Bureau of Justice Assistance

Treatment Alternatives to Street Crime: TASC Programs

Second Edition

PROGRAM BRIEF
The Assistant Attorney General, Office of Justice Programs, coordinates the activities of the following program Offices and Bureaus: Bureau of Justice Assistance, Bureau of Justice Statistics, National Institute of Justice, Office of Juvenile Justice and Delinquency Prevention, and the Office for Victims of Crime.
I am pleased to present this second edition of the Treatment Alternatives to Street Crime (TASC) program brief. The first program brief, distributed to over 10,000 State and local decisionmakers, TASC program operators, and other criminal justice agencies, has sparked a renewed interest in case management programs that supervise drug-dependent offenders in the community.

TASC provides an objective and effective bridge between two separate institutions: the criminal justice system and the treatment community. The criminal justice system's legal sanctions reflect community concerns for public safety and punishment while the treatment community emphasizes individual behavior change through therapeutic relationships. Under TASC supervision, community-based treatment is made available to drug-dependent offenders who would otherwise burden the criminal justice system with their acknowledged and persistent criminality.

In the past 2 years, TASC programming has become more sophisticated and our knowledge of the field has expanded. Thus, this second edition is offered to further national interest in case management programs and to promote their adoption.

Sincerely,

Elliott A. Brown
Acting Director
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THE TASC BRIDGE

Criminal Justice System
- legal sanctions
- community safety
- punishment

Treatment System
- therapeutic relationship
- changing individual behavior
- reducing personal suffering
THE TASC MISSION AND PHILOSOPHY

Treatment Alternatives to Street Crime (TASC) provides an effective bridge between two separate institutions: the criminal justice system and the treatment community. The justice system's legal sanctions reflect community concerns for public safety and punishment while the treatment community emphasizes therapeutic relationships as a means for changing individual behavior and reducing the personal suffering associated with substance abuse. Under TASC supervision, community-based treatment is made available to drug-dependent offenders who would otherwise burden the justice system with their persistent criminality.

Purpose

TASC combines the influence of legal sanctions for probable or proven crimes with the appeal of such innovative criminal justice system dispositions as deferred prosecution, creative community sentencing, diversion, pretrial intervention, probation, and parole supervision to motivate the substance abuser to cooperate with treatment.

Goals

Through treatment referral and closely supervised community reintegration, TASC aims to permanently interrupt the cycle of addiction, criminality, arrest, prosecution, conviction, incarceration, release, readdiction, criminality, and rearrest. For a more in-depth discussion of TASC goals, see pages 27–29.

Objectives

Within the criminal justice system, TASC is able to reduce the costs and relieve many substance abuse-related processing burdens through assistance with such duties as addiction-related medical situations, pretrial screening, and post-trial supervision.

The treatment community also benefits from TASC's legal focus, which seems to motivate and prolong offenders' treatment cooperation and ensures clear definition and observation of criteria for treatment dismissal or completion. Public safety is also increased through TASC's careful supervision of criminally involved offenders during their community-based treatment experience.
THE DEVELOPMENT AND SUCCESS OF TASC

A 1962 landmark Supreme Court decision, *Robinson v. California*, stipulated that because chemical addiction is an illness rather than a crime, the State may force an addict to submit to treatment and may impose criminal sanctions for failure to comply with that treatment program. In the developing attitude of the times, penal coercion was being rejected as an effective rehabilitation incentive and community-based treatment for substance abuse was slowly gaining credibility. Alternatives to routine criminal justice system processing for drug-dependent offenders seemed worthy of serious consideration.

In the years following, several conceptual and strategic models were developed to implement these new perceptions. By the early 1970's, the Special Study Commission on Drugs, appointed by the President, established an unequivocal link between drugs (particularly narcotics) and crime. A small number of addicts were found to be responsible for a large percentage of crimes, and a disproportionate share of criminal justice system resources was being absorbed by their recidivism.

Discussions of how to link treatment and the judicial process and interrupt the relationship between drugs and property crimes were held by the Law Enforcement Assistance Administration (LEAA), the White House-established Special Action Office for Drug Abuse Prevention (SAODAP), and the National Institute on Mental Health's Division of Narcotic Addiction and Drug Abuse (DNADA)—predecessor to the National Institute on Drug Abuse (NIDA). The result was a Federal initiative, modeled after earlier experiments with diversion programs and two demonstration projects in New York City and Washington, D.C. The project was funded under the Drug Abuse Office and Treatment Act of 1972 and christened TASC—Treatment Alternatives to Street Crime.

The first TASC project opened in Wilmington, Delaware, in August 1972. It provided pretrial diversion for opiate addicts with nonviolent criminal charges who were identified in jail by urine tests and interviews. After assessment of their suitability for treatment and treatment needs, arrestees who volunteered for TASC were referred and escorted to appropriate community-based treatment. While in the program the addicts were monitored for continued compliance with treatment requirements. Successful completion usually resulted in dismissed charges.

LEAA issued program guidelines for replication of the TASC model that focused on pretrial diversion and sentencing alternatives for drug-dependent offenders. "Seed" grants were awarded with the understanding that successful demonstration projects would obtain local or State funding to continue within a 3-year period. During the first year (1973), 13 TASC projects were initiated by local jurisdictions in 11 States. Within 2 years, there were 29 operational sites in 24 States. LEAA provided funding for TASC in 72 grant projects, 9 of which were statewide grants designed to support multiple TASC sites. Before Federal funding was withdrawn from all TASC sites due the demise of LEAA in 1982, some 130 TASC projects existed in 29 States and Puerto Rico.

An indication of the success of LEAA's seed funding is that more than 80 percent of the TASC projects that have completed the period of LEAA financial support have been continued with State or local funding.

In 1986, the Bureau of Justice Assistance (BJA) began providing Formula grants to the States as part of Federal Anti-Drug Abuse Initiatives. As a proven effective program, TASC was eligible for this funding. BJA support also included discretionary funding to provide technical assistance and training to those States interested in implementing TASC programming and to established TASC projects in need of assistance. The number of TASC programs has increased from about 130 in 1982 to more than 180 programs (adult and juvenile components) at 130 different sites in 25 States and 2 territories (Puerto Rico and the U.S. Virgin Islands).

LEAA funded TASC programs in various types of geographic locations such as large metropolitan
areas, smaller cities, suburban and rural counties, and regional and statewide networks. Original of­
fender participation criteria were also expanded to include polydrug and alcohol abusers, juveniles, and in some places, victims of domestic violence and offenders with mental health problems. Services to traffic offenders with alcohol and drug problems were also expanded during the early 1980's.

All of the LEAA-funded TASC programs were required to conduct independent evaluations of their effective­
ness as part of the grant requirements. More than 40 local assessments were completed over the 10-year period of LEAA oversight. Although a few evaluators found that some TASC programs had excessively optimistic expectations for offender success, or were underutilized, the majority concluded that TASC effectively:

- Intervened with offenders to reduce drug abuse and criminal activity.
- Linked the criminal justice and treatment system.
- Identified previously untreated drug-dependent offenders.

During the same period, three national assessments of the TASC model were completed that focused on the success of multiple sites in meeting general TASC goals. Evaluators from System Sciences, Inc. con­
cluded in 1974 that each of five early TASC projects (1) handled a substantial proportion of repeat offend­
ers with long histories of addiction, (2) intro·duced more than half the identified offenders (55 percent) into their first treatment experience, and (3) reduced their criminal recidivism.

A 1976 Lazar Institute study of 22 TASC sites found that the mechanism of legally sanctioned referrals to treatment was more effective than informal treatment. Based on this finding, the investigators were able to identify several commonalities in the success of the TASC model. These included:

- The support of the treatment system.
- The broad-based support of the justice system.
- A monitoring function that was found to improve offender performance in treatment.

TASC involvement seemed to reduce rearrest rates. (Only 8 percent of offenders in all sites were known to have been rearrested for new offenses while in the TASC program.)

However, TASC continued to have no solid data base nor strategy that would allow for long-term evaluation and comparison of the program's impact on drug­
related crime or on the case processing in the justice system.

A subsequent 1978 evaluation of 12 TASC sites, also conducted by System Sciences, Inc., found the TASC model offered a beneficial and cost-effective alterna­
tive to the criminal justice system for handling drug-abusing offenders. In addition, the evaluators found that:

- TASC's major functions and procedures were effective in adhering to the stated goals and objectives.
- A majority of offenders were admitted to TASC prior to trial.
- TASC's threat of legal sanctions added a positive factor to the treatment process.
- Projects achieved remarkable success rates with offenders (considering the seriousness of the crimes and the drugs involved).
- The quality of the staff was more important to program success than other organizational factors.

Poor recordkeeping and information management, however, were found to be widespread among TASC programs.

Two reports from NIDA's Treatment Outcome Pros­
ppective Study (TOPS) examined the impact of TASC, and similar programs for drug-dependent offend­ers, on the behavior of offenders while in treatment. These 1983 and 1985 studies compared criminal justice-involved offenders (in TASC and under other justice system supervision) and volunteer counterparts, using demographic characteristics, treatment retention, treatment progress, and predatory behaviors in the year following the end of treatment.
Criminal justice-referred offenders were more likely to be male, nonwhite, young, and to have previous justice-system involvement in the year before treatment than did their volunteer counterparts. More important, TASC offenders were found to improve as much in relation to drug use, employment, and criminal behavior as other offenders during the first 6 months of treatment. TASC offenders under legal coercion also tended to remain in both residential and outpatient drug-free treatment modalities 6 to 7 weeks longer than other criminal justice-referred or voluntary offenders, a finding usually associated with better treatment outcomes. The monitoring/case management function of TASC seemed to encourage this longer treatment participation. Unfortunately, predatory crime and arrest before treatment were still the most consistent predictors of criminal reinvolvelement, as measured by arrest records and self-reports, in the first post-treatment year.

Perhaps the most eloquent testimony to the success of TASC and the value placed on it by system participants, is the fiscal and program support provided to more than 100 sites in 18 States after Federal funding was withdrawn in 1982. Many of these local programs joined together to reestablish the National Consortium of TASC Programs (NCTP) in 1984.

These studies confirm the success and effectiveness of TASC programming through specific critical program elements. Among the successful elements are:

- The establishment of the broad-based support by the criminal justice and treatment system.
- The use of offender eligibility criteria that assist in early identification, assessment, and referral of the previously unidentified drug-dependent offender.
- A comprehensive monitoring or case management system that holds the offender accountable and has been proven to reduce offender rearrest rates and improve the treatment performance of the drug-dependent offender.

Conversely, these studies have also shown that the lack of data collection and evaluation as critical program elements have hindered TASC programming. Furthermore, staff training has been found to be a critical program element as the staff is a major factor in the program's overall success.
CURRENT BLOCK GRANT FUNDING
OBJECTIVES AND REQUIREMENTS

After a nearly 5-year hiatus, the Justice Assistance Act of 1984 revived Federal endorsement of and fiscal support for TASC. This legislation authorized a criminal justice block grant program (listing 18 purposes) to encourage State and local government implementation of specific programs of proven effectiveness deemed highly likely to improve criminal justice system functioning—with a special emphasis on violent crime and serious offenders. The Justice Department’s Bureau of Justice Assistance (BJA), Office of Justice Programs, which has administrative authority for the block grants, published regulations for grant applicants in May of 1985.

Following the implementation of the Justice Assistance Act, Congress enacted the Anti-Drug Abuse Act of 1986. State and Local Assistance for Narcotic Control Formula Grant Program, P.L. 99-570, Subtitle K, complemented the Justice Assistance Act with seven additional purposes for block grant funding focusing on the (1) apprehension, (2) prosecution, (3) adjudication, (4) detention and rehabilitation, (5) eradication, (6) treatment, and (7) identification of major drug offenders. These purpose areas’ primary focus was to assist the criminal justice system in expeditiously moving the drug-dependent offender through the criminal justice system.

As it pertained to Justice, the Anti-Drug Abuse Act of 1988 revoked the Justice Assistance Act of 1984, generating 21 purpose areas for Justice funding. These purpose areas combined the Justice Assistance Act and Anti-Drug Abuse Act of 1986 purpose areas. The 21 purpose areas in the 1988 Act include:

1. Demand reduction education programs.
2. Multijurisdictional task force programs.
3. Programs designed to target the domestic sources of controlled and illegal substances.
4. Provision of community and neighborhood programs that assist citizens in prevention and controlling crime.
5. Disrupting illicit commerce in stolen goods and property.
6. Improving the investigation and prosecution of white-collar crime, especially drug-related crime.
7. Improving operational effectiveness of law enforcement and the development and implementation of antiterrorist programs.
8. Career criminal prosecution programs.
10. Improving the operational effectiveness of the court process.
11. Correctional resources and system enhancement programs.
12. Work and training programs for inmates.
13. Programs which identify and meet the treatment needs of adult and juvenile drug dependent and alcohol offenders.
14. Developing and implementing programs which provide assistance to jurors and witnesses and compensation to victims of crimes.
15. Programs which improve drug control technology, such as pretrial drug testing programs, programs which provide for identification and assessment, referral to treatment, case management and monitoring of drug-dependent offenders, enhancement of State and local forensic laboratories.
16. Innovative program approaches to enforcement, prosecution, and adjudication of drug offenders.
17. Programs to address the problem of drug trafficking and illegal manufacture of controlled substances in public housing.
18. Improving the criminal and juvenile justice system’s response to domestic and family violence.
19. Drug control evaluation programs.

20. Alternatives to detention, jail, and prison for persons who are no danger to the community.

21. Programs which strengthen urban enforcement and prosecution aimed at street drug sales.

As listed here, purpose areas related to TASC funding include: 11, 12, 13, 15, 16, and 20.

As part of its responsibilities for encouraging and assisting with the development of viable and effective TASC projects, BJA has defined and developed the TASC program model:

- Orthodoxy.
- Transferability.
- Permanency.

Orthodoxy implies the clear definition of essential, distinct, and interrelated elements of a model—both functional and organizational—that in their totality comprise a core program. Such elements must be sufficiently accepted by and adhered to among program practitioners to distinguish the generic framework and performance standards from other similar programs and to ensure their replication. Orthodoxy also implies common understanding of terminology that is critical to clear communication.

Transferability means a model's adaptability or potential for replication in a variety of settings because it meets common needs, has clarity of purpose, can be easily implemented, and encourages both communication and innovation.

Permanency is defined as durability and stability expressed in the adequacy of program resources for continuing commitment and organizational viability. Permanency implies a network of well-qualified peers dedicated to maintaining program operations and visibility.

BJA funds assistance to State and local jurisdictions for operating programs developed under their legislative purpose areas. For TASC program efforts, this results in technical assistance and training for TASC.

From the BJA training and technical assistance effort, the following program elements and performance standards were developed by a 16-member advisory panel of program practitioners and experts who prepared recommendations for these elements from the existing network of TASC programs. The initial draft of these critical elements and performance measures was recirculated among field practitioners for further review and comment. (These elements are delineated in the next section.)

The timeframes for implementing each of the critical program elements will vary from one local jurisdiction to another. It should, however, take no more than three months to have the organizational elements in place. To have the program fully operational—to include all operational elements—should take no more than another three months. Overall, it will take at least six months to implement a TASC program that runs effectively and efficiently.
CRITICAL PROGRAM ELEMENTS AND PERFORMANCE STANDARDS

TASC Critical Program Elements

Organizational Elements

Element 1
A broad base of support from the criminal justice system with a formal system for effective communication.

Element 2
A broad base of support from the treatment community with a formal system for effective communication.

Element 3
An independent TASC unit with a designated administrator.

Element 4
Required staff training, outlined in TASC policies and procedures.

Element 5
A system of data collection for both program management and evaluation.

Operational Elements

Element 6
Explicit and agreed upon eligibility criteria.

Element 7
Screening procedures for the early identification of eligible offenders.

Element 8
Documented procedures for assessment and referral.

Element 9
Documented policies, procedures, and technology for drug testing.

Element 10
Procedures for offender monitoring with established success/failure criteria, and for constant reporting to criminal justice referral source.
Organizational Elements and Performance Standards

Element 1: A broad base of support from the criminal justice system with a formal system for effective communication.

Purpose

To ensure the effective and accountable operation of TASC by establishing and maintaining both a coordinated effort and an understanding through necessary communication and formal agreements for offender referrals between TASC personnel and the criminal justice components.

Performance Standards

1. Evidence or documentation of explanatory meetings convened by TASC staff with criminal justice system representatives (e.g., police, attorneys, jail personnel, judges, probation, parole, corrections, prosecutors).

2. Provide participants with a written description of the TASC mission, program elements, and services.

3. Documentation of understanding between TASC and cooperating justice system components that outlines TASC responsibilities, offender eligibility criteria, and procedures for service delivery.

4. A documented schedule of formal or informal communication between TASC and criminal justice system personnel.

5. Evidence that meetings are held regularly with both criminal justice and treatment system personnel to discuss mutual interests and concerns.

Element 2: A broad base of support from the treatment system with a formal system for effective communication.

Purpose

To establish and maintain both a coordinated effort and an understanding between TASC personnel and the treatment community to ensure availability of appropriate treatment program options, effective offender referrals, and case management activities.

Performance Standards

1. Where appropriate, proof that licensing requirements have been met by the TASC program.

2. Descriptions of TASC services and requirements provided to local treatment agencies.

3. Written agreements between TASC and each cooperating treatment agency that detail, at a minimum: offender eligibility for TASC, standard procedures for referrals, normal services provided during treatment, TASC and treatment success/failure criteria, routine TASC monitoring and progress reporting, termination notification requirements, and confidentiality limitations and agreements.

4. Evidence of regular communication between TASC and the participating treatment agencies.

5. Evidence of regular meetings with both criminal justice and treatment system participants to discuss mutual interests and concerns.
Element 3: An Independent TASC unit with a designated administrator.

**Purpose**

To ensure TASC program integrity and organizational capability to carry out the program mission and meet the agreed upon expectations of the criminal justice and treatment systems.

**Performance Standards**

1. Specific evidence that the TASC program performs the discrete TASC/case management function.

2. Proper assurances (e.g., articles of incorporation, written agreement, and organizational chart) that the TASC unit will be full time and independent of the umbrella agency.

3. Documentation that a qualified administrator has been hired.


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Element 4: Required staff training, outlined in TASC policies and procedures.

**Purpose**

To ensure that all professional TASC staff sufficiently understand the TASC mission and philosophy, as well as specific policies and procedures of their local site.

**Performance Standards**

1. A training plan and schedule developed for the TASC unit that delineates the unit's goals, policies, and procedures as well as the goal of each staff member.

2. At least 32 hours of TASC training provided to each professional TASC staff member. Topics covered should include: the TASC mission and philosophy, pharmacology, sentencing practices, assessment of drug dependency, substance abuse treatment modalities and expectations, and case management duties.

3. Documentation of completed training in staff personnel files.

4. Provision to each staff member of operational policies and procedures, and accurate job description within the first two weeks of employment.
Element 5: A system of data collection for both program management and evaluation.

Purpose

To provide timely and accurate information to TASC administrators for managing and developing program services, determining operational effectiveness, providing appropriate information to funding sources, and meeting public information needs.

Performance Standards

1. Standardized reports developed to provide management and evaluation information to program administrators and staff.

2. Routine collection of the following information: number of offenders identified, assessed, referred, and accepted; number of services provided to offenders; number of offenders who complete treatment and drop out of treatment; offender age, sex, race, education, employment status, criminal or other charges, drug-dependent status, and primary drug of abuse; other diagnostic testing results; offender success criteria, failure, and rearrest rates; and other appropriate offender intervention points.

3. Quality control measures for data input.

4. Assurance of quality data collection, input, and reporting through file review; review and comparison of hard copy with computer printout; regular outside review; and supervisor review.

5. Impact reports on program effectiveness, problem identification and resolution, public information, management planning, and program evaluation.

6. Distribution of impact reports to appropriate administrators and staff.
Operational Elements and Performance Standards

Element 6: Explicit and agreed upon eligibility criteria.

**Purpose**

To set clear admissions standard for TASC programs so that all TASC staff, cooperating criminal justice system components, and treatment agencies understand who is eligible for TASC services.

**Performance Standards**

1. Established eligibility criteria that include justice system involvement, current or previous drug involvement, voluntary consent, waiver of confidentiality, compliance requirements, and explanation of the limitation of confidentiality.

2. Documentation of the program's compliance with eligibility criteria through random sample of offender's files.

Element 7: Screening procedures for the early identification of eligible offenders.

**Purpose**

To ensure the earliest appropriate identification and screening of TASC candidates within the justice system.

**Performance Standards**

1. Evidence of program efforts towards early referral from: pretrial release, diversion, deferred prosecution, presentence, sentencing, probation, probation violation, parole, and parole violation.

2. Use of a screening instrument that determines offender eligibility.
Element 8: Documented procedures for assessment and referral.

**Purpose**

To provide a standardized assessment (through written documentation) of the TASC offender's need for substance abuse treatment and/or other human service needs that facilitate referral(s) to the appropriate treatment modality, and to provide a basis for a case management plan.

**Performance Standards**

1. Face-to-face assessment interview with each potential TASC offender.

2. Standardized assessment forms for confirming each potential offender's drug-involved status; the extent of justice involvement; agreement to participate in TASC; and an explanation of confidentiality rules and regulations.

3. Matching offender to most appropriate treatment resource as determined by the assessment interview.

4. Offender is recommended to a treatment agency within 48 hours of the TASC assessment.

5. Policies and procedures for office monitoring by TASC staff for cases when treatment placement is not immediately available.

6. Collection of assessment data and reports made to appropriate sources.

Element 9: Documented policies, procedures, and technology for drug testing.

**Purpose**

To reliably monitor each offender's use or abstinence from specified drugs.

**Performance Standards**

1. Documented policies and procedures for monitoring TASC offenders through urinalysis and other physical tests.

2. Random or scheduled urine testing conducted as determined necessary by progress of offender in outpatient treatment.

3. Documentation of the following procedures: urine collection, chain of custody, 48-hour response time, quality control, confirmation of positive test results.

4. Formal relationship established with certified or licensed laboratories/professional to conduct urinalysis and/or other tests of physical specimens.
Element 10: Procedures for offender monitoring with established success/failure criteria, and for constant reporting to criminal justice referral source.

**Purpose**

To ensure effective and efficient case management and tracking of offender progress through the treatment system, including accurate and timely reporting of offender status to referring criminal justice system components.

**Performance Standards**

1. Documented specification criteria for successful TASC termination. (Success means completion of the case management plan.)

2. Documented specification criteria for unsuccessful TASC termination. Failure criteria should include:
   - A specified number of unexcused absences for treatment or TASC.
   - A specified number or percentage of positive urine tests or other evidence of continuing drug use.
   - Documentation of a lack of cooperation or participation in TASC or treatment.
   - The commission of a new crime.

3. Documented agreement of all cooperating system participants to the success/failure criteria.

4. Documentation of quarterly review of individual case files by a designated supervisor.

5. Random file review to ensure accurate and timely reporting between TASC and treatment. Documentation should include:
   - Notification of each offender's TASC acceptance, treatment placement, and case management plan.
   - TASC regular receipt of progress reports from the accepting treatment agency.
   - Distribution of regular TASC progress reports to criminal justice.
   - Immediate notification (within 24 hours) of any offender's unsuccessful TASC termination.

6. Documented verification (through random file review) of the case manager's written notification of all face-to-face and telephone contacts. The verification should include:
   - All contacts with the TASC offender.
   - All contacts with referring criminal justice system referral sources.
   - All contacts with receiving treatment agency.
   - Contacts that determine the TASC offender's progress in meeting the determined case management goals.
   - Support documentation for all offender interventions, successful and unsuccessful terminations.
DEFINING TASC STANDARDS—THE ASSESSMENT PROTOCOL

The assessment protocol enables the evaluation of how the TASC critical elements are implemented and operated at local TASC sites. It also details:

- The numbers and types of TASC system participants and how each relates to program operations.
- Problems that have been or are being encountered and effective strategies developed to overcome these difficulties.
- Individual site organization and administration and how these interact with the criminal justice and treatment systems.
- Characteristics of the TASC, criminal justice, and treatment participants at each site and the impact each of these has on TASC program functioning and potential offender outcome.

Critical Element Assessment Protocol Instrument

Element 1: Broad-based support by the criminal justice system.

Purpose

To establish and maintain both a coordinated effort and an understanding through necessary communication and formal agreements for offender referrals between TASC personnel and the criminal justice components to ensure the effective and accountable operation of TASC.

1. Does evidence/documentation exist of meetings held with the following?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
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<tbody>
<tr>
<td>Police</td>
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<tr>
<td>Attorneys</td>
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<td>Jail personnel</td>
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<td>Corrections</td>
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<td>Prosecutors</td>
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<td>Other appropriate court services personnel (please specify):</td>
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</tbody>
</table>

2. Are TASC system participants provided with written descriptions for:

- The TASC mission?
- Program elements?
- Other services?

If yes, please attach description(s):

3. Is there documentation between TASC and cooperating criminal justice system components that outline:

- TASC responsibilities?
- Offender eligibility criteria?
- Procedures for service delivery?
4. Is there documentation of formal or informal schedules of communication between TASC and criminal justice system personnel?

Yes  No

(Observation of daily operation may be discussed)
Please describe:

5. Is there evidence that meetings are held regularly with both criminal justice system participants and treatment system personnel to discuss mutual interests and concerns?

Yes  No

If yes, please describe (include timetable):

____ Number of performance standards met
____ Number of performance standards missing

Comments/recommendations:

Element 2: Broad-based support by the treatment community.

Purpose

To establish and maintain both a coordinated effort and an understanding between TASC personnel and the treatment community to ensure the availability of appropriate treatment program options, effective offender referrals, and case management activities.

1. Have licensing requirements been met by the TASC programs (where appropriate)?

Yes  No

Please describe:

2. Have descriptions of TASC services been delivered to local treatment agencies?

Yes  No

How have these been documented?

3. Do written agreements exist between TASC and each cooperating treatment agency that detail at a minimum:

Yes  No

Offender eligibility for TASC referrals
Yes  No

Standard procedures for referrals
Yes  No

Normal services provided during treatment
Yes  No

TASC and treatment success/failure criteria
Yes  No

Routine TASC monitoring
Yes  No

Progress reporting
Yes  No

Termination
Yes  No

Notification requirements
Yes  No

Confidentiality limitations and agreements

4. Is there evidence of regular communication between TASC and the participating treatment agencies?

Yes  No

Please describe:
5. Is there evidence that regular meetings are held with both criminal justice participants and treatment system personnel to discuss mutual interests and concerns?

Yes__ No__

If yes, please describe (and include timetables):

____ Number of performance standards met
____ Number of performance standards missing

Comments/recommendations:

---

Element 3: An Independent TASC unit with a designated administrator.

**Purpose**

To ensure TASC program integrity and organizational capability to carry out the program mission and meet the agreed upon expectations of the justice and treatment systems.

1. Through observation, does this TASC program perform the discrete TASC/case management function?

Yes__ No__

Are there proper assurances, e.g., an organizational chart, that TASC will function as a full-time independent unit from the umbrella agency (if appropriate)?

Yes__ No__

Please describe:

---

Element 4: Policies and procedures for regular staff training.

**Purpose**

To ensure that all professional TASC staff sufficiently understand the TASC mission and philosophy, as well as specific policies and procedures of their local site.

1. Has a training plan been developed, documented, and disseminated for the TASC unit?

Yes__ No__

Please attach:

2. Are there at least 32 hours of TASC-relevant training provided?

Yes__ No__

3. Has the training been documented in staff personnel files and have followup discussions taken place?

Yes__ No__
4. Is each staff member provided with the following:

Yes___  No___  Current operational policies and procedures

Yes___  No___  An accurate job description (that was provided to them within the first 2 weeks of employment)

___ Number of performance standards met
___ Number of performance standards missing

Comments/recommendations:

Element 5: A management information program evaluation system.

Purpose

To provide timely and accurate information to TASC administrators for managing and developing program services, determining operational effectiveness, providing appropriate information to funding sources, and meeting public information needs.

1. Have standardized reports been developed to provide management and evaluation information to the program administrators and staff?

Yes___  No___

If yes, please attach:

2. Are specific data routinely collected, including:

___ Number of offenders identified
___ Number of offenders assessed
___ Number of offenders referred and accepted
___ Number of services provided to offenders
___ Number of offenders who complete treatment
___ Number of offenders who drop out of treatment

___ Offender age
___ Offender sex
___ Offender race
___ Offender education
___ Offender employment status
___ Offender criminal or other charges
___ Offender drug-dependent status
___ Offender primary drug of abuse
___ Other diagnostic testing results (please specify):

___ Offender success criteria
___ Offender failure criteria
___ Offender rearrest rates
___ Other appropriate offender intervention points (please specify):

3. Are quarterly reports completed that include:

Yes___  No___  Program effectiveness
Yes___  No___  Problem identification
Yes___  No___  Problem resolution
Yes___  No___  Public information
Yes___  No___  Management planning
Yes___  No___  Program evaluation

4. Are quality control measures in place for input of data?

Yes___  No___

5. If answer is yes to any part of number 3, how often are these reports disseminated, and to whom are they distributed (title)?

___ Number of performance standards met
___ Number of performance standards missing

Comments/recommendations:
Element 6: Clearly defined offender eligibility criteria.

**Purpose**

To set clear admission standards for TASC programs so that all TASC staff, cooperating justice system components, and treatment agencies understand who is eligible for TASC services.

1. Does the site have established eligibility criteria?
   - Yes  No
   
   (Criteria may be site-specific, programwide, or regionally defined where the program is multijurisdictional. Specify which situation(s) apply:
   
   If no, how are offenders sorted for criminal justice system referral? Please specify:
   
   If yes, do criteria include:
   
   - Yes  No  Justice system involvement
   - Yes  No  Current or previous drug involvement
   - Yes  No  Voluntary consent
   - Yes  No  Waiver of confidentiality
   - Yes  No  Compliance requirements
   - Yes  No  Explanation of the limitation of confidentiality
   
2. Is there documentation of the program's compliance with eligibility criteria through random sample of offenders' files?
   - Yes  No

   _____ Number of performance standards met
   _____ Number of standards missing

   Comments/recommendations:

Element 7: Screening procedures for early identification of TASC candidates within the criminal justice system.

**Purpose**

To ensure the earliest appropriate identification and screening of TASC candidates within the justice system.

1. What populations are targeted by TASC sites? Check all that apply:
   - _____ Pretrial release
   - _____ Diversion
   - _____ Deferred prosecution
   - _____ Presentence
   - _____ Sentencing
   - _____ Probation
   - _____ Probation violation
   - _____ Parole
   - _____ Parole violation
   - _____ Other (please specify)

2. Does the site use a screening instrument that determines offender eligibility?
   - Yes  No

   If yes, please attach:

   If no, how is eligibility determined?

   _____ Number of performance standards met
   _____ Number of standards missing

   Comments/recommendations:
Element 8: Documented procedures for assessment and referral.

**Purpose**

To provide a standardized assessment (through written documentation) of the TASC offender's need for substance abuse treatment and/or other human services that facilitate referral(s) to the appropriate treatment modality, and to provide a basis for a case management plan.

1. Does the site conduct face-to-face assessment interviews with each potential TASC offender?

   Yes  No

2. Are standardized assessment forms used for confirming, at a minimum, each potential offender's:

   Yes  No
   Drug-involved status
   Yes  No
   Extent of justice involvement
   Yes  No
   Agreement to participate in TASC
   Yes  No
   Understanding of confidentiality rules and regulations

Please attach assessment instrument:

3. Is each offender matched to the most appropriate treatment (as determined by the assessment)?

   Yes  No

4. Is each offender recommended to a treatment agency within 48 hours of the TASC assessment?

   Yes  No

   If immediate placement is unavailable, are policies and procedures for office monitoring by TASC staff performed during the interim period?

   Yes  No  N/A

   If yes, please describe:

5. Are the data collected from the assessment and reported to appropriate sources?

   Yes  No

   ____ Number of performance standards met
   ____ Number of performance standards missing

Comments/recommendations:

Element 9: Policies, procedures, and technology for monitoring TASC offender's drug use through urinalysis or other physical evidence.

**Purpose**

To reliably monitor each offender's use of or abstinence from specified drugs.

1. Are there documented policies and procedures in place to monitor a TASC offender through urinalysis?

   Yes  No

2. Do offenders who are referred to outpatient treatment comply with random or scheduled urine testing as determined by progress in treatment?

   Yes  No

3. Are procedures documented and in place for each of the following:

   Yes  No
   Urine collection
   Yes  No
   Chain of custody
   Yes  No
   48-hour response time for results
   Yes  No
   Quality control
   Yes  No
   Confirmation of positive test results

Please describe each:
4. Are formal contract(s) executed with certified or licensed laboratories/professionals to conduct urinalyses and/or other tests of physical specimens?

Yes___ No___

Please attach or describe:

_____ Number of performance standards met
_____ Number of performance standards missing

Comments/recommendations:

Element 10: Monitoring procedures for offender's compliance with established TASC and treatment criteria and regular reporting of offender progress to referring criminal justice system components.

**Purpose**

To ensure effective and efficient case management and tracking of all offenders' progress through the treatment system, including accurate and timely reporting of their status to referring justice system components.

1. Does documentation specify criteria for successful and unsuccessful TASC termination?

Yes___ No___

If yes, does this documentation include:

Success for: Completion of the case management plan?

Yes___ No___

Failure for:

- A specified number of unexcused absences from treatment or TASC?
  
  Yes___ No___

- A specified number or percentage of positive urine tests or other evidence of continuing drug use?
  
  Yes___ No___

- Documentation of a lack of cooperation or participation in the treatment or TASC?
  
  Yes___ No___

- The commission of a new crime?
  
  Yes___ No___

2. Have the success/failure criteria been agreed to by all cooperating system participants?

Yes___ No___

Explain:

How is this documented?

3. Is there documentation that affirms that a quarterly review of individual case files has been completed by a designated supervisor?

Yes___ No___

4. Is documentation provided, by random file review, that ensures accurate and timely reporting/communication between TASC and treatment, including:

- Notification of each offender's TASC acceptance, treatment placement, and case management plan.
  
  Yes___ No___

- TASC regular receipt of progress reports from the accepting treatment agency.
  
  Yes___ No___
• Distribution of regular TASC progress reports to justice.
  Yes____  No____

• Immediate notification (within 24 hours) of any offender’s unsuccessful TASC termination.
  Yes____  No____

5. Is documentation (by random file review) provided that verifies the case manager’s written notification of all face-to-face and telephone contacts, including:

• All contacts with TASC offender.
  Yes____  No____

• All contacts with referring justice system referral sources.
  Yes____  No____

• All contacts with receiving treatment agency.
  Yes____  No____

• Contacts that determine the TASC offender’s progress in meeting the determined case management goals.
  Yes____  No____

• Support documentation for all offender interventions, successful and unsuccessful terminations.
  Yes____  No____

_____ Number of performance standards met
_____ Number of performance standards missing

Comments/recommendations:
RECOMMENDED TASC OUTCOME MEASURES

The assessment protocol assists TASC programs in implementing proven process of TASC operations. Based on this assessment, it has been necessary to establish outcome measures that evaluate the effectiveness of TASC programs.

As all TASC professionals realize, measuring the outcome of a service or intervention when there are a myriad of uncontrolled variables cannot produce hard and fast results, but rather indications as to the likely direction of the effect of the intervention. For programs such as TASC, outcome measures are relative. With a few exceptions, it is impossible to say conclusively what would have happened had an individual not been a part of a TASC program. Yet, it is also true that anecdotal measures of effectiveness are no longer a sufficient basis for policy and resource decisions.

What can be measured is the extent to which a TASC program meets the goals.

Articulating the goals of TASC programs was a lengthy process that was completed at the National Association of State Alcohol and Drug Abuse Directors (NASADAD) Drug-Related Program Development, Assistance, and Training Advisory Board meeting in October 1987. These goals were adopted by the National Consortium of TASC Programs in February 1989. The TASC goals are to:

- Reduce the criminality of the alcohol- and other drug-dependent offenders.
- Maximize the rehabilitative aspects of the criminal justice system.
- Maximize the rehabilitative aspects of the treatment system.

Recommended Outcome Measures for TASC Programs

Goal 1: Reducing criminality

Goal 2: Maximizing the rehabilitative aspects of the criminal justice system

Recommended Outcome Measure 1: Rearrest Rates

The relationship between drug use and criminal behavior is a very complex one. Some, but certainly not all, crimes committed by TASC offenders can be attributed to drug use. It would be unrealistic to expect criminal activity to cease in a group so entrenched in the criminal lifestyle, but it can be expected that the level of criminal activity will diminish.

Given that addicts chronically relapse, measures other than rearrest are often thought to be more appropriate. Intervention with the drug-dependent population requires a lengthy management program. While it is true that the myriad interventions provided by TASC programs assist the criminal justice decisionmaker in managing the drug-dependent offender caseload, it is also true that the point of the offender's actual reentry into the criminal justice system is what is most significant to criminal justice decisionmakers. Overall, the criminal justice system's interest in the drug-dependent offender population hinges on law enforcement and safety.

The rehabilitation philosophy of the criminal justice system rests on the premise that persons who commit crimes have identifiable reasons for doing so, and that these can be discovered, addressed, and altered. Its aim is to modify behavior and reintegrate the lawbreaker into the wider society as a productive citizen.
In fact, the National Academy of Criminal Justice has defined rehabilitation as no further criminal justice involvement.4

The criminal justice system is willing to lend its authority to TASC because TASC services reduce the management of an already burdensome caseload. For TASC to truly be an effective service to the criminal justice system, TASC must assist in diminishing criminal activity.

While rearrest does not necessarily presume criminal reinvolve, because the individual defendant has yet to be proven guilty, rearrest does presume reentry into the criminal justice system and therefore resumption of the use of the local jurisdiction’s criminal justice resources.

Through examination of rearrest rates, acceptable or “successful” levels can be determined over time.

Goal 3: Maximizing the rehabilitative aspects of the treatment system

Recommended Outcome Measure 2: Retention in Treatment

Case management under the auspices of TASC is associated with longer retention in treatment.5 Further, it is accepted that treatment retention is an important contributor to treatment effectiveness.6 The problem of retention reflects the chronic and severe nature of drug dependence. For example, a study of seven therapeutic communities in six States found that 12-month retention rates averaged 12 percent.7 Research, primarily completed with heroin addicts, indicated that treatment lengths of six months or more were necessary to produce significant changes in offender characteristics and conditions related to reducing drug use.8 Finally, research also suggested that criminal behavior had been found to diminish while individuals were in treatment.9

Given the importance of retention and the findings of TASC’s contribution to longer retention rates as reported in the Treatment Outcome Prospective Study (TOPS), that participation in treatment with a TASC referral contributes to longer retention, it is incumbent upon TASC programs to continue to measure the offender’s retention in treatment as a means of strengthening the TASC position within the community.

While it would certainly be easier to choose a 6-month retention rate as the measure for this particular TASC goal, the countless treatment options, lengths, and diverse factors contributing to retention rates would convolute this outcome measure so that in the final analysis it would be worthless. The proportion of time the individual is retained in treatment presents a more accurate picture of offender outcome for this specific TASC program goal.

To measure an individual’s retention in treatment one must look at the percentage of time the TASC offender remains in his or her assigned or recommended treatment modality, whether it is 26 days or 26 months. TASC programs need to generate individual treatment “Program Profiles” that document specific and intended treatment lengths of each facility to which TASC refers. Upon successful or unsuccessful termination from TASC, the offender’s rate of retention, within his/her designated treatment facility, may then be recorded for future study and comparison.

Recommended Outcome Measure 3: Drug-Free Status

In recent years, urinalysis has received considerable attention as a source of information about an offender’s drug use. Since its inception in 1972, TASC has used urine testing as a means of gathering information for both the identification and monitoring of the drug-dependent offender. To this day, urinalysis continues to be a critical element for TASC programs.

With the increasing use of urine testing over the past decade, substantial information collected from diverse offender populations has converged to show that addicted offenders are likely to commit both drug and nondrug crimes at high rates.10 Research further indicates that with the use of urinalysis, treatment-induced reduction in narcotics use is associated with concurrent reductions in individual crime rates.11

Historically, much of what has been learned about the relationship between drug use and crime has come from studies that have relied heavily upon offender’s self-reports.12

Generally, self-report of drug use data is unreliable even when collected in a research-oriented, confidential environment. If accurate self-reports cannot be obtained in a voluntary, confidential research setting, then valid self-reports are even less likely to be
forthcoming in a nonconfidential, obligatory setting. Since it is a duty of TASC to report an offender's progress in treatment to criminal justice officials, the use of urinalysis is an essential tool for confirming or denying the accuracy of an offender's self-report.

To measure the rehabilitative aspects of the treatment system, in conjunction with the rehabilitative aspects of the criminal justice system, it is necessary to include the condition of the offender's drug-free status. Through the use of urinalysis as an outcome measure, TASC programs are provided with a technologically sound and credible method to determine offenders' compliance with this goal and their treatment plan.

TASC Effectiveness

Only after these outcome measures are recorded by TASC programs for a significant period of time will a true measure of program effectiveness become available for discussion. After data are collected using these measures by a number of TASC programs over a specific period of time, specific questions on TASC's effectiveness may begin to be answered. These questions include: how should TASC effectiveness or ineffectiveness be evaluated, should cutoff rates for rearrest and retention in treatment be used, and what should those cutoff rates for successful and unsuccessful programs be?

To achieve an accurate evaluation of TASC programs, this information must be gathered and compared, not only over time, but also with a non-TASC group.
OUTCOME MEASURES REFERENCES


8. ibid.


13. ibid.
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1. History and Evolution of TASC Programs


2. Technical Assistance for TASC Program Development


3. Evaluation of TASC Programs


4. The Relationship Between Drugs and Crime


5. Urinalysis and the Offender


6. Compulsory Treatment Research/Evaluation


7. Offender/Treatment Matching


ENDNOTES


8. ibid.


13. ibid.
Criminal Justice System Terminology

The various impact points in the criminal justice process system are defined as follows:

**Arrest:** the holding in legal custody, either at the scene of the crime or as a result of investigations. Could also be the result of complaint filed by a third party, outstanding warrant, or revocation of probation or parole.

**Booking:** the process of being admitted into detention.

**Initial Appearance:** appearance in court before a magistrate where bond is set or determination is made to retain in jail or release.

**Arraignment:** appearance in court when the accused is formally charged with a crime.

**Pretrial Conference:** the prosecutor, defense attorney, and judge meet prior to trial to establish parameters for the trial. Often a plea is negotiated at this point.

**Trial:** court hearing in which prosecutor presents case against the defendant to show that the person is guilty of the accused crime; judge or jury decides verdict.

**Presentence Investigation:** if the offender has been found guilty, a comprehensive report including social, criminal, and other histories; the report will usually include a recommendation for sentencing.

**Sentencing:** disposition of a case, where penalties are imposed.

**Probation:** sentence of community-based supervision. Includes stipulations and prohibitions of certain activities, often includes fines.

**Incarceration:** sentence of imprisonment, either in State prison or local jail.

**Parole:** release from prison before maximum completion of sentence. Parole involves stipulations and prohibitions on certain activities.

Some commonly used terms by the criminal justice system are defined as follows:

**Ball:** an amount of money set by judge to assure an appearance at court.

**Bond:** percent of bail actually paid.

**Capias/Warrant:** judge's order to rearrest individual.

**Court Order:** decision of the court, often mandating certain behaviors.

**Diversion:** a process whereby a defendant is not adjudicated if certain conditions are met.

**Docket:** order of cases to come before the judge.

**Felony:** major criminal offense.

**Misdemeanor:** minor criminal offense.

**Nolo Contendere:** plea, neither admitting or denying guilt.

**Plea Bargain:** a negotiated deal on penalty for alleged crimes.

**Rap Sheet:** record that contains all arrests of offender.

**ROR:** release on own recognizance.

**Speedy Trial:** right to trial within 180 days.
**Substance Abuse Treatment Terminology**

**Treatment:** any intervening factor having the potential effect of changing behavior that has been previously judged as needing to be changed. Substance abuse treatment involves planned, therapeutic intervention with discontinuing the substance use or abuse as the ultimate goal. Substance abuse treatment generally consists of specific modalities designed to meet a particular offender's needs for degree of structure.

**Treatment Modalities:** specific methods of substance abuse treatment designed to meet a offender's need for structure, ranging from very restrictive (hospitalization, inpatient) to nonrestrictive (self-help groups, drop-in counseling centers).

The following list indicates types of treatment modalities and indicates basic points about that specific modality.

**Detoxification:** structured medical or social milieu in which the individual is monitored while undergoing withdrawal from the acute physical and psychological effects of addiction.

**Methadone Treatment:** an outpatient mode of treatment for opiate-dependent persons. Involves counseling, urinalysis, and the supervised dispensing of daily oral doses of methadone, a long-acting narcotic. Methadone maintenance involves dispensing to a offender a stable dose of methadone but not enough to make the offender "high." Methadone detoxification is the process of reducing the dose of methadone over a given time to "wean" the offender from opiates. Benefits include the termination of IV-drug use and its physical complications, no "highs" and "sickness," and elimination of the need to steal to support an expensive habit.

**Long-Term Residential:** inpatient, usually 6- to 24-months duration with gradually increasing levels of responsibility and privilege. Often in three major phases: inpatient, live-in/work-out, aftercare. Also known as Therapeutic Community (TC), which is run on a family principle. Each offender is a member of the TC family.

**Short-Term Residential:** 28-day inpatient (may be as long as 90 days) and may include detoxification as the first stage.

**Halfway House:** transitional facility where offender is involved in school, work, training, etc. Offender lives onsite while either stabilizing or reentering society drug free. Usually receives individual counseling as well as group/family/marital therapy.

**Day Treatment:** offender resides at home while attending counseling/treatment 4—8 hours per day, 5—6 days per week.

**Drug-Free Outpatient:** offender lives away from treatment center. May be working or in school, sees therapist one to five times weekly for counseling that may include individual, group, or family therapy. Can be the primary modality of choice or may be part of the transition process from more restrictive to less restrictive therapeutic environment.

**Support Groups:** self-help peer groups for mutual support such as Alcoholics Anonymous (AA), Narcotics Anonymous (NA), or Adult Children of Alcoholics (ACOA). Meetings are either open or closed and occur at various times daily or weekly.

**Education Groups:** seminars, workshops, specific interest meetings discussing a particular topic designed for increased awareness.

**Family Education Groups:** structured education sessions to inform family members of chemical dependency issues.

**Ancillary or Auxiliary Services:** supplemental services provided outside the treatment facility such as job placement, training, food stamps, and vocational rehabilitation.
A Glossary of TASC Terms

Assessment: the evaluation or appraisal of a TASC candidate's suitability for substance abuse treatment and placement in a specific treatment modality/setting, including information on current and past use/abuse of drugs, justice system involvement, and medical, family, social, education, military, employment, and treatment histories.

Case Management Plan: an individualized scheme for securing, coordinating, and monitoring the appropriate treatment interventions and ancillary services for each TASC offender's successful TASC treatment, and justice system outcomes.

Chain of Custody: necessary safeguards for ensuring the "purity" and intactness of specific materials collected for later use as legal evidence in court—usually applied in TASC projects to offenders' urine specimens that are forwarded for laboratory analysis.

Court Liaison: communications between TASC and justice system personnel for establishing and maintaining mutual understanding during the transaction of judicial business—most frequently referring to court visibility and testimony about specific offenders by TASC staff.

Criteria: rules, standards, principles, or tests by which the TASC offender is measured, judged, or assessed (e.g., success/failure in treatment, eligibility for TASC participation).

Drug Dependent: a loss of self-control in the use of licit or illicit substances, including alcohol, to the extent that physical, psychological, or social problems and/or harm result.

Eligibility: meeting the requisite criteria qualifying one to be chosen.

Identification: the act of establishing whether an offender is a TASC candidate—potentially eligible for acceptance into the project.

Justice System Components: any functioning part of the legal administration continuum—from police through parole.

Monitoring: supervision or overseeing offenders through the application of specific criteria to determine their progress and success/failure.

Office Monitoring: temporary supervision by TASC staff of a offender who is waiting for available space in a treatment program after assessment/acceptance by the TASC project—generally including orientation to TASC and the specific treatment facility, urine monitoring, and some social skills counseling.

Referral: assignment of a TASC offender to the most appropriate and available treatment facility and/or other ancillary service.

Reporting: officially accounting to TASC and/or the referring justice system component for the offender's cooperation with an approved treatment plan, using prescribed and objective facts and observations.

Screening: a systematic examination of all accused or convicted offenders at particular point(s) in justice system processing to determine their potential suitability or eligibility for TASC.

Tracking: maintaining contact with and keeping informed about the whereabouts of each TASC offender.

Treatment Modality: specific types of therapeutic processes or interventions that may be used for treatment of substance abuse and can be conducted in residential or outpatient settings (e.g., methadone maintenance, drug-free counseling, detoxification, psychotherapy, other forms of chemotherapy).

Urinalysis: examination of urine sample by technical methods to determine the presence or absence of specified drugs or their metabolized traces.
Voluntary Informed Consent: agreement by the TASC candidate to participate in the project after a thorough and completely comprehensive explanation of its advantages and disadvantages, including potential benefits and sanctions by the justice system, TASC and treatment program rules and requirements, and confidentiality effects; and knowledge of consequences of successful or unsuccessful termination.
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   Adult TASC Coordinator

Operation PAR
Adult TASC
4400 140th Avenue North
Suite 170 Box 14
Clearwater, Florida 34622
813-538-7280
Fax 813-536-8221
Contact: Shirley Colletti
   Executive Director

Adult TASC Program
Mental Health Care Center of the Lower Keys
P.O. Box 488
Key West, Florida 33041
305-292-6843
Contact: Robert O. DeWolfe
   A-TASC Program Coordinator
   Dr. James Holbrook
   Executive Director

Mental Health Services
Adult TASC Program
P.O. Box 516
686 C-32
Bronson, Florida 32621
904-495-2726/486-2181
Contact: Shawn Snow
   Cheryl Smith
   Executive Director

ACT Corporation
Adult TASC
440 1/2 South Beach Street
Daytona Beach, Florida 32114
904-252-8026
Contact: Carolyn Flemming
   Component Director of TASC
   Wayne Dreggars
   Executive Director

Stewart Treatment Center
120 Michigan Avenue
Daytona Beach, Florida 32114
904-255-0447
Fax 904-238-0877
Contact: Chet Bell
   Jerry Ellen Harr
   Earnie Cantley
   Executive Director

Program to Aid Drug Abusers (PAD)
TASC
2920 Franklin Street
P.O. Box 1593
Eaton Park, Florida 33840
813-665-2211
Contact: David Gonzales
   Director
   Tony Green
   Executive Director

Spectrum TASC
2801 East Oakland Park Boulevard, Room 210
Ft. Lauderdale, Florida 33306
305-564-4200
Contact: Dave Friedman

Indian River Community Mental Center
800 Avenue “H”
Ft. Pierce, Florida 33450
407-464-8111
Contact: Dottie Lawhorn
   Director

Spectrum
Adult TASC Program
20301 Wilton Drive
Ft. Lauderdale, Florida 33305
305-563-6413
Contact: Warren Samet
   Bruce Hayden
   Executive Director
FLORIDA (continued)
Lee Mental Health Center
Adult TASC Program
P. O. Box 06137
Ft. Myers, Florida 33906
813–275–3222
Contact: Evelyn Campbell
Dr. Ruth Cooper
Executive Director

TASC/Tri-County Services
4300 SW. 13th Street
Gainesville, Florida 32608
904–374–5690
Contact: Cheryl Smith
Department Director
904–472–2193
Dr. Douglas Starr
Executive Director

Starting Place
2057 Coolidge Street
Hollywood, Florida 33020
407–925–2225
Contact: Sheldon Shaffer

Gateway Community Services, Inc.
555 Stockton Street
Jacksonville, Florida 32204
904–387–4661
Contact: Virginia Borrok

River Region Human Services Center
421 West Church Street, Suite 702
Jacksonville, Florida 32201
904–359–6571
Contact: King Holzendorf
Dick Warfel
Executive Director

MH Services of Osceola County
917 Emmett Street
Kissimmee, Florida 32741
407–846–0023
Contact: Joe Verdier

North Florida Mental Health Centers/TASC
P.O. Box 2818
Lake City, Florida 32056–2818
904–752–1045
Fax 904–758–0560
Contact: Suzanne Minnick
TASC Coordinator
Tim Atkinson
Executive Director

Metropolitan Dade County Department of
Human Resources Office of Rehabilitative
Services/TASC
111 NW. 1st Street, Suite 2150
Miami, Florida 33128
305–547–5040
Fax 305–547–3298
Contact: Janis Sanders, Director
TASC Division
Mae Bryant
Executive Director

David Lawrence Center/Court
Related Services, TASC Program
265 South Airport Road
Naples, Florida 33942
813–643–6101
Contact: Bill Flynn
Dave Schimmel
Executive Director
Cal Winger
CRS Program Director
Lisa Lassman
TASC Coordinator

Human Development Center
PASCO Adult TASC Program
P.O. 428
New Port Richey, Florida 34656
813–552–7204
813–841–7868
813–845–7735
Contact: Steve Knowles
Program Administrator
Anthony Sulikowski
Executive Director
Marion/Citrus Mental Health Inc.
Tri-County Adult TASC Program
2801 SW. College Road, Suite 16
Ocala, Florida 32674-2399
904-732-1436
Contact: Joann Hagan

Center for Drug Free Living/TASC
100 West Columbia Street
Orlando, Florida 32806
407-423-6618
Contact: Robert Lee Turner
Director

Putnam County TASC
P.O. Drawer 1355
Palatka, Florida 32077
904-328-3461
Contact: Andy Clark

Escambia County TASC
1190 West Leonard Street
Pensacola, Florida 32501
904-436-9855
Contact: Herman Welch
Randy Wilkerson
Director

Circles of Care/Brevard County TASC
1770 Cedar Street
Rockledge, Florida 32955
407-632-9480
Fax 407-631-4714
Contact: Mary Walker
TASC Director
James B. Whitaker
Executive Director

St. Johns County TASC Program
P.O. Drawer 1209
Saint Augustine, Florida 32085
904-825-5048
Fax 904-825-5050
Contact: Thomas D. Pierce
Program Director
David Pankins
Executive Director

Coastal Recovery Center
1750 17th Street
Sarasota, Florida 34234
813-953-0000
813-365-7058
Fax 813-951-0651
Contact: Jim Sleeper
Executive Director
Pete Peterson
Coordinator

Coastal Recovery Centers, Inc./TASC
410 Cortez Road West, Suite 410
Bradenton, Florida 34207
813-758-5592
Fax 813-756-8495
Contact: Larry Land
Branch Coordinator

Brafford/Union/Putnam Guidance Clinic, Inc./TASC
P.O. Box 1177
Starke, Florida 32091
904-964-8382
Contact: Dennis Smith

DISC Village Inc./TASC
3333 West Pensacola Street, Suite 100
Tallahassee, Florida 32304
904-488-6520
Fax 904-576-5960
Contact: Terry C. Turner, Director
Criminal Justice Services
Tom Olk
Executive Director

DACCO TASC
Treatment Alternatives to Street Crime
4422 East Columbus Drive
Tampa, Florida 33605
813-620-3539
Contact: Audrey Kouloheris
Director
Margo Parisi
Executive Director

Lake Sumpter Mental Health TASC Program
544 Duncan Drive
Tavares, Florida 32778
904-343-4747
Contact: Rebecca Herbst
Director
Tim Camp
Executive Director
FLORIDA (continued)
The Grove/TASC
511 S.R. 434
P.O. Box 4035
Winter Springs, Florida 32708
407-327-2686
Contact: Morris Kelly
Director
Larry Visser
Executive Director
Center for Drug Free Living
Adult TASC Program
100 West Columbia Street
Orlando, Florida 32806
407-423-6615
Contact: Joyce Glenn
Dr. Jerry Fuelner
Executive Director
New Horizons of the Treasure Coast
Adult TASC Program
602 South U.S. Highway 1
Ft. Pierce, Florida 34950
407-468-5656 or 468-4073
Contact: Dottie Lawhorn
Richard Mills
Executive Director
Bradford-Union-Putnam Guidance Clinic
Adult TASC Program
P.O. Drawer 1355
Palatka, Florida 32177
904-329-3780
Contact: Daryl Oliver
John Rogers
Executive Director
GEORGIA
TASC
State Board of Pardons and Paroles
Special Services Unit
2 Northside 75, Suite 134
Atlanta, Georgia 30318
Contact: John Prevost
Coordinator
Gwinnett/Rockdale/Newton TASC Program
175 Gwinnett Drive
Laurelsville, GA 30245
404-995-6930
Contact: Bruce Hoops
Executive Director
Toni Guidot, TASC
Program Manager, Gwinnett Co.
Ray Avant, TASC
Program Manager, Rockdale/Newton
404-786-1342
Daugherty County TASC
419 W. Ogelthorpe Avenue
Albany, GA 30226
912-889-0590
Contact: Marne Ellis
Dr. Ann Clark
Crawford Support Systems
2502 Chamblee-Tucker Road
Suite 104
Atlanta, GA 30342
404-257-0066
Contact: Marne Ellis
Dr. Ann Clark
Lowndes County TASC Program
101 E. Central Avenue, Suite 300A
Valdosta, GA 31601
912-249-9854
Contact: Kay Crockett
Program Manager
DeKalb County Court Services
Risk Reduction Program
DeKalb Addiction Clinic
1260 Briarcliff Road NE.
Atlanta, Georgia 30306
404-894-2422
Contact: Beth Upshaw
HAWAII
Hawaii Department of Corrections
Drug Screening Project/TASC
Gold Bond Building
677 Ala Moana Boulevard, Suite 700
Honolulu, Hawaii 96813
808–548–3630
Contact: Sandi Moritsugu

ILLINOIS
TASC, Inc.
1500 North Halsted, 2nd Floor
Chicago, Illinois 60622
312–787–0208
Fax 312–789–9663
Contact: Melody Heaps
Executive Director
Susan Stein
Special Assistant to the Director
Ethel Mull
Director of Program Services
Stuart Wegener
Director of Programming
and Development
James Swartz
Management Information
Systems Coordinator
Pamela Rodriguez
Director, TERM
TASC Evaluation Referral
and Management Services for
Public Aid Clients
Mildred Brooke
Region II Coordinator
618–656–7672

AREA I
Youth Services
TASC, Inc.
1100 South Hamilton
Room 12
Chicago, Illinois 60612
312–666–7339
Contact: Mary Kelly
Coordinator

Court Services
TASC, Inc.
2700 South California Avenue, Room 107
Chicago, Illinois 60608
312–376–0950 or 0897
Contact: Renee Ennis
Court Services Coordinator

Court Outposts
TASC, Inc.
1500 North Halsted, 2nd Floor
Chicago, Illinois 60622
312–787–0208 ext. 54
Contact: Beth Epstein
Area Representative Coordinator

TASC, Inc.-DuPage
201 Reber Street, Room 203B
Wheaton, Illinois 60187
312–260–0891 or 0892
Contact: Luci Beinder

TASC, Inc.-Geneva
C/O Juvenile Probation Department
428 James Street
Geneva, Illinois 60134
312–232–5883
Contact: Luci Beinder
Janelle Prueter

TASC, Inc.-Waukegan
415 Washington Street
Waukegan, Illinois 60085
312–249–2200
Contact: Michelle Bloom
Lynette Gottlieb

TASC, Inc.-Joliet
58 North Chicago Office
Suite 508
Joliet, Illinois 60431
815–727–6397
Contact: Robin Hallett

AREA II
TASC, Inc.
119 North Church Street, Suite 202
Rockford, Illinois 61101
815–965–1106
Contact: Shari Nissen
ILLINOIS (continued)

AREA II
TASC, Inc.
Regency Plaza Office Building
2525 24th Street, Suite 101
Rock Island, Illinois 61201
309-786-0816
Contact: Pamela Hauman

AREA IV
TASC, Inc.
Central Building
101 Southwest Adams Street, Suite 420
Peoria, Illinois 61602
309-673-3769 or 3794
Contact: Ed Botkin
Area Coordinator

AREA V
TASC, Inc.
Three Old Capitol Plaza West, Suite 8
Springfield, Illinois 62701
217-544-0842
Contact: David Gasperin

AREA VI
TASC, Inc.
104 West University
Urbana, Illinois 61801
217-344-4546
Contact: Christopher Patton

AREA VII
TASC, Inc.
100 West Main Street
Belleville, Illinois 62220
618-277-0410
Contact: Lindley James
Area Coordinator
Joe Schaffer
DUI Coordinator

AREA VIII
TASC, Inc.
1009 Chestnut Street
Murphysboro, Illinois 62966
618-687-2321 or 2322
Contact: Linda Dougan
Area Coordinator

AREA IX
TASC, Inc.
103 Plaza Court
Edwardsville, Illinois 62025
618-656-7672
Contact: Craig Cooper
Area Coordinator

AREA X
Roosevelt Glen Corporate Center
799 Roosevelt Road
Building 6, Suite 2
Glen Ellyn, IL 60137
708-858-7400
Contact: Beth Epstein

INDIANA
Lawrence Circuit Court TASC
1502 I Street, Room 208
Bedford, Indiana 47421
812-275-1980
Contact: Deanne Blackburn
TASC Director
Nedra Brock
Chief Probation Officer

Alcohol Courtmeasure/Probation/TASC
226 West Wallace Street
Fort Wayne, Indiana 46802
219-428-7523
Contact: Sharon Franklin
Director

ACP (Alcohol Countermeasures Probation)/TASC
226 West Wallace Street
Ft. Wayne, IN 46802
219-428-7260
Fax 219-428-7295
Contact: Janet Luce
Director
Sylvia Starks
TASC Project Director

St. Joseph's Hospital
1900 Medical Arts Drive
Huntingburg, IN 47542
812-683-2121
Contact: Bonita Bradley
TASC Component/Municipal Court Probation
Marion County Municipal Courts
200 East Washington Street
Room T641
Indianapolis, IN 46204
317-236-3841
Contact: J. Michael McConaha
   Project Director

TASC
Dubos Superior Court
Courthouse
Jasper, IN 47546
812-482-1661
Contact: Judge Elaine Brown

TASC
St. Joseph County Superior Court
Courthouse
South Bend, IN 46601
219-284-9550
Contact: Judge Geanne Jourdan
   Project Director

IOWA
Department of Correctional Services
TASC 1035 3rd Avenue SE.
Cedar Rapids, Iowa 52403
319-398-3672
Contact: Gail Juvik
   Assistant Director, TASC

National Council on Alcoholism and
Other Drug Dependencies
Suite 606, Fleming Building
218 6th Avenue
Des Moines, Iowa 50309
515-244-2297
Contact: John East Tabscott
   Executive Director

Department of Corrections
Capitol Annex
523 East 12th Street
Des Moines, Iowa 50319
515-281-4811
Contact: Patrick Coleman
   TASC Coordinator

Department of Correctional Services
P.O. Box 2596
Waterloo, Iowa 50704
319-291-2091
Fax 319-236-3525
Contact: Ben Merritt

MAINE
Division of Probation and Parole
State House Station 111
P.O. Box 3836
Augusta, Maine 04333
207-289-4381
Contact: Edmund J. Tooher
   Assistant Director

Kennebec County Jail
Community Correctional Services Program
8 Highwood Street
Waterville, Maine 04901
207-623-2270 or 873-1127
Contact: Sheriff Frank Hackett
   Sheriff William S. Tanner

TASC/Early Intervention
Somerset County Jail
5 High Street
Skowhegan, Maine 04976
207-474-9591
Contact: Sheriff William T. Wright

MARYLAND
Baltimore County Alternative Sentencing/TASC
201 West Chesapeake Avenue
Towson, Maryland 21204
301-887-2056
Contact: Diedra Schmidt
   TASC Project Director

TASC Project
105 Fleet Street
Rockville, Maryland 20850
301-279-1332
Contact: Ron Rivlin
   Health Program Management
MICHIGAN
Recorder’s Court Main Drug Intake & Referral
TASC Unit
1441 St. Antoine, Room 101
Frank Murphy Hall of Justice
Detroit, Michigan 48226
313–224–5184
Contact: Theda T. Bishop, Ph.D.

NEW JERSEY
Administrative Offices of the Court
Criminal Practice Division, CN982
Trenton, NJ 08625
609–292–0012 or 777–1209
Fax 609–633–1286
Contact: Mary DeLeo
Administrative Assistant

Burlington TASC-Court
Liaison Program
County Office Building
2nd Floor, Room 202
Mount Holly, New Jersey 08060
609–265–5335
Contact: Maureen Tablas
Senior Court Consultant

Hudson County TASC
Hudson Co. Administrative Bldg.
595 Newark Avenue, Rm. 101
Jersey City, New Jersey 07306
201–795–6857
Contact: John Perran
Project Director

Middlesex Co. TASC Project
P.O. Box 789
New Brunswick, New Jersey 08903
201–745–3649
Fax 201–745–4152
Contact: Annette Gautier
TASC Coordinator

NEW YORK
TASC of the Capital District, Inc.
87 Columbia Street
Albany, New York 12210
518–465–1455
Contact: Joanne Schlang
Executive Director

EAC, Inc.
1 Old Country Road
Carle Place, New York 11514
516–741–5580
Fax 516–294–8987
Contact: Rosemary Kelly
Executive Director
Rene Fiechter, Esquire
Senior Associate Exec. Director/Counsel
Susan Timler
TASC Division Director
Matt Cassidy
Associate Executive Director

Queens TASC
91–31 Queens Boulevard, Suite 218
Elmhurst, New York 11373
718–779–0100
Contact: Douglas Knight
Site Supervisor

Suffolk TASC
Building 16
County Center North
Hauppauge, New York 11788
516–360–5777
Contact: Victor Dodd
Site Supervisor

Staten Island TASC
25 Hyatt Street
Staten Island, New York 10301
718–727–9722
Contact: Martin Blondell
Division Director/NYC TASC

Nassau TASC/EAC, Inc.
250 Fulton Avenue
Hempstead, New York 11550
516–486–8944
Contact: Ellenmarie Beale
Division Director/L.I. TASC

Brooklyn TASC
120 Schermerhorn Street
Brooklyn, New York 11201
718–237–9404
Contact: Kenneth Linn
Site Supervisor
Westchester County
Treatment Alternatives to Street Crime
112 East Post Road, 2nd Floor
White Plains, New York 10601
914–265–5265
Contact: Carlos Maldonado
Program Administrator

Orange County TASC
P.O. Box 583
Goshen, New York 10924
914–294–9000
Contact: Allison Jayne
Director

Steuben County Probation Department
3 East Pulteney Square
Bath, NY 14810
607–776–9631
Fax 607–776–9631
Contact: Ralph Schnell
Director

ASAC of Ulster County, Inc.
785 Broadway
Kingston, NY 12401
914–331–9331
Contact: Gail Erdie
Executive Director

Niagara County Probation Department
Niagara Civic Building
775 Third Street
Niagara Falls, NY 14302
716–284–3133
Contact: N. James DiCamillo
Acting Probation Director

TASC/Release for Treatment Services
Department of Public Safety
386 East Henrietta Road, Bldg. 7
Rochester, NY 14620
716–274–8305
Fax 716–274–8309
Contact: Robert Dunning
Alternatives to Incarceration Coordinator

NORTH CAROLINA
Alcohol and Drug Abuse Services
N.C. Dept. of MH/DD/and
Substance Abuse Services
325 North Salisbury Street
Raleigh, North Carolina 27611
919–733–0566
Fax 919–733–9455
Contact: William Harris
State Coordinator

Blue Ridge Area MH/MR and
Substance Abuse Services
283 Billmore Avenue
Asheville, North Carolina 28801
704–252–8748
Contact: David Capps

TASC/Substance Abuse Program of
Alamance-Caswell Area MH/MR/SAS
Developmental Disabilities and Substance
Abuse Authority
1946 Martin Street
Burlington, North Carolina 27215
919–222–6437 or 228–0580
Contact: Gary Cole
Criminal Justice Coordinator

Open House/TASC
145 Remont Road
Charlotte, North Carolina 28203
704–332–9001
Contact: Tonda Wilde

Durham County Substance Abuse Services
705 South Mangum Street
Durham, North Carolina 27701
919–560–7500
Contact: Allen Woltersburger
Program Director

Family Recovery Services/TASC
P.O. Box 2068
Fayetteville, North Carolina 28302
919–433–2712
Contact: James A. Miller

High Point Drug Action Council
119 Chestnut Drive
P.O. Box 2714
High Point, North Carolina 27260
919–882–2125
Contact: Cole Carroll
NORTH CAROLINA (continued)

Skinner House TASC/DWI Program
123 West Third Street
Greenville, North Carolina 27834
919-752-7151
Contact: Patricia Castleberg

TASC (Treatment Alternatives to Street Crime)
Cape Fear Substance Abuse Center
419 Chestnut Street
Wilmington, North Carolina 28401
919-762-5333
Contact: Joanne Zarrello
TASC Director

Step One Inc. TASC Program
545 North Trade Street
Winston-Salem, North Carolina 27102
919-725-8389
Fax 919-725-6628
Contact: Ronald D. Pannell
Case Management Director

The Sycamore Center
301 East Washington Street
Greensboro, North Carolina 27401
919-333-6860
Contact: Shirley Davis

Edgecombe-Nash TASC
P.O. Drawer 4047
Rocky Mount, North Carolina 27803-0047
919-977-0151
Contact: Ammie Edmonson

Cape Fear Substance Abuse Center
801 Princess Street
Wilmington, North Carolina 27401
919-343-0145
Contact: Robert Wilson

Albemarle Mental Health (TASC)
P.O. Box 326
Elizabeth City, North Carolina 27909
919-335-0803
Contact: Adren Hughes

Robeson County TASC
711 North Maxton Road
Lumberton, North Carolina 28359
919-783-5261
Contact: Marilyn Thomas

Tri-County MH/DD/SAS
121 West Council Street
Salisbury, North Carolina 28144
704-637-5045
Contact: Beverly Mobley

VGFW MH/DD/SAS
125 Emergency Road
Henderson, North Carolina 27536
919-492-4011
Contact: Debbie Riley

Drug Action of Wake County
2809 Industrial Drive
Raleigh, North Carolina 27609
919-832-4483
Contact: Earl Londdon

OHIO
The Alternative Program/Quest for Recovery Services
1341 North Market Street
Canton, OH 44714
216-453-8252
Contact: Cheryl Benson
Les Weaver

OH Department of Alcohol & Drug Addiction Services
Two Nationwide Plaza, 12th Floor
Columbus, OH 43216
614-466-3445
Fax 614-752-8645
Contact: Leo Hayden

Preble County Juvenile TASC
309 1/2 East Main Street
Eaton, OH 45320
513-456-4453
Contact: Sandy McEntire

OREGON
TASC of Oregon, Inc.
1733 NE. 7th Street
Portland, Oregon 97212
503-281-0037
Contact: Linda Tyon
Executive Director
Marion Co. Dept. of Correction
3060 Center Street NE.
Salem, Oregon 97301
503-588-5289
Contact: Lee Anders
   TASC Coordinator
   Mike Wiikerson
   Billy Wasson
   Facility Director

PENNSYLVANIA
Office of Drug and Alcohol Programs
Dept. of Health
929 Health & Welfare Building
P.O. Box 90
Harrisburg, Pennsylvania 17108
717-787-2712
Fax 717-787-6285
Contact: Pete Pennington
   Criminal Justice Coordinator

Lehigh County TASC
521 Court Street
Allentown, Pennsylvania 11801
215-432-6760
Contact: Diane O'Brien
   TASC Director

GECAC TASC
809 Peach Street
Erie, Pennsylvania 16501
814-870-5424
Contact: C. Michael Calhoun
   Drug And Alcohol Unit
   Treatment Supervisor
   Jeffrey Geibel
   Supervisor

Chester County TASC Program
734 East Lancaster Avenue
Whiteland Business Park
Exton, Pennsylvania 19341
215-363-7709
Fax 215-594-0278
Contact: Susan L. Schildt
   TASC Coordinator

Drug and Alcohol Treatment and Prevention Services
108 North Stratton Street
Gettysburg, Pennsylvania 17325
717-334-8154
Contact: Richard Riggs
   Executive Director

Bucks County TASC Program
James Way Plaza
1661 Easton Road
Warrington, Pennsylvania 18976
215-343-8770
Contact: Dolores Robertson
   Program Director

Westmoreland County TASC Program
Comprehensive Substance Abuse
Serv. of Southwestern PA, Inc.
Miller Square
105 West Fourth Street
Greensburg, Pennsylvania 15601
412-832-5880
Fax 412-837-6466
Contact: Timothy J. Merlin
   Executive Director
   Lou Conte
   TASC Supervisor

Dauphin County TASC
Dept. of Drug & Alcohol Services
25 South Front Street, Suite 836
Harrisburg, Pennsylvania 17101
717-255-2985
Contact: Smittle Brown
   Director

Montgomery County TASC
319 Swede Street
Norristown, Pennsylvania 19401
215-279-4262
Contact: Allen Stillman
   Director

Allegheny County TASC Program
MonYough Ielase Institute
232 First Avenue
Pittsburgh, Pennsylvania 15222
412-261-2817
Contact: Dr. Richard Asarian
   Director
   Cheryl Cimo
   TASC Director
**PENNSYLVANIA (continued)**

Berks County Treatment Alternatives to Street Crime (TASC) Program
524 Washington Street
Reading, Pennsylvania 19601
215-375-4426
Contact: Stanley Papademetriou, President
PA Coalition of TASC Programs

Catholic Social Services/TASC Program
33 East North Hampshire Street
Wilkes-Barre, Pennsylvania 18701
717-822-7118
Contact: Carol Nicholas
M.A. Prospect Director

York County TASC
York Alcohol and Drug Services
211 South George Street
York, Pennsylvania 17403
717-854-9591
Contact: Linda Morris
Executive Director

**PUERTO RICO**

Programa TASC DSCA
Apartado 1190
Arecibo, Puerto Rico 00613
809-879-2021

Ponce TASC
P.O. Box 7321
Ponce, Puerto Rico 00732

TASC Departamento de Servicios Contra La Adicción
414 Barbosa Avenue
Hato Rey, Puerto Rico 00917–00928
809–763–7575
Contact: Carmen L. Rodríguez
Director, Puerto Rico TASC

**RHODE ISLAND**

Substance Abuse Administration Building
Rhode Island Medical Center
Cranston, Rhode Island 02920
401-464-2381
Contact: JoAnn Cotnoir
TASC Project Director

**VIRGIN ISLANDS**

TASC-St. Croix
Star Route 00864, Suite 11
Kingshill, St. Croix, VI 00850
809–778–8800
Contact: John Nowalowski
Program Coordinator
Valera Jackson
Director of Programs
The Village/Virgin Islands TASC
P.O. Box 3152
Fredricksted, St. Croix, VI 00841
305–573–3784

TASC-St. Thomas
NISKE Mailbox #308
Niske Center
St. Thomas, VI 00840
809–777–4443
Contact: Art Howell III
Program Coordinator
Valera Jackson
Director of Programs
The Village/Virgin Islands TASC
P.O. Box 3152
Fredricksted, St. Croix, VI 00841
305–573–3784

**VIRGINIA**

Richmond TASC
Richmond Mental Health
Mental Retardation and Substance Abuse Services
804 West Main Street
Richmond, Virginia 23220
804–780–4536
Contact: Martha S. Ransome

**WASHINGTON**

Snohomish County TASC/Pacific Treatment Alternatives
1114 Pacific Avenue
Everett, Washington 98201
and 19324 40th Avenue W., Suite A
Lynnwood, Washington 98036
206–259–7142
Fax 206–258–4782
Contact: Dorothy Ferguson
TASC Director, Felony Services
Pat Bernhard
Assessment Services Director
TASC Family Services
Drug Free Systems-TASC Felony Services  
TASC Family Services  
811 First Avenue, Suite 610  
Seattle, Washington 98199  
206-467-0338, ext. 111  
Fax 206-467-5902  
Contact: Jane E. Kennedy  
   Executive Director  
Sharon Toquinto  
   TASC Program Supervisor

North East Washington Treatment  
   Alternative/TASC/SAAM  
1320 North Ash  
Spokane, Washington 99201  
509–326–7740  
Fax 509–327–3139  
Contact: Janice Sutherland  
   Executive Director  
   Al Barrett  
   Director

Tacoma TASC/Pierce County Alliance  
710 South Fawcett  
Tacoma, Washington 98402  
206–572–4750  
Fax 206–272–6666  
Contact: Terree Schmidt-Whelan  
   Executive Director

Pacific Crest Consortium/Clark County TASC  
806 West 13th Street  
Vancouver, Washington 98660  
206–693–2243  
Fax 206–693–1550  
Contact: Robert G. Okey  
   Executive Director

Yakima County Alcohol/Drug Assessment and Referral Center  
Yakima County Courthouse  
128 North 2nd Street, Room B–18  
Yakima, Washington 98901  
509–575–4472  
Fax 509–454–5014  
Contact: Rodger O. Darnell  
   Director

WISCONSIN
Coordinator, Treatment Alternatives Program (TAP)  
WI Office of Alcohol and Other Drug Abuse  
P.O. Box 7851  
Madison, Wisconsin 53707–7851  
608–266–0907  
Fax 608–266–0036  
Contact: Oren Hammes  
   Dane County Treatment Alternatives Program  
16 North Carroll Street, Suite 700  
Madison, Wisconsin 53704  
608–256–4502  
Contact: Paul Pacheco  
   Eau Claire Treatment Alternatives Program  
Triniteam, Inc.  
515 South Barstow Street, Suite 114  
Eau Claire, Wisconsin 54701  
715–836–8114  
Contact: Lynn Thalacker  
   Project Director

Rock Valley Treatment Alternatives Program  
431 Olympian Boulevard  
Beloit, Wisconsin 53511  
608–362–8780  
Fax 608–362–5592  
Contact: John Schneider  
   Program Director

Wisconsin Correctional Service  
436 West Wisconsin Avenue  
Milwaukee, Wisconsin 53203  
414–271–2512  
Contact: Erv Heinzelmann

COROLLARY TASC RESOURCES
Bureau of Justice Assistance (BJA)  
Office of Justice Programs  
U.S. Department of Justice  
633 Indiana Avenue NW.  
Room 600J  
Washington, DC 20531  
202–307–0894  
Contact: Jody Forman
COROLLARY TASC RESOURCES (continued)

National Consortium of TASC Programs
444 North Capitol Street NW.
Suite 642
Washington, DC 20001
202-783-6868
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Contact: Ken Robertson
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