



State of Colorado

First Judicial District
Jefferson & Gilpin Counties

ADULT MENTAL HEALTH COURT Participant Handbook



MISSION STATEMENT

The First Judicial District Adult Mental Health Court (AMHC) promotes 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.

We recognize every participant as an individual who must 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.



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.

PROGRAM DESCRIPTION

Adult Mental Health Court is a voluntary program that takes a minimum of 13 months to complete. The actual length of the program will vary depending upon your progress. As a participant in 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
- You will be required to submit urine tests- no other testing method is allowed.
- You will be required to attend and engage in the recommended treatment.

In order for you to be successful in AMHC, it will take time and commitment on your part. However, you are not alone. 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. 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.



COURT HEARINGS

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 important to show up to your court appearance on Tuesday 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 the 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 it away during court, unless you are using it to calendar a court date or appointment**

AMHC TEAM MEMBERS

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

Adult Mental Health Court Judge: The AMHC Judge serves as the lead member of the AMHC team and presides at all team staffing and court hearings. Before your court hearing, the Judge will be given an update on your progress by members of the AMHC team. During this review, the team will discuss your drug testing results, engagement 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.

Adult Mental Health Court Coordinator maintains electronic files on all participants. The Coordinator can provide explanations of the program, make referrals for services such as educational or employment programs, and attends a weekly team staffing.



Probation Officer: Your **Probation Officer** will monitor your progress throughout the phases of the program. Weekly reports will be provided to other team members regarding your compliance with treatment, drug testing, and other requirements in order for the team to provide recommendations to the AMHC Judge. Your relationship with your probation officer is *very important* – you must comply with the terms and conditions of probation as part of this program. Your probation officer coordinates services and provides case management, case planning, and referral information.

Your probation officer has a comprehensive knowledge base of local and statewide treatment, monitoring, and supervision resources for all aspects of your life and your probation officer is here to help you navigate your way through this program. Let your probation officer know if you need a resource. If you have a question, miss a treatment session, drug test, or other appointment, or change your schedule, you should immediately notify your probation officer.

Adult Mental Health Court Specialist: 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.

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.

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.

The Sheriff Deputy: Assists the court in ensuring compliance with the program and community safety.

COURT REVIEWS

Your progress will be measured at every court review. Every week before court, your 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.

Incentives used by the court may include:

- Verbal acknowledgement
- Written acknowledgement
- Peer recognition
- Gift cards
- Court paying for transportation passes, drug testing, or treatment
- Phase promotion
- Reduction in court costs or treatment fees
- Reduced supervision (court hearings, PO meetings, etc.)

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.

Proximal and Distal Goals

Proximal goals are behaviors you are already capable of achieving.

Some examples of proximal goals are telling the truth, attending treatment, making your UAs.

Distal goals are behaviors that are ultimately desired but will take some time for you to accomplish.

Some examples of distal goals are gainful employment, effective parenting, sobriety.

The sanctions you are assigned vary per your proximal and distal goals. Distal goals eventually become proximal goals as you make progress in the program. You will receive a harsher sanction for violating a proximal goal than a distal one.

Sanctions used by the court may include:

- Increased court appearances
- Written Paper or calendaring assignment
- Increased or daily reporting (to your PO)
- Increased drug testing
- Work Crew or Community Service
- Electronic monitoring (e.g. SCRAM, EHM)
- Jail time
- Probation Revocation/Termination from the Program

One of the most important principles of the AMHC is “**Show up, try hard, 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.

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.



PHASES

Phase 1 (minimum of 4 weeks)

The purpose of Phase 1 is to help you get connected with services and to get you in the habit of showing up for all appointments and scheduled services. During Phase 1, 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.

Phase 1 Requirements:

1. Attend Adult Mental Health Court every week and complete court responses.
2. Complete intakes with mental health and substance abuse treatment providers as directed.
3. Comply with prescriber appointments and recommendations
4. Attend all probation appointments.
5. Submit all scheduled drug tests.
6. Work with identified professionals to obtain medical/social assistance benefits if indicated.
7. Provide proof of insurance to probation.
8. Provide valid housing situation with address to probation.

Criteria for Advancement to Phase 2:

1. On date of advancement to Phase 2, you must have 2 consecutive weeks of being a Strong Performer
2. You must have completed your Phase 1 checklist, and have it signed off.



PHASE 2 (minimum of 12 weeks)

The purpose of Phase 2 is to create individualized treatment goals with your treatment provider(s) and case plan goals with probation officer. As well as connect you with any resources to increase your stability and meet your needs.

Phase 2 Requirements:

1. Attend Adult Mental Health Court every other week and complete court responses.
2. Attend all probation appointments and meet goals of your case plan.
3. Attend all mental health and substance abuse treatment services as determined by your individual treatment plan and meet treatment goals.
4. Comply with prescriber appointments and recommendations.
5. Submit all scheduled drug tests.
6. Work with identified professionals to obtain medical/social assistance benefits, if indicated.
7. Obtain stable housing with verification.
8. Set up payment plan with probation.

Criteria for Advancement to Phase 3:

1. On date of advancement to Phase 3, you must have 2 weeks in a row of being a Strong Performer.
2. On date of advancement to Phase 3, you must have 30 days of 100% negative drug tests.
3. You must have completed your Phase 2 checklist, and have it signed off.

PHASE 3 (minimum of 14 weeks)

The purpose of Phase 3 is to work with on your treatment and case plan goals by practicing new skills. You will also increase your positive support system in this phase.

Phase 3 Requirements:

1. Attend Adult Mental Health Court once every three weeks and complete court responses.
2. Attend all probation appointments and meet goals of your case plan.
3. Attend all mental health and substance abuse treatment services as determined by your individual treatment plan and meet treatment goals.
4. Comply with prescriber appointments and recommendations
5. Submit all scheduled drug tests.
6. Obtain recovery-oriented housing verified by team.
7. Identify pro-social supports and activities.

Criteria for Advancement to Phase 4:

1. On date of advancement to Phase 4, you must have 3 weeks in a row of being a Strong Performer.
2. On date of advancement to Phase 4, you must have 45 days with 100% negative drug tests.
3. You must have completed your Phase 3 checklist, and have it signed off.

PHASE 4 (minimum of 14 weeks)

The purpose of Phase 4 is to continue working on your treatment goals for long term recovery. Additional emphasis is placed on maintaining stable housing and establishing pro-social support, employment/training and education.

Phase 4 Requirements:

1. Attend Adult Mental Health Court once every four weeks and complete court responses.
2. Attend all probation appointments and meet goals of your case plan.
3. Attend all mental health and substance abuse treatment services as determined by your individual treatment plan and meet treatment goals.
4. Comply with prescriber appointments and recommendations
5. Complete a criminal thinking intervention.
6. Complete maintenance plan with treatment.
7. Submit all scheduled drug tests.
8. Maintain recovery-oriented housing verified by the team.
9. Engage in 3 pro-social activities
10. Review income source with the team.
11. Make 3 months in a row of court payments.

Criteria for Advancement to Phase 5:



1. On date of advancement to Phase 5, you must have 3 weeks of being a Strong Performer
2. On date of advancement to Phase 5, you must have 60 days of 100% negative drug tests.
3. You must have completed your Phase 4 checklist, and have it signed off.

PHASE 5 (minimum of 12 weeks)

The purpose of Phase 5 is to implement your long-term recovery plan. To practice what you will use to remain in recovery with less support from your AMHC. To ensure you have addressed all your needs to be successful moving forward.

Phase 5 requirements:

1. Attend Adult Mental Health Court once a month and complete court responses.
2. Maintain written daily schedule and bring to each court review and probation appointment.
3. Attend all probation appointments and met goals of case plan.
4. Implement maintenance plan with therapist and team.
5. Comply with prescriber appointments and recommendations.
6. Submit all scheduled drug tests.
7. Maintain recovery-oriented housing verified by team.
8. Engage in 3 pro-social activities
9. Obtain stable source of verifiable income.
10. Make 3 months in a row of court payments.

Criteria for Graduation: On the date of your graduation, you must have completed the following:

1. Four weeks in a row of Strong Performer.
2. At least 90 days with 100% negative drug tests to complete the program.
3. Complete your Phase 5 checklist and have it signed off.

****Graduation from the Adult Mental Health Court is an important event****

Invite your friends and family to join you in a Graduation Ceremony to help celebrate your success. The AMHC team looks forward to congratulating you for successfully completing the program and achieving your goals!

Once you complete 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 may provide representation in any revocation proceedings. Your case will be returned to your original Judge for re-sentencing.

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.



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 AMHC team **in advance** of your travel. Travel is a privilege that must be earned through demonstrated sobriety and compliance with your AMHC 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 AMHC requirements may result in a loss of previously approved travel privileges.

DRUG TESTING

- You will be required to submit urine screens for your AMHC drug testing.
- This is the only form of testing AMHC approves.
- You will be required to submit your drug testing at the agency that AMHC is contracted with.
- You are required to submit your drug testing during the hours allowed.
- You are required to call the drug testing line daily to know if you will have to submit a drug test that day.
- You can request a confirmation test on results of a drug tests. You may be required to pay the cost of the confirmation.
- You may be required to submit additional drug testing at the request of your team and must comply.



PRESCRIPTION DRUG POLICY:

- ✓ Your AMHC 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, 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 Loewer

COURT COORDINATORS:

Russell Marsitto russell.marsitto@judicial.state.co.us 720-772-2689

Brigitte Smith brigitte.smith@judicial.state.co.us 720-772-2685

JEFFERSON COUNTY PUBLIC DEFENDERS OFFICE: 303-279-7841

PROBATION OFFICERS:

Amica Caraballo amica.caraballo@judicial.state.co.us 720-772-2310

Mackenzie Bagwell mackenzie.bagwell@judicial.state.co.us 720-772-2377

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

303-552-0624

www.mycallin.com

SUPPORT SYSTEM

Adult Mental Health Court
1st Judicial District
100 Jefferson County Parkway
Golden, CO 80401
Division S
Courtroom 100

Addendum 1: Sanction Matrix

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

Addendum 2: Incentives

Strong Performer

- If you have attended every single one of your services from one court review to the next court review.
- You can be a STRONG PERFORMER!!
 - You can be a Strong Performer in Phase 1 without a negative drug test.
 - After Phase 1 you will need all negative drug tests to be a Strong Performer.
- If you are a Strong Performer:
 - You will get your name on the board.
 - You will get called up at the start of docket and get to leave when you are done
 - You will get applause from everyone
 - You will get to draw a chip from the prize bowl!
- You need to get Strong Performer status to move through the program phases.

Spin the Wheel

- IF you increase your recovery capital between court reviews-you can SPIN THE WHEEL!
 - 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.
 - There are various incentives on the wheel you could win!

Phase Movement

- When you move through the phases you will be incentivized for this!
 - You will get a signed certificate from the Judge
 - You will be called up at the start of the docket and be recognized by everyone!
 - If funding allows you will also get a gift card

Commencement

- Incentives for completing the program!
 - A framed signed certificate from the Judge!
 - We will provide a cake or donuts for you and your family/friends.
 - If funding allows you will get a gift card and potentially another gift from the team.

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: Participant Expectations

I understand that by entering the 1st Judicial District Adult Mental Health Court (AMHC), I am bound by the conditions and expectations of the AMHC team terms in addition to the standard Terms and Conditions of Probation. (see addendum)

I understand that if I enter this program and fail to complete it successfully that I may not be eligible to participate in the future.

I understand that my sentence to AMHC involves a time commitment of twenty-four months or until successful completion of the program.

I understand that my treatment and case plans will be evaluated throughout my participation in AMHC and may be modified in response to my individual circumstances.

I understand that my treatment plan and phase requirements of AMHC include sober support meetings or activities. I agree to provide proof of attendance to my therapist or probation officer.

I understand that there are many substances, including food (such as poppy seeds), beverages, over the counter medications, and herbal supplements that may contain ingredients that could result in a positive urine sample. I agree to take responsibility for what I put in my body and I further understand that consumption of these substances will not serve as a justification or excuse to a positive urine sample.

I hereby agree that possession or use of Spice, Kratom, MDMA, Ecstasy, LSD, or any other product that is deemed to be a hallucinogenic herb, or designer drug while in AMHC is strictly prohibited. This may result in court responses; including sanction and/or unsuccessful termination from the program.

I understand that substituting or altering my specimen or trying in any way to modify my body fluids for the purpose of changing the drug testing results will be considered a tamper. This may result in court responses; including sanction and/or unsuccessful termination from the program.

I understand that ingesting excessive amounts of fluids can result in a diluted urine sample which will be considered a tamper.

I will inform all treating medical professionals that I am a person in recovery from addiction and may not take narcotic or addictive medications or drugs. If a treating physician wishes to treat me with narcotic or addictive medications or drugs, I must disclose this to my probation officer immediately and complete the doctor's notice to be in compliance.

I understand that I will receive court responses for violations in the program. These could be sanctions that include; jail time, increased drug testing, community service, Electronic Monitoring (EHM, SCRAM, Sleep Time Monitor), a curfew and other responses deemed appropriate by the AMHC team. (see Sanction Matrix)

Based on the goals of sentencing and probation outlined in §18-1.3-204, C.R.S., the court has determined that the possession and/or use of medical marijuana is prohibited while I am participating in a problem-solving court (AMHC).

I agree to sign any and all releases of information.

I understand that I may be responsible for all or partial costs of the program at the discretion of my Probation Officer.

Addendum 6: Acknowledgment

_____ I have read the above 1st 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 1st Judicial District Adult Mental Health Court program.

Participant Date

Probation Officer /Coordinator Date