



# State of Colorado

First Judicial District  
Jefferson & Gilpin Counties

## ADULT MENTAL HEALTH COURT Participant Handbook



# MISSION STATEMENT

Adult Mental Health Court's mission is to promote public safety by holding justice-involved individuals with serious and persistent mental illnesses accountable for their behavior, while providing treatment and support through a team-based approach and frequent judicial monitoring



## OVERVIEW

Welcome to the First Judicial District Adult Mental Health Court (AMHC). AMHC is a problem-solving court, which works to improve the lives of adults in the court system who have been diagnosed with mental health disorders.

This handbook will provide you with the information you need to be successful in this program. **Please read it carefully and keep it in a place you can refer to it when you need to.**

We recognize every participant as an individual who should be treated with respect and dignity to promote positive and productive life changes. We strive to identify and treat mental health and/or substance abuse issues that contribute to criminal justice involvement by coordinating and collaborating with community-based services and criminal justice agencies. The aim is to assist AMHC clients to achieve long-term stability and to become law-abiding citizens and successful family and community members.

## PROGRAM DESCRIPTION

The Adult Mental Health Court is a voluntary program that takes a minimum of 14 months to complete. The actual length of the program will vary depending upon your progress. As a participant in the AMHC, you must comply with the following:

- Any instructions given by the Judge
- Terms and Conditions of your probation
- Individualized treatment plan(s) developed by your treatment team
- Rules and phase requirements outlined in this handbook

In order for you to be successful in AMHC, it will take time and commitment on your part. You are not alone, however. We would like you to know that the AMHC team is also committed to your wellness and recovery. That means that we will reinforce your strengths and positive changes, support you during difficult times, and sanction behaviors that interfere with your wellness and recovery.

We understand that you may be managing the symptoms of your mental illness throughout your lifetime. Therefore, our goal is to support you as you utilize the skills necessary to manage your illness, successfully complete probation, and avoid future criminal justice system involvement.



### THE COURT

The AMHC Judge serves as the lead member of the AMHC team and presides at all team staffing and court hearings. The Judge and other team members will make all decisions regarding your participation in the program based on input from the various team members, providers and other support services. Before your Court hearing, the Judge will be given an update on your progress by members of the AMHC Court team. During this case review the team will discuss your drug testing results, cooperation in treatment, employment, or other requirements that may have been imposed. The team will also discuss any progress or obstacles you may have encountered, which could result in rewards or sanctions.

As a participant of the AMHC Court, you will be required to appear in court on a regular basis. As you progress through the program, your appearances will be less frequent. Failure to appear will result in a warrant being issued for your arrest. No matter what struggles you may have encountered throughout the week, it is vital to show up to your court appearance on Friday to discuss these struggles with the AMHC team. During your hearing, you will speak for yourself and are encouraged to ask the Judge any questions you may have, as well as voice concerns and/or accomplishments. When attending Court, please remember these ground rules:

- **Attend all court hearings on time. If you are late, you will not be called until the end of the docket. If docket is completed before you arrive, a warrant will be issued for your arrest.**
- **Dress appropriately**
- **Refrain from the use of profanity**
- **Address the Judge and AMHC Court team with courtesy and respect**
- **Show support and encouragement to fellow participants**
- **Remain in Court until dismissed by the Judge**
- **Do not bring children to your hearings unless given prior permission from the Judge or your Probation Officer**
- **Turn your cell phone off and put away during court**
- **DO NOT BRING BACKPACKS TO COURT.**

## AMHC TEAM MEMBERS

The Adult Mental Health Court team works together to support you as you move through the program phases.



***Adult Mental Health Court Judge:*** He is the formal leader of the AMHC.

He will preside over all court proceedings and inform you of any incentives or sanctions you have earned.

***Adult Mental Health Court Coordinator:*** She is the main contact person for AMHC, oversees day-to-day operations, and works closely with the rest of the team to ensure the integrity of the AMHC is maintained.

***Adult Mental Health Court Specialist:*** She assesses mental health diagnoses, determines whether applicants meet mental health eligibility requirements, coordinates care with your treatment providers, and provides the AMHC team with updates regarding your participation in treatment.

***District Attorney:*** The assigned District Attorney represents the people of the First Judicial District and works to ensure that community safety is upheld.

***Public Defender:*** The assigned Public Defender ensures that applicants fully understand program requirements, advises potential participants on legal matters, and safeguards participants' rights.

***Probation Officer:*** Your Probation Officer provides community supervision by way of office meetings, home visits, work visits, etc. She also monitors your compliance with the Terms and Conditions of probation and the requirements of Adult Mental Health Court.

***Local Mental Health/Substance Abuse Treatment Providers:*** You will receive an individualized treatment plan to address your specific needs. Your primary care (case management and therapy) will be provided by a local mental health treatment provider. You may use other service providers as well, depending upon the types of services you require. You must sign all required releases of information regarding treatment.

***Jefferson County Sheriff's Deputy:*** The Jefferson County Sheriff's Deputy works to ensure that community safety is upheld.

## CONFIDENTIALITY

The First Judicial District Adult Mental Health Court is compliant with HIPAA, 42CFR (42), and all applicable state and federal laws. AMHC holds itself to the ethical standards for the mental health and legal profession, meaning that information gathered during screening, assessment, and throughout the progress of your treatment is completely confidential, and is only shared with the AMHC team contingent in the release(s) of information you have signed. In the courtroom, AMHC prides itself on creating a safe atmosphere for its participants, and you will never be asked to share anything in court that is too sensitive in nature.



## GENERAL REQUIREMENTS

As a member of the Adult Mental Health Court, you must abide by the following general requirements. Failure to do so may result in sanctions up to and including termination from AMHC.

1. Remain law-abiding.
2. Do not possess or use firearms without written authorization from the AMHC judge.
3. Submit to all required alcohol and/or substance testing.
4. Do not use alcohol or alcohol-based products without explicit authorization from the AMHC team.
5. Do not use any drugs, controlled substances, or illicit substances not prescribed to you by a licensed physician. Medical marijuana may be prohibited pursuant to C.R.S. Section 18-1.3-204.
6. Take all prescribed medications, as directed by your physician.
  - a. Sign a release of information allowing the AMHC team to exchange information with your physician.
  - b. Take all psychotropic medications as prescribed. Your prescribing physician must approve any prescription changes, such as reducing or discontinuing a medication.
  - c. If applicable, inform your prescribing physician that you are recovering from chemical dependency and that taking addictive or habit-forming medications could be detrimental to your recovery.
  - d. Obtain non-narcotic alternatives to prescribed medications, whenever deemed appropriate by your prescribing physician.
  - e. Notify our probation officer within two business days regarding any medication changes.
  - f. Notify all treatment providers of prescribed narcotic or habit-forming medications.
  - g. If prescribed a habit-forming medication, you will be required to sign a release of information to allow the team to speak to prescribing physician and may be subject to additional testing at your cost.
  - h. You will be asked to speak with prescribing physician about non-habit forming medications if participant has a history of substance abuse. You should always follow the orders of the prescribing physician, though it is essential to educate the prescribing physician about the participant's history and current needs.
7. Arrive **on time** for all scheduled court appearances.
8. Be respectful to the AMHC team and other AMHC participants at all times.
9. Comply with your individual treatment plan, as established by treatment provider(s).
10. Maintain contact with your probation officer as directed.
11. Comply with both the standard conditions of probation and your individual supervision plan, as established by probation officer.
12. Cooperate with all unscheduled home visits by probation officers or law enforcement officers.
13. Pay fees, fines, court costs, restitution, and treatment costs as ordered.
14. Do not function as a police informant without written authorization from the AMHC judge.
15. Attend all probation, treatment, and medical appointments as scheduled.
16. Inform your probation officer within two business days of any change in our address, telephone number, or email address.
17. Attend self-help or community support groups as directed.
18. Maintain your health care benefits.

## COURT REVIEWS

Your performance will be measured at every court review.

Every week before court, the entire team will meet to discuss your progress and compliance. The team will discuss your treatment attendance, probation attendance, drug test results, successes you have experienced, and challenges you have experienced.

When the judge calls you to the stand, the judge will talk with you about the reports he received from the rest of the team. Feel free to share information you learned in treatment, what is going well for you, areas in which you are struggling, and how the team could better support you.

The judge will respond to your behavior for the time between court reviews. You will need to follow his orders each time you are in court.



## INCENTIVES, SANCTIONS, and TREATMENT RESPONSES

Frequent Court appearances allow the AMHC team the opportunity to respond quickly to your behaviors and your treatment needs.

**Rewards, or incentives**, will be offered to reinforce recovery, motivation and pro-social behaviors. Rewards can be provided by any member of the team, in a variety of ways, when you demonstrate compliance and progress toward your goals. This may include bus passes, movie tickets, gift cards, event tickets, opportunities to enter monthly drawings for prizes, or less frequent monitoring and court appearances.

**Interventions, or sanctions**, also provide the Court ways to help you change your behavior in meaningful ways. Interventions are imposed every time a non-compliant behavior occurs. The sanctions imposed will increase in severity for serious violations as well as repeated violations. Sanctions can be imposed by any member of the team and will be used for the entire time you are involved with the AMHC program. Sanctions may result from non-compliance with Court orders, the AMHC contract, or any other terms and conditions of probation. Examples of these sanctions include job logs, work crew, community service, increased court appearances or monitoring, as well as jail.

**Due Process**, in AMHC you will be subject to jail sanctions for certain program violations. You have the right to a hearing if you do not admit to engaging in the specific behavior you are being sanctioned to jail for. You will right to be represented by counsel, the right to testify, and cross examine and call witnesses.

**Treatment responses** are interventions by the Court and your team to help you progress in treatment. The interventions are not sanctions or punishments but attempts to support your recovery process. Treatment responses may include sober support meetings, mental health appointments, medially assistance treatment appointments, treatment papers, and increased levels of treatment.

One of the most important principles of the AMHC is **“Show Up and Be Honest.”** You are expected to show up to all appointments, treatment services, UAs and Court. Failure to do so will result in a sanction from the team. Failure to show up to Court will result in an arrest warrant. You are also expected to have open communication with your Probation Officer, therapist, and the AMHC Judge about any drug use or violations, and to reach out to them when you are struggling. Dishonesty will result in a more severe sanction from the team.

## PHASES

### Orientation Phase (minimum of 4 weeks)

The main goal of the Orientation Phase is to help you get connected with services and to prove that you can show up for all appointments and scheduled services. During the Orientation Phase, you will be referred to mental health and substance use providers for assessment and begin the process of developing an individualized treatment plan(s) with community treatment provider(s) and a supervision plan with your probation officer.

#### Orientation Phase Requirements:

1. Attend Adult Mental Health Court every week, or as ordered by the AMHC judge.
2. Complete intakes with mental health and substance abuse treatment providers as directed.
3. Attend all probation appointments.
4. Take all scheduled sobriety tests.
5. Work with identified professionals to obtain medical/social assistance benefits if indicated.
6. Establish contact with housing provider(s), as directed.

#### Criteria for Advancement to Phase 1:

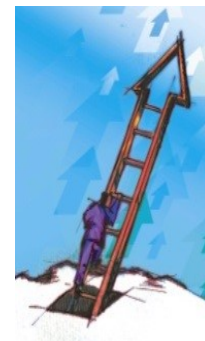
1. On date of advancement to Phase 1, you must have 2 consecutive weeks of appearing for all scheduled services. For example, attend all treatment and probation officer appointments.
2. On date of advancement to Phase 1, you must have 2 consecutive weeks with no missed or dilute drug or alcohol tests.

### PHASE 1 (minimum of 6 weeks)

The main goal of Phase 1 is to develop individualized treatment plan(s) with community treatment provider(s) and supervision plan with probation officer.

#### Phase 1 Requirements:

1. Attend Adult Mental Health Court every week, or as ordered by the AMHC judge.
2. Attend all probation appointments.
3. Attend all mental health and substance abuse treatment services as determined by your individual treatment & supervision plan.
4. Attend Illness Management and Recovery (IMR) or an equivalent group approved by the AMHC team.
5. Take all scheduled sobriety tests.
6. Continue to work with identified professionals to obtain medical/social assistance benefits, if indicated.
7. Work with housing provider(s) to obtain stable housing, as directed.
8. Establish payment schedule for outstanding fines, fees, costs, and restitution.



#### Criteria for Advancement to Phase 2:

1. On date of advancement to Phase 2, you must have 2 consecutive weeks of compliance with all AMHC program requirements, individualized treatment plan(s), and probation supervision plan.
2. On date of advancement to Phase 2, you must have 2 consecutive weeks with no missed, positive, dilute, or tampered drug or alcohol tests.

## **PHASE 2 (minimum of 10 weeks)**

The main goal of Phase 2 is to work with community treatment provider(s) and probation officer on issues identified in the individualized treatment plan(s) and probation supervision plan.

### **Phase 2 Requirements:**

1. Attend Adult Mental Health Court every other week, or as ordered by the AMHC judge.
2. Develop a written daily schedule and bring to each court review and probation appointment.
3. Attend all probation appointments.
4. Attend all mental health and substance abuse treatment services as determined by your individual treatment & supervision plan.
5. Attend Moral Reconciliation Therapy (MRT) or an equivalent group approved by the AMHC team.
6. Take all scheduled sobriety tests.
7. Continue to work with housing provider(s) to obtain/maintain stable housing, as directed.

### **Criteria for Advancement to Phase 3:**

1. On date of advancement to Phase 3, you must have 4 consecutive weeks of compliance with all AMHC program requirements, individualized treatment plan(s) and probation supervision plan.
2. On date of advancement to Phase 3, you must have 4 consecutive weeks with no missed, positive, dilute, or tampered drug or alcohol tests.

## **PHASE 3 (minimum of 12 weeks)**

The main goal of Phase 3 is to continue working with community treatment provider(s) and probation officer on issues identified in the individualized treatment plan(s) and probation supervision plan. Additional emphasis is placed on maintaining stable housing and establishing pro-social support, employment/training and education.

### **Phase 3 Requirements:**

1. Attend Adult Mental Health Court every three weeks, or as ordered by the AMHC judge.
2. Maintain written daily schedule and bring to each court review and probation appointment.
3. Attend all probation appointments.
4. Attend all mental health and substance abuse treatment services as determined by your individual treatment & supervision plan.
5. Take all scheduled sobriety tests.
6. Work with housing provider(s) to maintain stable housing, as directed.
7. Establish/maintain pro-social supports and activities.
8. Obtain employment, vocational rehabilitation or work on educational needs per the individual supervision plan.
9. Work with a Peer Specialist, if recommended by the AMHC team.

### **Criteria for Advancement to Phase 4:**

1. On date of advancement to Phase 4, you must have 6 consecutive weeks of compliance with all AMHC program requirements, individualized treatment plan(s), and probation supervision plan.





2. On date of advancement to Phase 4, you must have 6 consecutive weeks with no missed, positive, dilute, or tampered drug or alcohol tests.

### **PHASE 4 (minimum of 12 weeks)**

The main goal of Phase 4 is to continue working with community treatment provider(s) and probation officer on issues identified in the individualized treatment plan(s) and probation supervision plan. Other goals include maintaining stable housing, involvement with prosocial support, maintaining employment or educational services.

#### *Phase 4 requirements:*

1. Attend Adult Mental Health Court every four weeks, or as ordered by the AMHC judge.
2. Maintain written daily schedule and bring to each court review and probation appointment.
3. Attend all probation appointments.
4. Take all scheduled sobriety tests.
5. Attend all mental health and substance abuse treatment services as determined by your individual treatment & supervision plan.
6. Continue to work with housing provider(s) to maintain stable housing, as directed.
7. Continue to engage with pro-social supports and activities.
8. Continue to work with Peer Specialist, if recommended by the AMHC team.
9. Maintain employment, vocational rehabilitation or work on educational needs per the individual supervision plan
10. Pay all outstanding fines, fees, costs, and restitution or be in compliance with payment plan.

#### *Criteria for Advancement to Phase 5:*

1. On date of advancement to Phase 5, you must have 8 consecutive weeks of compliance with all AMHC program requirements, individualized treatment plan(s), and probation supervision plan.
2. On date of advancement to Phase 5, you must have 8 consecutive weeks with no missed, positive, dilute, or tampered drug or alcohol tests.

### **PHASE 5 (minimum of 12 weeks)**

The main goal of Phase 5 is to work toward long-term management of issues identified in the individualized treatment plan(s) and the probation supervision plan. Other goals include maintaining stable housing, involvement with prosocial support and activities, employment, volunteer, and/or educational services. By graduation day, you must demonstrate the capacity to maintain stability in the community.



#### *Phase 5 requirements:*

1. Attend Adult Mental Health Court every six weeks, or as ordered by the AMHC judge.
2. Maintain written daily schedule and bring to each court review and probation appointment.
3. Attend all probation appointments.
4. Attend all mental health and substance abuse treatment services as determined by your individual treatment & supervision plan.
5. Take all scheduled sobriety tests.
6. Continue to work with housing provider(s) to maintain stable housing, as directed.
7. Continue to engage with pro-social supports and activities.

8. Continue to work with Peer Specialist, if recommended by the AMHC team.
9. Maintain employment, vocational rehabilitation or work on educational needs per the individual supervision plan
10. Pay all outstanding fines, fees, costs, and restitution or be in compliance with payment plan.
11. Complete and present a post-graduation plan to the AMHC team, outlining how you will maintain stability following successful completion of AMHC.

Criteria for Graduation:



1. On date of graduation, you must have 8 consecutive weeks of compliance with all AMHC program requirements, individualized treatment plan(s), and probation supervision plan.
2. On date of graduation, must have 8 consecutive weeks with no missed, positive, dilute, or tampered drug or alcohol tests.

*Most importantly, your friends and family will be invited to join you in a Graduation Ceremony to celebrate your success.*

Once you graduate from Adult Mental Health Court, you are no longer required to appear in AMHC. However, you will continue to be subject to all terms and conditions set by the sentencing judge until you are successfully discharged from probation.

AMHC strongly encourages you to remain involved in support groups and other activities that will assist you in your ongoing wellness & recovery efforts after you graduate. You are also encouraged to maintain your connection with AMHC by serving as a mentor, attending alumni activities, and attending graduation ceremonies. Possible mentor activities include speaking to groups, meeting with other AMHC participants who are struggling, and helping participants connect with a community support group. If you are interested in becoming a mentor after you graduate, please speak with your probation officer.

## TERMINATION

You will be terminated from the program for the following:

1. If you revoke the Release of Information that allows the AMHC team to share information about your case or treatment progress.
2. If you present a threat to public safety, any AMHC personnel, participants, or victims.
3. If you move away from the area in which necessary providers can provide treatment and do not have adequate transportation to get to court, probation appointments, drug and alcohol testing, or treatment. While this is grounds for program termination, it may not necessarily result in a probation revocation.

You may be terminated for the following:

1. Failure to remain law-abiding.
2. Failure to follow treatment plan(s).
3. Failure to take medications as prescribed.
4. Failure to comply with monitored sobriety.

5. Tampering to alter results of drug tests.
6. Failure to attend scheduled court review hearings.
7. Failure to comply with probation supervision plan.
8. Failure to comply with AMHC General and Phase Requirements.
9. A post-entry determination that you were not appropriate for the AMHC program due to your level of need or ability to comply with basic program requirements.

Before termination from AMHC may occur, the Probation Department will file a motion to revoke probation. An attorney for the participant may provide representation in any revocation proceedings. Your case will be returned to your original Judge for re-sentencing.

### **TRAVEL REQUESTS**

If you are requesting to travel out of state at any time, you must have all details approved by your Probation Officer and the Recovery Court team **in advance** of your travel. Travel is a privilege that must be earned through demonstrated sobriety and compliance with your Recovery Court requirements. Be sure to discuss any potential travel requests with your Probation Officer with as much advance notice as possible, as you will be required to find approved locations to submit to urine screens and provide other documentation of your travel plans. Non-compliance with any Recovery Court requirements may result in a loss of previously approved travel privileges.

### **PRESCRIPTION DRUG POLICY:**



- ✓ Your Recovery Court team will rely on expert medical input to determine if a prescription or medication is medically needed for you.
- ✓ It is preferred you are monitored by a doctor with training in addiction psychiatry or addiction medication.
- ✓ You may be required to limit your prescribing doctors and may require release of information between doctors.
- ✓ You must inform your probation officer at entry into the program if you are on any medication.
- ✓ You will be required to complete a medication form that you provide to your doctor with a release of information. You will be required to return this to your probation officer within 2 weeks of program entry.
- ✓ Your probation officer will follow up with your doctor to verify the information that is provided.
- ✓ You must inform your probation officer within 24 hours of any changes, new prescriptions, or medications.
- ✓ In an emergency situation, you must report any medications or prescriptions to your probation officer within 24 hours of discharge.
- ✓ If you are planning a medical procedure, you must complete the medication policy form in advance of the procedure and provide to your probation officer.
- ✓ You may be required to submit additional drug tests and pay for them.

*If you are not in compliance with the medication policy at any time during your program, you are subject to court response, including a sanction and/or termination.*

The medication policy includes medical, mental health medication, and/or medically assisted treatment.



**IMPORTANT NUMBERS and PEOPLE**

**JUDGE:** Magistrate Fitzgerald

**COURT COORDINATOR:** Tara Rienow 720-772-2685

**JEFFERSON COUNTY PUBLIC DEFENDERS OFFICE:** 303-279-7841

**PROBATION OFFICERS:** Belinda Beal 720-772-2346

MacKenzie McMillian 720-772-2024

**Jefferson Center for Mental Health : Danielle Lopez (office) 303-432-5577 (cell) 720-731-4356**

Main Jefferson Center number: 303-425-0300

**RANDOM URINE SCREEN NUMBER:** 303-552-0646 or  
303-552-0624 or  
www.mycallin.com

**SUPPORT SYSTEM:** \_\_\_\_\_

Adult Mental Health Court  
1<sup>st</sup> Judicial District  
100 Jefferson County Parkway  
Golden, CO 80401  
Division S  
Courtroom 1C

**Addendum 1: Sanction Matrix**

<b>PHASE</b>	<b>Proximal</b>	<b>Responses</b>	<b>Distal</b>	<b>Responses</b>
<b>Orientation</b>	<ul style="list-style-type: none"> <li>Missed services</li> <li>Diluted drug test</li> <li>Tampered drug test</li> <li>Not completing court sanction</li> <li>Late to court</li> </ul>	<ul style="list-style-type: none"> <li>Calendar appointments</li> <li>Phone check-ins</li> <li>In-person check-ins</li> <li>Dilute UA worksheet</li> <li>EHM</li> <li>Community service hours</li> <li>Jail</li> <li>Home visits</li> </ul>	<ul style="list-style-type: none"> <li>Drug use</li> <li>No job</li> <li>No stable housing</li> <li>Not compliant with medications</li> <li>Associating with high risk: People, Places, Things</li> </ul>	<ul style="list-style-type: none"> <li>Essays</li> <li>Apology</li> <li>Verbal from Judge</li> <li>Housing plan</li> <li>Research medications</li> <li>Journaling</li> <li>Support Meetings</li> </ul>
<b>1</b>	<ul style="list-style-type: none"> <li>Missed services</li> <li>Diluted drug test</li> <li>Tampered drug test</li> <li>Not completing court sanction</li> <li>Late to court</li> <li>Not having stable housing</li> </ul>	<ul style="list-style-type: none"> <li>Phone check-ins</li> <li>In-person check-ins</li> <li>Dilute UA worksheet</li> <li>EHM</li> <li>Home Visits</li> <li>Community service hours</li> <li>Work Crew</li> <li>Jail</li> <li>Court ordered housing</li> <li>Sit through docket</li> </ul>	<ul style="list-style-type: none"> <li>Drug use</li> <li>No job</li> <li>Not compliant with medications</li> <li>Not attending support meetings</li> <li>Associating with high risk: People, Places, Things</li> </ul>	<ul style="list-style-type: none"> <li>Essays</li> <li>Apology</li> <li>Verbal from Judge</li> <li>Housing plan</li> <li>Attend medication appointments</li> <li>People, places, feelings</li> <li>Autobiography</li> <li>Support meetings</li> </ul>
<b>2</b>	<ul style="list-style-type: none"> <li>Drug use</li> <li>Not having stable housing</li> <li>Non-compliance with medications</li> <li>Associating with high risk: People, Places, Things</li> </ul>	<ul style="list-style-type: none"> <li>Work release</li> <li>Home Visits</li> <li>EHM</li> <li>Work Crew</li> <li>Jail</li> <li>Medication checks with treatment or probation</li> <li>Observe another court</li> </ul>	<ul style="list-style-type: none"> <li>No job</li> <li>Not compliant with payment plan</li> <li>Not attending support meetings</li> <li>Housing not sober and supportive</li> </ul>	<ul style="list-style-type: none"> <li>Job search &amp; log</li> <li>Budget</li> <li>Support meetings</li> <li>Court ordered housing</li> <li>Self-imposed sanction</li> <li>Review participant handbook</li> </ul>
<b>3</b>	<ul style="list-style-type: none"> <li>Drug use</li> <li>Housing not sober &amp; supportive</li> <li>No job</li> <li>Not compliant with payment plan</li> <li>Not attending support meetings</li> </ul>	<ul style="list-style-type: none"> <li>Jail</li> <li>Revocation</li> <li>Work release</li> <li>Increased court reviews</li> <li>Increased urine screens</li> <li>Increased supervision</li> </ul>	<ul style="list-style-type: none"> <li>Not implementing relapse plan/tools</li> <li>Not implementing aftercare plan</li> </ul>	<ul style="list-style-type: none"> <li>Interviews</li> <li>Self-imposed sanction</li> <li>Sit through morning docket</li> <li>Team round table with client</li> </ul>
<b>4</b>	<ul style="list-style-type: none"> <li>New crime</li> <li>Drug use</li> <li>Not compliant with payment plan</li> <li>Not attending support meetings</li> <li>RJ hours not done</li> </ul>	<ul style="list-style-type: none"> <li>Jail</li> <li>Revocation</li> <li>Work release</li> <li>Increased court reviews</li> <li>Increased urine screens</li> <li>Termination</li> </ul>	<ul style="list-style-type: none"> <li>Work release</li> <li>Increased court reviews</li> <li>Team round table with client</li> </ul>	

## Addendum 2: Incentives

### Strong Performers

- If compliant, participants in all programs will be recognized as “strong performers.”
  - “Strong performer” recognition is incentivizing compliance, not recovery capital.
  - You can be a strong performer in orientation phase without a negative drug test.
  - Incentives for strong performers:
    - Name on the board
    - Called first and able to leave
    - Applause
    - Fishbowl

### Spin the Wheel

- If a participant increases their recovery capital, they can spin the wheel.
  - This is based on recovery capital behaviors and participants can spin the wheel for each behavior that is verified.
    - Examples: found a job, going to dentist, going to doctor, getting visitation with your kids, completing a case plan goal, getting your license back, getting into sober living, etc.
  - Incentives for wheel spin:

### Phase Movement

- Follow phase requirements per program.
- Incentives for phase movement:
  - Certificate
  - Judge recognition
  - Gift card

### Graduation

- Follow phase requirements per program.
- Graduation incentives can be modified for each court to maintain court traditions.
- Incentives for graduation:
  - Framed certificate
  - Cake/food
  - Gift card/gift

### Miscellaneous

- Hygiene chest will be stocked in courtroom for all participants to use as needed.
- Food or gift cards will be available for participants in need of food.
- Funding requests for specific items can be submitted to coordinator for additional items.
- A participant/team member can request a specific incentive replace other incentives which allows for a more individualized approach (e.g. fishing license).

**Addendum 3: Probation Terms and Conditions**

**STANDARD CONDITIONS OF SUPERVISION**

I will abide by the following conditions in addition to the conditions ordered on the previous page:

**Crime-Free Lifestyle:**

- \_\_\_\_\_ 1. I will not commit any offense and will report any contact with law enforcement to the probation officer.
- \_\_\_\_\_ 2. I will not harass, molest, intimidate, retaliate against, or tamper with any victims of or any prosecution witnesses to the crime(s).
- \_\_\_\_\_ 3. I will not act as a confidential informant.
- \_\_\_\_\_ 4. I will not possess or have access to any firearm, explosive or destructive device, or any other dangerous instrument or dangerous or illegal weapon.
- \_\_\_\_\_ 5. I will submit to a search of my person, property, residence, vehicle, or personal effects, including but not limited to any electronic devices, by the probation officer when there are reasonable grounds to search. My personal property is subject to seizure if it violates any of the terms and conditions of my supervision, and I specifically consent to the use of any seized property as evidence in a modification or revocation proceeding.
- \_\_\_\_\_ 6. I will not use alcohol (to excess)\*, use or possess any controlled substances without a prescription or in a manner that is inconsistent with a prescription, or use any illegal, dangerous, or abusable drugs or substances. I understand that the use of medical marijuana is permissible unless such use is prohibited by court order or my conviction is for a violation of Article 43.3 of Title 12, C.R.S. (offense prior to 10/1/18) or Article 11 of Title 44 (offense on or after 10/1/18). \*strike out as appropriate/determined by assessment
- \_\_\_\_\_ 7. I will submit to drug and alcohol testing as directed by the probation officer. I understand I am responsible for the costs of testing, unless other arrangements have been made through the probation officer.

**Treatment:**

- \_\_\_\_\_ 8. I will actively participate in, cooperate with, and successfully complete any referral, evaluation, assessment or recommended program. These programs may include but are not limited to: placement in a residential or outpatient program, counseling or treatment for drugs or alcohol, mental health, domestic violence, cognitive behavioral, offense specific or anger management. I will sign any necessary releases of information, and I understand I am responsible for the costs of treatment and services, unless other arrangements have been made through the probation officer.

**Supervision:**

- \_\_\_\_\_ 9. I will report to the probation officer for appointments, as directed by the Court or the probation officer. I understand that the probation officer can visit me at reasonable times at home or elsewhere. I will provide the probation department with safe access to my residence.
- \_\_\_\_\_ 10. I will notify the probation officer of changes in my address, phone number, employment, or education status.
- \_\_\_\_\_ 11. I will maintain suitable employment and/or pursue employment, education, or vocational training.
- \_\_\_\_\_ 12. I will comply with any other requirements of the probation officer, including answering all reasonable questions asked by the probation officer, in order to meet the conditions imposed by the Court. Also, I will sign each release of information that is necessary for the probation department to communicate with others regarding my supervision.
- \_\_\_\_\_ 13. I will not leave the State of Colorado without written permission from the probation officer or the Court.
- \_\_\_\_\_ 14. As required by §18-1.3-204(1.5), C.R.S., if I am convicted of a felony, or a qualifying misdemeanor offense pursuant to the Interstate Compact for Adult Offender Supervision, I will sign a Waiver of Extradition agreeing to waive all formal proceedings and return to Colorado in the event I am arrested in another state.
- \_\_\_\_\_ 15. If I was convicted of any felony or if I was convicted of, or received a deferred judgment/sentence for, any misdemeanor or felony offense involving unlawful sexual behavior as defined by §16-22-102(9), C.R.S., or any misdemeanor or felony offense for which the underlying factual basis involves unlawful sexual behavior I will submit to and pay for a test of my biological substance to determine genetic markers (DNA) in accordance with §16-11-102.4, C.R.S., unless this process was completed at arrest or issuance of a summons.
- \_\_\_\_\_ 16. If required for my offense, I will comply with all registration requirements of the Colorado Sex Offender Registration Act (C.R.S. Title 16, Article 22, Part 1) and will sign the registry notice that sets forth the registration requirements.

## **Addendum 4: Prescription Policy Doctor's Note**

### DOCTOR'S NOTICE

Name of Patient: \_\_\_\_\_

DOB: \_\_\_\_\_

Dear Medical Provider:

The patient is a participant in one of the treatment courts in the First Judicial District. These treatment-based court programs are alternatives to incarceration for justice involved individuals with behavioral health and substance dependency diagnoses and promote long-term recovery by addressing related behavioral concerns and substance use disorder symptoms.

The patient is required as part of the program to disclose any prescription medication and provide verification from the prescriber.

The program relies on expert medical input to determine whether a prescription for an addictive or intoxicating medication is medically required or if a nonaddictive, nonintoxicating, and medically safe alternatives treatment are available.

The participant may be carefully monitored by a physician, preferably, with training in addiction psychiatry or addiction medication. The participant will also be required to complete the medication policy form with a release of information to their prescriber.

The program will contact the prescriber to verify the information documented in this form. As well as any changes made thereafter.

Medical Provider's Name: \_\_\_\_\_

Medical Provider's Agency: \_\_\_\_\_

Medical Provider's Contact information: \_\_\_\_\_

Medical Reason for Prescription: \_\_\_\_\_

Prescription Information:

Name: \_\_\_\_\_

Duration: \_\_\_\_\_

If no alternative to nonaddictive, nonintoxicating medication please explain:

\_\_\_\_\_

Date: \_\_\_\_\_

Probation Officer Name and Contact Information: \_\_\_\_\_



PARTICIPANT PRESCRIPTION POLICY CHECKLIST

**You must complete and initial this checklist and provide to your supervising probation officer.**

**You must also provide a signed release of information with your prescribing doctor AND the doctor's notice on the other side of this.**

\_\_\_\_\_ You must inform your probation officer at entry into the program if you are on any medication.

\_\_\_\_\_ You will be required to complete a medication form that you provide to your doctor with a release of information. You will be required to return this to your probation officer within 2 weeks of program entry.

\_\_\_\_\_ It is preferred you are monitored by a doctor with training in addiction psychiatry or addiction medication.

\_\_\_\_\_ Require release of information between all prescribing doctors and your team/probation officer.

\_\_\_\_\_ Your probation officer will follow up with your doctor to verify the information that is provided.

\_\_\_\_\_ You must inform your probation officer within 24 hours of any changes, new prescriptions, or medications.

\_\_\_\_\_ In an emergency situation, you must report any medications or prescriptions to your probation officer within 24 hours of discharge.

\_\_\_\_\_ If you are planning a medical procedure, you must complete the medication policy form in advance of the procedure and provide to your probation officer.

\_\_\_\_\_ The medication policy includes medical, mental health medication, and/or medically assisted treatment.

\_\_\_\_\_ You may be required to submit additional drug tests and pay for them.

\_\_\_\_\_ *If you are not in compliance with the medication policy at any time during your program, you are subject to court response, including a sanction and/or termination.*

\_\_\_\_\_  
Participant Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Probation Officer

\_\_\_\_\_  
Date

**Addendum 5: Acknowledgment**

\_\_\_\_\_ I have read the above 1<sup>st</sup> Judicial District Adult Mental Court participant handbook and understand what I have read.

\_\_\_\_\_ I have read all addendums and understand what I have read. I agree to comply with the participant expectations.

\_\_\_\_\_ I agree to enter the 1<sup>st</sup> Judicial District Adult Mental Health Court program.

\_\_\_\_\_  
Participant                                  Date

\_\_\_\_\_  
Probation Officer /Coordinator                                  Date