of the program. This continuum of services helps to make MCJDC successful and our participants are able to become productive members of society.

5. Abstinence is monitored by frequent alcohol and other drug testing, including evenings and weekends.

Participants are tested weekly. More frequent random testing is used in cases where participants have previously tested positive, are suspected to be adulterating tests, have a history of adulterating, or have parents that suspect their participant is using drugs again.

6. A coordinated strategy governs drug court responses to participant's compliance.

MCJDC conducts bi-monthly staffing before each drug court session as well as monthly staff meetings. If a situation arises in between these meetings then all staff will be contacted to discuss a particular participant and what treatment or other options are available based on circumstances. MCJDC's coordinated strategy is always targeted at the best interest of the participant and their rehabilitation.

7. Ongoing judicial interaction with each drug court participant is essential.

MCJDC meets bi-monthly for drug court where the Judge is present and interacts with participants. Again, depending on each participant's specific needs more meetings with the Judge are available and are often used in cases of rule violations or other unforeseen consequences that may be putting the participant in danger for their life or health. The Judge is available twenty-four hours a day and seven days a week. If needed, contact can always be made to discuss what treatment is best for a MCJDC participant.

8. Monitoring and evaluation measure the achievement of drug court goals and gauge effectiveness.

MCJDC uses the DCCM case manager. This system allows all staff to have access each participant's information such as: frequency of drug testing, parent information, birthdate and any other pertinent information such as prescription drugs, allergies, etc. This data is updated before each court session and used in our drug court staffings.

9. Continuing interdisciplinary education promotes effective drug court planning, implementation, and operations.

MCJDC has support from all the schools in Madison County, as well as, community programs that allow community service. Programs such as Metamorphosis offer participants the opportunity to meet away from the court setting in a safe and confidential environment with community service opportunities offered monthly. MCJDC is also partnering with community education centers to allow our participants to be education in drug abuse, communication, job opportunities and other life skills.

10. Forging partnerships among drug court, public agencies and community based organizations generate local support and enhance drug court effectiveness.

MCJDC works with Alliance Health Services, Region 8 Mental Health, Imagine outpatient program , Mississippi Children Home Services and numerous other treatment facilities and programs. MCJDC's main goal is to fit the best treatment option available to the participant. Again, MCJDC's main goal the rehabilitation of the participant and a productive member of society.



SUPREME COURT OF MISSISSIPPI
Administrative Office of Courts
Drug Intervention Court
Budget Request Form – FY 2024

AOC USE ONLY

FY24 Budget Request _____ Participant Level _____

Reviewed by: _____ Date _____

AOC Budget Appropriation _____

Approved by: _____ Date _____

Complete and return the budget request form, the budget narrative,
 and Board of Supervisor signed, approved contracts no later than May 1, 2023

The budget request should reflect anticipated spending to include all funding sources from July 1, 2023 - June 30, 2024.
 Email documents by the May 1st deadline to: interventioncourts@courts.ms.gov

Court: Madison County Juvenile Drug Treatment Court Lead County: madison Phone: 5698

Remittance Address: P.O. Box 1626 Canton, MS 39046 Email: amy.nisbett@madison-co.com

Category	AOC State Reimbursable Amounts	Local Drug Intervention Court Fund Amount	Local Government Contribution Amount	Grant Amount OJDP (name)	Grant Amount JAG (name)	Other Source (name)	Other Source (name)	Private Foundation / Donation Amounts	TOTAL FY 2023 BUDGET
Salaries & Fringe	98,174.57			56,809.70	110,663.79				\$ 265,648.06
Treatment Expenses	7,292.25			73,000.00					\$ 80,292.25
Testing & Lab Expenses	11,556.50			0.00					\$ 11,556.50
Travel & Training	25,054.50			18,969.08					\$ 44,023.58
Commodities	4,500.18			5,172.22					\$ 9,672.40
Contractual Services	672.00			31,649.00					\$ 32,321.00
Equipment	2,750.00			0.00					\$ 2,750.00
TOTAL	\$ 150,000.00	\$ 0.00	\$ 0.00	\$ 185,600.00	\$ 110,663.79	\$ 0.00	\$ 0.00	\$ 0.00	\$ 446,263.79

Budget Request Prepared By:

Amy Nisbett
 Signature of Intervention Court Coordinator or Financial Officer

Amy Nisbett | Coordinator
 Printed Name Title

4/11/23
 Date

Staci O'Neal
 Signature of Intervention Court Judge / Referee

Staci O'Neal

Printed Name of Intervention Court Judge / Referee

4/11/23
 Date

Madison County Juvenile Drug Treatment Court

Budget Detail 2023-2024¹

Administrative Personnel:

Drug Court Coordinator- Amy Nisbett

Salary	\$54,000.00	
Fringe	\$ 22,926.07	\$76,926.07

Case Manager/Counselor (Part-Time)- Ashley Thomas Alexander

Salary	\$19,000.00	
Fringe	\$ 2,248.50	\$21,248.50

Case Manager (Full-time)- John Barnts²

Salary	\$49,000.00	
Fringe	\$ 22,457.86	\$71,457.86

Prosecutor (Part-Time)- Lindsey Herr³

Salary	\$10,000.00	
Fringe	\$ 2,810.29	\$12,810.29

Public Defender (Part-Time)- Josh Coe⁴

Salary	\$10,000.00	
Fringe	\$ 2,810.76	\$12,810.29

Case Manager (Part-Time)- Steven Ross⁵

Salary	\$3,500.00	
Fringe	\$ 876.75	\$ 4,376.75

Officer (Part-Time)- D. Ryan Wigley⁶

Salary	\$7,200.00	
Fringe	\$ 2,008.60	\$ 9,208.60

¹ The personnel figures are merely estimates

² Funded by JAG

³ Funded by JAG

⁴ Funded by JAG

⁵ Funded by JAG

⁶ Funded by JAG

APP Coordinator/Family Case Manager- Lance Felton⁷

Salary	\$ 38,646.00	
Fringe	\$ 20,567.29	<u>\$59,213.29</u>
TOTAL:		\$ 214,761.65

Treatment⁸: MCJDTC does not provide outside treatment assistance. We have one MOU with HealthConnect. However, we are setting aside an amount of our budget for one of our counselors on staff.

Treatment Scholarships:

Part-Time Counselor- Avis Stringer:

Salary	\$6,500.00	
Fringe	\$1,861.04	\$ 8,361.04
OJJDP grant		\$ 73,000.00
TOTAL:		\$ 81,361.04

Drug Testing/Lab Fees⁹

Supplies:	\$7,000.00	
Lab Verification:	\$ 4,556.50	
TOTAL:		\$ 11,556.50

Commodities:¹⁰ This expense includes pens, paper, printer ink, postage, graduation expenses such as diplomas, incentives and money for background checks if we hire a parent liaison in the future or a probation officer.

Office Expenses:	\$ 4,500.18	
OJJDP:	\$ 5,172.22	
TOTAL:		\$ 9,672.40

Contractual Services:¹¹ This expense is for a cell phone for our full-time case manager.

Cell Phone:	56/phone * 12=	\$ 672.00
OJJDP:		\$ 31,649.00

⁷ Funded by OJJDP

⁸ Treatment figures are merely estimates

⁹ Drug Testing/Lab fees figures are merely estimates

¹⁰ Commodities' figures are merely estimates

¹¹ Contractual services' figures are merely estimates

TOTAL:

\$ 32,621.00

Equipment:¹² MCJDTC needs basic equipment to adequately run the program efficiently such as computer and/or printers for our staff, etc.

Item	Computation	TOTAL Expense
Laptop	1 laptop * \$1850	\$1,850.00
Printers	1 printers * 500	\$ 500.00
Scanner	1 scanners *400	\$ 400.00

TOTAL:

\$ 2,750.00

Travel:¹³ MCJDTC would like to compensate counselors and/or case managers for travel and training costs.

Purpose of Travel	Location	Expense	Computation	TOTAL
Local Travel		Monthly travel to meet with participants	250 miles *.665=\$166.25* 3 people=\$498.75*12 months	\$ 5,985.00
MADCP Registration	Oxford, MS	Conference Fee	200*6	\$ 1,200.00
MADCP Conference	Oxford, MS	Mileage	(200*2)*6=1,200 miles *.665	\$ 1,596.00
MADCP Conference	Oxford, MS	Housing	(125*2 nights)=250* 6 people	\$1,500.00
MADCP Conference	Oxford, MS	Meals	(\$46/day*3 days)=\$138 * 6 people	\$ 828.00
Conference	TBD	Conference fee	500*3	\$ 1,500.00
Conference	TBD	Housing	185*2 nights *3 staff	\$ 1,100.00
Conference	TBD	Meals	\$46*3 days * 3 staff	\$ 414.00
Conference	TBD	Travel	225 miles* 2 trips * 2 staff *.665	\$ 598.50
NADCP	Houston, TX	membership	60*3 staff	\$ 180.00
NADCP	Houston, TX	Conference fee	\$795*3 staff	\$2,385.00
NADCP	Houston, TX	Housing	\$250 * 5 nights * 3 staff	\$ 3,750.00
NADCP	Houston, TX	Travel	\$650 airline * 3 staff or 752 miles per person	\$ 1,950.00

¹² Equipment figures are merely estimates

¹³ Travel figures are merely estimates

NADCP	Houston, TX	Meals	\$56*6 days * 3 staff	\$ 1,008.00
NADCP	Houston, TX	Uber (if needed)	\$70 per day * 5 days * 3 staff	\$1,050.00
TOTAL				\$25,054.50

OJDP: \$18,969.08

TOTAL: \$ 44,023.58

OJJDP 2023-2024

Lance Felton		\$ 36,646.00	
FICA	7.65%	\$ 2,803.42	
PERS	17.40%	\$ 6,376.40	
Works Co	4.00%	\$ 1,465.84	
Unemployment		\$ 35.00	
Dental/vis/life			
Medical ins		\$ 9,483.04	
TOTAL Fringe		\$ 20,163.70	\$ 56,809.70

TREATMENT

Family Counseling		\$ 36,000.00	
IOP		\$ 37,000.00	\$ 73,000.00

COMMODITIES

workbooks		\$ 2,300.22	
education enrichment		\$ 2,200.00	
cell phone		\$ 672.00	\$ 5,172.22

CONTRACTUAL

PACT		\$ 15,649.00	
MSU Evaluator		\$ 16,000.00	\$ 31,649.00

TRAVEL

Local travel		\$ 2,292.00	
MADCP Conference fee		\$ 400.00	
MADCP Conference miles		\$ 448.00	
MADCP Conference hotel		\$ 600.00	
MADCP Conference meals		\$ 276.00	
NADCP Membership fee		\$ 1,800.00	
NADCP Conference fee		\$ 2,010.00	
NADCP mileage		\$ 1,950.00	
NADCP lodging		\$ 2,925.00	
NADCP meals		\$ 690.00	
NADCP uber		\$ 750.00	
training conference		\$ 1,696.08	
training conference hotel		\$ 900.00	
training conference miles		\$ 1,680.00	
training conference meals		\$ 552.00	\$ 18,969.08

TOTAL			\$ 185,600.00
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SERVICES AGREEMENT

Health Connect America and Madison County Juvenile Drug Court

This Services Agreement ("Agreement") is entered on March 20, 2023 between Health Connect America, Inc. ("HCA") and Madison County Juvenile Drug Court Mississippi ("County").

HCA coordinates with County to conduct federal fingerprinting for employees of HCA. Accordingly, the parties agree as set forth in this Agreement.

1. *The Services.:*
 - a. HCA will render services to the County upon referral.
 - b. Based on program capacity the HCA will provide MH/SUT screenings and treatment when appropriate for participants referred by County.
 - c. A copy of the intake assessment is given to the county upon completion and the HCA will receive a copy of the PACT assessment.
 - d. Services are conducted at County's principal location or HCA location, and at such other locations in County as agreed upon by the parties.
2. *Payment for Services.*
 - a. *HCA refers youth to Health Connect America for services. HCA will bill to primary insurance for BCBS or Medicaid. Upon referral, County will notify HCA of payment responsibility is County or responsibility of person referred.*
 - b. *After billing, HCA will notify County of participant's balance, if any, within 45 days of discovery of balance. County will make said payments within 45 days of receiving the balance.*
 - c. *Fees to be paid in accordance with Schedule A.*
3. *Authorizations.* County will only provide services and render invoices to those youth that County has deemed their responsibility. The referral is made either by phone, fax, email, or face to face.
4. *Licensure.* County represents and warrants as follows:
 - a. It has all required federal, state, and local licenses (i) to operate the County and (ii) authorizing HCA to provide the Services on behalf of County;
 - b. It has and will during the term of this Agreement continue to meet all federal, state, and local licensing requirements;
 - c. It has not received a notice of revocation or notice of the pendency of revocation, conditional or otherwise, of any license from any government authority;
 - d. It will promptly notify HCA in the event of any threatened or actual limitation, suspension, or revocation of any license to operate or provide service in the ordinary course of its business; and,

- e. All health and safety expectations, cleaning, maintenance, and other costs shall be managed by the County.
5. *Relationship of the Parties.* Nothing herein shall be construed to create the relationship of general or limited partner or joint venture between the parties. Neither party shall hold itself out or represent itself to be the partner, joint venture, employer, or employee of the other. No party shall have the authority, or represent itself as having the authority, to bind the other with respect to any debt, liability, or obligation. In addition, HCA and County do not intend to create an employer-employee relationship. County and HCA shall coordinate to determine the times at which HCA performs the Services. Each party shall be solely responsible for payments of its workers, employees, and subcontractors, and shall pay its own taxes.
6. *Space.* County shall provide a space within its premises of adequate size and sufficiently private at which HCA can have services conducted.
7. *Records.* Upon referral, the County will notify HCA of payment responsibility. In the event the responsibility is on the County, an invoice is sent to County official by the 5th of the following month for County payment. The rate is agreed at referral. HCA and County shall maintain the confidentiality of all such records in accordance with applicable law (including without limitation the Health Insurance Portability and Accountability Act of 1996 as amended from time to time).
8. *Confidentiality.* Records maintained by HCA and county as part of rendering the services shall remain confidential and will not be shared with anyone.
9. *Term.* This Agreement shall cover the period of March 20,2023 through December 31, 2023. It will automatically renew for one calendar year unless terminated in writing by either party giving thirty-days written notice.
10. *Abuse.* County and HCA acknowledges that each is legally bound to report suspected or known abuse or neglect to the appropriate government authorities. HCA will provide County with a copy of any report of suspected or known abuse or neglect made to any government body.
11. *Communication.* The parties will communicate regularly and have such meetings as may be necessary for HCA to effectively render the Services.
- HCA employees will be responsible for informing County as to their work schedule. HCA employees and the designated County contact person will work

on a weekly basis to make sure communication is clear, any situations/issues are handled, and referrals are responded to in a timely manner.

12. *Coordination of Care.* The parties will work collaboratively to ensure that the client's needs and preferences for services and information sharing across people, functioning, and sites are met throughout the duration of this agreement. The parties will also work collaboratively to address potential gaps in meeting the client's interrelated medical, social, developmental, behavioral, educational, informal support system, and financial needs in order to achieve optimal health and wellness outcomes, according to the client's preferences.

13. *Miscellaneous.* This Agreement shall inure to the benefit of each party, its successors and assigns, and shall be binding on each party and its successors and assigns. Neither party may assign or delegate its rights or obligations under this Agreement without the prior written consent of the other party. Any assignment made without such written consent shall be void. If either party files suit with respect to the interpretation or enforcement of this Agreement, the prevailing party shall be entitled to recoup from the other its costs, including without limitation its reasonable attorneys' fees, in bringing or defending such proceedings. Each party acknowledges the receipt and sufficiency of the consideration set forth in this Agreement. In no event shall either party be liable to the other for any incidental, indirect, special, consequential, or punitive damages, regardless of the nature of the claim or liabilities to third parties arising from any source, even if the party to this Agreement has been advised of the possibility of damages. This Agreement shall be construed pursuant to the laws of Mississippi without regard to that jurisdiction's choice of law provisions. Any lawsuit brought to interpret or enforce the provisions hereof shall be filed in the federal or state courts with jurisdiction over (and where appropriate venue lies in) Mississippi. Each party waives any defense of lack of personal jurisdiction, improper venue, or *forum non conveniens*. This Agreement represents the entire understanding by and between the parties, and supersedes any other representations, promises, or statements not wholly consistent herewith. This Agreement may only be modified by a writing signed by both parties. Neither party shall be liable to the other if the performance of any obligation hereunder is rendered impossible by any circumstance beyond its control and not created by its own act or omission, including flood, fire, and other natural disasters, war, riot or social unrest, work stoppage, act of terrorism, and Acts of God. Each party shall resume performance pursuant to the provisions of this Agreement upon the abatement of the *force majeure*. Each party hereby represents and warrants that (i) it has the legal right and authority to enter into and perform the obligations set forth in this Agreement, (ii) execution and performance of this Agreement will not violate any valid court order or applicable law or legal provision or constitute a breach of any contract

or other obligation of such party, (iii) there is no other reason, currently existing or anticipated, that would render it unable to fully perform its obligations hereunder, and (iv) that this Agreement, upon execution and delivery, shall constitute a valid and binding obligation of each party and will be enforceable against such party pursuant to its terms. The provisions of this Agreement are severable. Should any part or portion hereof be deemed void or unenforceable by a court of competent jurisdiction, the remaining parts and portion shall remain in full force and effect. Failure of a party to enforce any provision of this Agreement shall not constitute a waiver of such provisions or of the right of a party at any time to avail itself of such remedies as it may have for any breach or breaches of such provision.

AGREED TO, UNDERSTOOD, and ACKNOWLEDGED:

Shayma Carter | 3/20/23
Signature of Representative of HCA / Date

Shayma Carter 3/20/23
Signature of Representative of County / Date

Schedule A

This Agreement covers arrangements for mental health services and substance use disorder treatment for Madison County Mississippi Juvenile Drug Court

\$100.00 for initial assessment and comprehensive with ASAM

\$75.00. PACT assessment

\$25.00 per hour Therapeutic Day Treatment not to exceed 5 hours

\$30.00 Educational and support group – 90 minutes/week for 10 weeks+300

\$75.00 Psychiatric Diagnostic Evaluation

\$55.00 Medication Follow-up

\$75.00 Individual Therapy for 1 hour

\$75.00 family therapy for 1 hour

\$50.00 Community Support Services

\$25.00 per week Parenting Group for 12 weeks

\$25.00 per week for Anger Management Group for 8 weeks

\$25.00 per week for Trauma Group

\$1,000.00 for Adolescent Intensive Outpatient Program for 10 weeks at 6 hours group per week and 1 hour individual therapy per week and a minimum of 2 family sessions. Meets 3 days per week.

Principles of recovery-oriented, co-occurring enhanced care that we agree to adhere to in the delivery of concurrent services:

Upon referral, HCA agrees to complete a universal assessment along with a full ASAM as required by DMH. HCA will also complete the PACT assessment in addition to the universal assessment. HCA will refer clients according to their level of need as outlined in ASAM. Services offered are mentioned above. Any clients that present with symptoms of instability beyond Health Connect America's ability to treat in an IOP setting will be communicated with Drug Court and assistance with placement if offered. Other services are provided based on need such as community support services and med management by a Psychiatric Nurse Practitioner. As part of our new state requirements, a full ASAM will be completed every 30 days to ensure level of need while enrolled in IOP and every 90 days for outpatient services or any other outpatient services. If allowed, HCA would like to have staff representation present at drug court weekly to ensure referrals do not fall between the cracks.

IOP is an intensive program that serves as a stepdown/deterrent for residential treatment. The focus of this program is gaining insight and self awareness into addiction and impact it has on self and others. This program targets the user and the seller of illegal substances. The program covers the first 3 steps of recovery through the development of an individualized treatment plan. A relapse prevention plan is developed during this program and continues through the stepdown phase of Aftercare. Our IOP Therapists are certified in MRT (Morale Recognition Therapy) and Thinking for a Change. Other curriculums used is Seeking Safety and Healthy Relationships. These interventions are all evidenced based and MRT and Thinking for a change are the favored curriculums by MDOC. Our Peer Support Specialist are Peers in Recovery who serve as mentors and ongoing support for relapse prevention and offers basic social skills for living a sober life. During IOP, the individual will attend 9 hours of group by Master's Level Therapist and Certified Peer Support Specialist, 1 hour of individual therapy per week, and we strive on integrating family therapy as a key component in the recovery process.

Role and Responsibilities are defined as follows:

Health Connect America is in the business of providing co-occurring treatment to clients suffering from mental health and/or substance abuse issues. Health Connect America agrees to immediately notify Drug Court or any necessary medical emergency service provider should any client present with a medical emergency or the need for inpatient treatment , Drug Court and HCA agrees to respond appropriately according to their policies and procedures regarding any medically appropriate referral to their system of care.

Referral protocol: Upon determination of medical necessity Health Connect America will contact Drug Court with pertinent information to proceed with care in the best interest of the client.

Health Connect America will provide progress notes to Drug Court on a weekly basis via fax, email, or delivered in hand.

Attendance Treatment Services

Health Connect America will provide the following services: Co-occurring treatments for the clients suffering with mental health and/or substance abuse issues.

HCA will communicate absences from IOP or missed appointments for individuals referred to HCA for treatment.

Aftercare services are offered as a stepdown service which is a meeting 1 hour per week with a Certified Peer Support Specialist whose focus on relapse prevention and basic living skills. There is no charge for Aftercare Services.

Payers for Mental Health Services

HCA will utilize client's insurance to cover the cost of mental health services. The primary payer sources are Magnolia CANS, Molina, United Health Care, Ambetter, CHIPS, and Blue Cross Blue Shield. In the event the individual has no source of payor and is referred by the Madison County Youth Drug Court, and invoice is sent by the 10th of the month reflecting prior month service for payment. Health Connect America contracts with the three statewide managed care organizations. HCA is in good standing for all three MCOs. Additional insurances will be utilized based on in-network options with HCA. If insurance is not available, the individual has no source of payor and is referred by the Madison County Youth Drug Court, and payment by court has been agreed upon, an invoice is sent by the 10th of the month reflecting prior month service for payment.

Therapeutic Foster Care Services

Health Connect America is a licensed Therapeutic Foster Care Agency and will have a representative present in court for referrals. HCA agrees to work closely with kinship placements as well as traditional placements to expedite licensure.

**U.S. DEPARTMENT OF JUSTICE
OFFICE OF JUSTICE PROGRAMS**

Edward Byrne Justice Assistance Grant Program FY 2022 Local Solicitation

Certifications and Assurances by the Chief Executive of the Applicant Government

On behalf of the applicant unit of local government named below, in support of that locality's application for an award under the FY 2022 Edward Byrne Justice Assistance Grant ("JAG") Program, and further to 34 U.S.C. § 10153(a), I certify to the Office of Justice Programs ("OJP"), U.S. Department of Justice ("USDOJ"), that all of the following are true and correct:

1. I am the chief executive of the applicant unit of local government named below, and I have the authority to make the following representations on my own behalf as chief executive and on behalf of the applicant unit of local government. I understand that these representations will be relied upon as material in any OJP decision to make an award, under the application described above, to the applicant unit of local government.
2. I certify that no federal funds made available by the award (if any) that OJP makes based on the application described above will be used to supplant local funds, but will be used to increase the amounts of such funds that would, in the absence of federal funds, be made available for law enforcement activities.
3. I assure that the application described above (and any amendment to that application) was submitted for review to the governing body of the unit of local government (e.g., city council or county commission), or to an organization designated by that governing body, not less than 30 days before the date of this certification.
4. I assure that, before the date of this certification— (a) the application described above (and any amendment to that application) was made public; and (b) an opportunity to comment on that application (or amendment) was provided to citizens and to neighborhood or community-based organizations, to the extent applicable law or established procedure made such an opportunity available.
5. I assure that, for each fiscal year of the award (if any) that OJP makes based on the application described above, the applicant unit of local government will maintain and report such data, records, and information (programmatic and financial), as OJP may reasonably require.
6. I have carefully reviewed 34 U.S.C. § 10153(a)(5), and, with respect to the programs to be funded by the award (if any), I hereby make the certification required by section 10153(a)(5), as to each of the items specified therein.

Signature of Chief Executive of the Applicant Unit of
Local Government

Date of Certification

Printed Name of Chief Executive

Board of Supervisor President

Title of Chief Executive

Madison County, Mississippi

Name of Applicant Unit of Local Government