

MILWAUKEE COUNTY



DRUG TREATMENT COURT POLICY AND PROCEDURE MANUAL (REVISED August 5, 2010)

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I. INTRODUCTION

A. Mission Statement

The mission of the Milwaukee County Drug Treatment Court is to enhance public safety through the reduction of recidivism by coordinating effective and accountable substance abuse treatment and supportive services for offenders with substance abuse problems.

B. Goals

The Milwaukee County Drug Treatment Court has the following primary goals:

2. Reduce recidivism among drug using defendants;
3. Provide an effective and accountable community-based alternative to incarceration;
4. Improve public safety;
5. Effectively manage limited criminal justice system resources.

The following ancillary goals and benefits are also achieved in pursuit of the primary goals:

1. Reduce criminal justice costs through reduced reliance on incarceration for non-violent offenders;
2. Promote community awareness of Milwaukee County's drug problem and community participation in solving it.

C. Methods for Achieving Goals

Goal #1-Reduce recidivism among drug using defendants

- Mandate intensive substance abuse treatment with comprehensive ancillary support services, close judicial supervision and monitoring of all participants, with appropriate sanctions and incentives based on performance;
- Require enrollment in job training, enrollment in an education program or institution, or employment for graduation.

Goal #2- Provide an effective and accountable community-based alternative to incarceration

- Mandate regular court appearances;
- Mandate a minimum of twice weekly supervision contacts;
- Mandate regular, random substance testing;
- Impose immediate sanctions for non-compliance, including minor violations;
- Terminate and immediately convict and sentence participants who commit serious violations or repeatedly commit minor violations.

Goal #3- Improve public safety

- Follow recognized methods and procedures, which have been empirically shown to reduce recidivism.

Goal #4- Effectively manage limited criminal justice system resources

- Quickly screen defendants for eligibility and start participation soon after charging;
- Utilize sanctions and rewards to avoid long-term incarceration costs.

Ancillary Goal #1- Reduce criminal justice costs through reduced reliance on incarceration for non-violent offenders

- Quickly screen defendants for eligibility and start participation soon after charging;
- Utilize sanctions and rewards to avoid long-term incarceration costs;
- Target offenders who face a prison term or lengthy (9 mos.) local jail sentence.

Ancillary Goal #2- Promote community awareness of Milwaukee County's drug problem and encourage community participation in solving it.

- Create a Drug Court Speaker's Group to inform and enlist community support and engagement;
- Create a Drug Court Steering Committee with broad and diverse community representation.

II. DRUG COURT TEAM PHILOSOPHY

A. Statement of Core Values

Our team is successful and effective in that we have:

1. Mutual respect and respect for each other's roles, ethical concerns, boundaries, ideas and perspectives;
2. Shared expectations for programs and understanding for each other's roles;
3. A high level of commitment from all team members.

The work of our team contributes to community needs.

The drug court helps improve family stability and identifies and addresses a range of underlying needs. The team contributes a framework for addressing these needs and providing access to necessary services.

Community values reflected in our team's decisions.

The drug court team operates with values congruent to our community, such as accountability, promoting individual dignity, using treatment rather than incarceration whenever appropriate and decreasing criminal justice system costs.

B. New Team Member Orientation

We will orient new team members by providing our policy and procedures manual and encouraging new team members to participate in the process alongside the outgoing team member if possible. As previously stated, each team member will be encouraged to respect the roles, ethical concerns, boundaries, ideas and perspectives of other team members, including a new team member.

We have formalized and codified a consensus process that encourages new members to propose additions/modifications to the program after they have been with the team for a period of time. New team members are encouraged to ask questions, obtain information and provide input as a professional member of the drug court team.

III. DRUG COURT ORGANIZATION/STRUCTURE

A. Drug Court Planning Team-The drug court planning team will work together to develop and implement Milwaukee County's Drug Treatment Court. The team will be responsible for development of a program model, program policies and procedures and full program implementation and evaluation. The planning team shall consist of representatives from the following agencies/organizations:

- Judge
- Planning/Court Coordinator
- Prosecutor
- Defense Attorney
- Treatment Provider
- Community Supervision
- Probation/Parole
- Law Enforcement
- Evaluator

B. Drug Court Team Members and Roles-

Drug Court Judge- will provide leadership to the drug court program and make final programmatic/participant decisions and participate fully as a drug court team member. The judge presides over the proceedings and monitors the appropriate application of sanctions and incentives while maintaining the integrity of the court. The judge will:

- Lead pre-hearing staffing meeting and make final decisions based on collaborative team input;
- Provide encouragement and motivation to each drug court participant;
- Establish a rehabilitative relationship with each participant through intensive interaction during court appearances.

Drug Court Prosecutor- will ensure community safety concerns are met and will participate fully as a drug court team member. The Prosecuting Attorney will designate a prosecutor to be responsible for Drug Court eligibility determinations and participating in Drug Court hearings. The prosecutor will:

- Make eligibility determinations and contact collaborative agencies such as law enforcement and Department of Corrections for input;
- Make determinations for termination and new charges, such as bail jumping, that balance community needs and therapeutic outcomes;
- In status hearings will operate in a non-adversarial manner, promoting a sense of a unified team presence;
- Ensure participant understanding of sanctions and present rewards to recognized participants.

Drug Court Defense Attorney- will ensure his or her clients' legal rights are protected and will participate fully as a Drug Court team member. The defense attorney will:

- Meet with potential Drug Court participants to evaluate their interest and acceptability into the program;
- Advise the clients on their legal rights, legal options, program conditions and potential sentencing outcomes;
- Monitor client progress in the Drug Court program;
- Participate in a non-adversarial manner at status hearings, thus promoting a unified Drug Court team presence.

Drug Court Coordinator-will provide oversight for the day to day operations of the drug court program. He or she will also monitor whether the program is meeting its short and long term objectives on the participants, community and the local criminal justice system. The coordinator will:

- Plan, organize, coordinate and monitor the activities of the drug court program;
- Schedule and meet with participants to discuss program details;
- Attend pre-hearing staffings and hearings in order to evaluate and direct drug court operations, case management, and drug court team cohesiveness and understanding of drug court concepts;
- Gather and prepare Drug Court data for reporting mandates;
- Collaborate with government and community agencies in order to meet programmatic goals and provide effective programming;
- Participate in random home visits to assess the participant's progress;
- Develop long-term sustainability plan for the program.

Drug Court Case Manager-will provide case management services for all drug court participants and will participate fully as a drug court team member. The case manager will:

- Conduct intake interviews with clients and gather all relevant treatment and demographic information;
- Provide referrals and assistance in obtaining treatment and other supportive services, as directed by the case plan;
- Perform substance testing to determine presence or absence of forbidden substances in participants' bodies;
- Monitor conditions of the Drug Court contract, including treatment compliance, abstinence, housing arrangements, employment, traveling, and legal/ financial obligations;
- Perform random home visits to assess the participant's progress;
- Coordinate any community service performed by the participant;
- Provide weekly input of compliance data into Drug Court database for weekly progress report;
- Apprise the other team members of the participants' compliance with court orders;
- Participate in weekly staffings and court hearings and provide weekly input of treatment and drug testing data into Drug Court database.

Drug Court Treatment Provider-will identify and/or provide a continuum of care for participants including, detoxification, residential treatment, outpatient treatment, and intensive outpatient treatment. The provider will:

- Make treatment recommendations to the team;
- Participate in weekly staffings, and if not able to attend, will provide drug court case manager with full, timely and complete compliance information.

Drug Court Law Enforcement Liaison-provide law enforcement support for drug court activities and participate fully as a drug court team member. The law enforcement liaison will:

- Provide law enforcement presence during home visits;
- Provide eligibility feedback during initial screening process;
- Follow-up on warrants issued by the court.

C. Drug Court Steering Committee/Sub-Committees
(Work in Progress)

IV. ENTRY AND ASSESSMENT

A. Capacity

In its initial year, Milwaukee County’s Drug Treatment Court will have a maximum capacity of 60 participants.

B. Eligibility

This program is designed to serve high risk/high need individuals who have significant substance abuse problems. In order to be eligible to participate in Drug Court, the defendant must meet the following criteria:

- Milwaukee County resident;
- Age 18 or older;
- AODA dependant (based on ASI score);
- Be charged with a felony, or be chronic, habitual misdemeanant;
- Score a minimum of 23 but no more than 35 on the Level of Service Inventory-Revised.
- Meet the federal definition of “non-violent offender”;
- Be amenable to the drug treatment court program.

In addition, persons **will NOT be considered** if they face or have a history of the following offenses:

- Sex, dangerous weapons or firearms offenses;
- Manufacture, delivery, possession with intent or conspiracy to commit these offenses involving 40 or more grams of cocaine, 2,500 grams of marijuana or 15 or more grams of heroin.

PERSONS WILL NOT BE CONSIDERED UNLESS THEY ARE FACING A RECOMMENDATION FROM THE DISTRICT ATTORNEY’S OFFICE OF AT LEAST 9 MONTHS STRAIGHT TIME AT THE CCF-S (HOUSE OF CORRECTION).

C. Referral/Identification Process

Justice 2000 will identify and screen all potential candidates for the drug treatment court. Should a prosecutor or defense attorney wish to refer a defendant to the court, the referral must be made to Justice 2000 and Justice 2000 must conduct initial eligibility screening. Justice 2000 will create an electronic eligibility report in the Milwaukee County Pretrial Services Database. The DA and defense attorney will have electronic access to this report at www.mcp.justice-2000.org. (You will need to obtain a user ID and password if you do not already have one. Please call 414-278-2145 to obtain access.) The report will indicate whether the defendant has previously been sentenced to prison.

D. DA/PD/Defense Review

If the initial eligibility screening indicates a defendant is appropriate for drug treatment court and the defense and prosecutor agree, the case is charged. The DA/defense attorney must notify Justice 2000 of the charging decision.

E. Initial Appearance

At the initial appearance, the prosecutor and defense will inform the court that the defendant is a potential candidate for the drug treatment court. The defense will waive the preliminary hearing time limits, release/bail will be determined and the defendant will be ordered TOT-Justice 2000. The case will be reassigned to the drug treatment court. The next court date will be scheduled for a projected guilty plea date before the drug treatment court judge seven (7) days from the date of the initial appearance.

F. Clinical Assessment

Justice 2000 will complete a clinical assessment with the defendant using the Addiction Severity Index (ASI).

G. Referral Summary and Treatment Recommendation

Upon completion of the intake, risk, needs assessment and clinical assessment, Justice 2000 will complete the Drug Treatment Court Referral Summary. This summary will be forwarded to members of the drug court team and defense at least 24-hours prior to the scheduled weekly drug court team meeting.

H. Drug Court Team Staffing

The Drug Court Team will meet weekly to review the Referral Summaries and determine admission for potential new candidates. In addition, the team will also review current participant cases to determine progress, compliance and the application of incentives and sanctions.

I. Admission/Appearance in Drug Court

If the Drug Court Team determines that a potential candidate is appropriate for admission to the drug treatment court, the defendant will make an appearance before the drug court judge. At this appearance, the following must be accomplished:

- Waiver of preliminary hearing;
- Entry and acceptance of guilty plea;
- Entry of Drug Treatment Court Agreement;

- Review of basic program conditions;
- Release/Bail Order with TOT Justice 2000;
- DA-Victim Notification Process

In the rare case in which the defendant is not admitted to the drug treatment court or deferred prosecution program, the case shall be re-tabbed to the original assigned judge.

J. Opt Out Period

If the defendant refuses to cooperate with the drug treatment court, requests a jury trial after admission to the program, or the DA newly discovers information that would make the defendant ineligible for participation in the drug treatment court, the defendant may be terminated from the program and normal prosecution will resume.

V. PROGRAM COMPONENTS

A. Overview/Phases

Phase 1-GOALS

- Encouraging participant’s CHOICE to work toward a drug free life and to establish a foundation of abstinence;
- Detoxification and abstinence;
- Acquisition of health care and other benefits;
- Placement in community based treatment;
- Begin recovery work.

REQUIREMENTS:

- 30 days substance free as measured starting after the second consecutive negative drug test;
- No sanctions.
- Twice weekly random drug/breathalyzer testing;
- Engaged in and making progress in treatment;
- A minimum of 10 hours per week of documented participation in one or more of the following activities: treatment, vocational, educational, and community service.
- 100% attendance at treatment and with community supervision contacts (verifiable excused absences only);
- No new arrest rising to the level of probable cause as determined by the drug treatment court prosecutor;
- Weekly appearance before Drug Court Judge;
- Ability to outline/articulate achievements in Phase 1 and goals for Phase 2.

Phase 2-GOALS

- Stabilize the participant in treatment;
- Challenge the individual to confront underlying issues surrounding substance abuse;

- Goal setting for education and employment;
- Identification of community supports;
- Begin re-connection with family/community;
- Other referrals for services in identified areas of need such as parenting, education, anger management, etc.
- Continuing progress in treatment and stages of change;

REQUIREMENTS

- 120 days consecutive clean;
- 120 days substance free as measure by random drug/breathalyzer testing;
- Twice weekly random drug/breathalyzer testing;
- 100% attendance at treatment and with community supervision contacts (verifiable excused absences only);
- A minimum of 10 hours per week of documented participation in one or more of the following activities: treatment, vocational, educational, and community service.
- Continuing progress in treatment and stages of change;
- No new arrest rising to the level of probable cause as determined by the drug treatment court prosecutor;
- Appearance before the Drug Court Judge once every other week.
- Ability to outline/articulate achievements in Phase 2 and goals for Phase 3.
- Participation in parenting skills, education, employment or other programming as directed by case manager and treatment plan.

Phase 3-GOALS

- Promote continued change within the participant with move towards self-sufficiency while re-connecting with the family/community;
- Internalization of recovery tools and continued development of coping skills;
- Vocational training and/or employment;
- Educational pursuits.

REQUIREMENTS

- 90-120 days substance free;
- Random drug/breathalyzer testing;
- Enrolled in vocational/educational/employment programming;
- Continuing progress in treatment or aftercare and in stages of change;
- 100% attendance at treatment and with community supervision contacts (verifiable excused absences only);
- A minimum of 10 hours per week of documented participation in one or more of the following activities: treatment, vocational, educational, and community service.
- No new arrest rising to the level of probable cause as determined by the drug treatment court prosecutor;
- Appearance before the Drug Court Judge once a month.
- By the end of Phase 3, the participant must be clean from all prohibited classes of drugs including prescribed opioid pain medications unless approved by the team.
- Ability to outline/articulate achievements in Phase 3 and goals for Phase 4.

Phase 4-GOALS

- Completion of treatment and/or treatment program's approval for graduation;
- High school diploma or GED;
- Employment;
- Stable housing;
- Completion of any other programming per treatment/supervision plan (parenting, anger management, CIP, MRT, community service, etc.)

REQUIREMENTS

- 30-90 days substance free;
- Random drug/breathalyzer testing;
- Employed and/or enrolled in educational/vocational training;
- A minimum of 10 hours per week of documented participation in one or more of the following activities: treatment, vocational, educational, and community service.
- Appearance before the Drug Court Judge once a month.
- No new arrest rising to the level of probable cause as determined by the drug treatment court prosecutor;
- Stable housing;
- Aftercare/relapse prevention plan in place;
- Sponsor;
- Submission of written Graduation Application which sets forth goals and accomplishments in the following areas:
 - Progress/accomplishments in treatment
 - Summary of treatment court experience, including sanctions
 - Education and/or job training
 - Housing
 - Vocation and employment
 - Family
 - Aftercare/relapse prevention plan.

B. Sanctions and Incentives

In order to ensure participant accountability and encourage progress and compliance, Milwaukee County's Drug Treatment Court will use employ the use of immediate sanctions for any non-compliance, and will provide incentives/rewards for compliance and progress toward program goals.

The Drug Court Team will determine in weekly staffings, on a more probable than not basis, whether participants are in compliance or non-compliance. The team will determine, from all information available to or obtained by it, what are appropriate incentives or interventions based upon consideration of the nature and degree of the participant's compliance or non-compliance, the status of the participant's recovery, the participant's history of compliance and recovery and what will most reasonably and effectively promote the participant's recovery and success in completing drug court requirements.

Incentives-The drug court will utilize a continuum of incentives, tailored to appropriately recognize and encourage each participant's accomplishments and successes, ranging from congratulations and praise in open court to tangible rewards (e.g. sobriety tokens, gift certificates, food/clothing vouchers, event tickets, movie passes, etc.) to the ultimate award of graduation from drug court and the dismissal/reduction of the pending charges. Incentives may include, but are not limited to:

- Recognition by the court/judge
- Reduction in certain program requirements
- Sobriety tokens
- Early dismissal from court session
- Certificates of accomplishment
- Gift certificates
- Movie/event passes/tickets
- Transportation coupons/passes
- Promotion to next court phase
- Video rental coupons
- Day Trip
- Fishbowl drawings
- Tattoo Removal
- Haircuts
- Dental Assistance
- Scholarships/donated Courses
- Early termination from program

Sanctions-The drug court will utilize the following continuum of sanctions, ranging from the least severe (e.g. admonitions in court) to the most severe (e.g. incarceration), selected to specifically discourage and deter non-compliance with drug court requirements and to aid and reinforce treatment and services necessary for recovery. Sanctions may include, but are not limited to:

- Admonishment during court sessions
- Sequestration in jury box during court session
- Observe other court proceedings
- Increased court appearances
- Writing, reading or other assignments
- Increased home visits
- Increased substance testing
- Extension of current phase
- Demotion to earlier phase
- No contact orders
- Curfew
- Community service
- GPS monitoring
- Incarceration

C. Drug Testing Policies and Procedures

<p style="text-align: center;">PARTICIPANT ACKNOWLEDGEMENT OF MILWAUKEE COUNTY DRUG TESTING COLLECTION PROTOCOL</p>
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The reliability of drug testing is dependant on the integrity and accuracy of the collection process along with the chain of custody of the sample. Staff realizes that drug testing is a somewhat invasive procedure. However, strict adherence to the following collection protocol will ensure reliability and validity of all drug test results. **All specimen collection will take place in room 417 of the Safety Building.**

Participant Preparation

1. Upon admission to the program, case managers will review the drug testing collection protocol with the participant and provide the participant with a copy.
2. Upon admission to the program, participants will be provided with a list of over-the-counter medications and foods they **MUST** avoid while in drug testing (attached).
3. Because selection for testing is done on a random basis, **ALL program participants MUST appear in the office ready to provide a urine sample for testing.**
 - a. Participants who cannot provide a sample will wait in a designated area for 15 minutes, and will be monitored to ensure no consumption of fluids. If the participant cannot produce a sample within 15 minutes, the participant will be escorted to room 417 by their case manager, and will be informed of and sign off on the “Shy Bladder Proceedings”.
4. **All drug testing will take place first**, followed by the supervision appointment with the participant’s case manager. The case manager will review the results of the drug test at the supervision appointment after the drug testing process is complete and the participant is escorted back to the office by the case manager.
5. If a participant cannot provide a sample once escorted to room 417, they will remain in the designated drug testing waiting room until they are able to do so. **THEY WILL NOT BE ALLOWED TO LEAVE AND RETURN TO PROVIDE A SAMPLE, and all consumption of fluids will be strictly monitored.** If the participant leaves the drug testing waiting area for any reason before providing a sample, a “Refusal” will be documented and reported to the Court.

Urine Sample Collection

1. The case manager will prepare the Drug Test Request Form and print the required form and labels. The case manager will ask the participant if s/he is taking any prescription medication. This will be noted in the proper area on the request form.
2. The case manager will ask the participant if they are ready to provide a specimen and will escort the participant to the drug testing area, while maintaining all drug testing documents in their possession to turn over to the Drug Testing Technician.
3. Staff collecting the sample will verify the identity of the person to be tested by asking their name and date of birth. **Participants MUST bring some form of identification with a photograph to every supervision appointment** in the event they are selected for random drug testing.
4. Collection staff will enter the collection date, specimen number, last name, first name and date of birth of the participant on the "Drug Testing Collection Log". In addition, collection staff will again verify prescription drug use and document this information in the proper area on the Drug Test Request Form.
5. Participants will be required to remove **ALL extra layers of clothing down to one layer of clothing**, including: coats, jackets, hooded sweatshirts or large pocket clothing items prior to testing.
6. Participants will empty ALL pockets, and place all items in a storage tray (any money will remain in possession of the participant) until the testing process is complete.
7. All shirts, blouses, or sweaters must be pushed/rolled up/lifted **above the navel** and all pants, trousers, or skirts and undergarments **lowered to the mid-thigh**. At this time, **the participant MUST turn around in a complete circle** so the collection staff can observe and ensure there are no efforts to tamper with the testing process.
8. The participant will thoroughly rinse and dry their hands **immediately** prior to testing. **This activity will be observed by collection staff.**
9. Collection staff will secure and wear gloves at this time and ensure that the toilet has been flushed prior to sample collection.
10. Collection staff will ask the participant to select a test package to hand to the collector.
11. The collection staff will direct the participant to provide a urine sample, filling the testing cup to the minimum fill line (as marked on the test cup).
12. Collection staff will ensure the collection of an unadulterated sample by **WITNESSING THE PARTICIPANT URINATING INTO THE SAMPLE CONTAINER. COLLECTION STAFF WILL STAND DIRECTLY IN FRONT OF THE**

PARTICIPANT AND OBSERVE THE PARTICIPANT AT ALL TIMES WHILE IN THE PROCESS OF COLLECTING THE SAMPLE.

13. Upon completion of providing the sample, the participant will hand the testing cup to the collection staff to place the container lid securely on the cup.
14. The collection staff will verify the temperature of the sample by inspecting the temperature strip on the testing cup to ensure the validity of the sample.
15. The participant will be instructed to dress, flush the toilet and wash their hands.
16. The collection staff will activate the test, and secure the sample by placing the key in the cup lid and placing a green drug testing sticker over the lid and key down the side of the cup **in the presence of the participant.**
17. The date, the specimen number, and the participant's last name will be documented on the testing cup with a Sharpie marker. Collection staff will ask the participant to verify all information documented on the cup label to ensure its legibility.
18. Participants will be asked to wait in the designated drug testing area for release to their case manager to return to the program office for the supervision appointment.
19. If collection staff believes an adulterated sample has been submitted, the participant will be required to submit a new sample.
20. All positive specimens will be placed in a secure (locked) container and collected for transport to the secure storage site on a frequent basis.
21. After the testing process is completed, the participant **MUST** be released to their case manager by the lab technician. Participants must not leave the drug testing waiting room without proper release by their case manager.

Challenges to Accuracy of Test Results

1. Under **no circumstance** will a participant be allowed to submit a "new" specimen based on a claim of lab error. If a participant wishes to challenge the accuracy of a test result, **the challenge MUST be made within 10 business working days of the participant receiving notice of the positive result.**
2. The participant must contact their attorney to discuss and challenge test results.
3. The participant and/or their attorney must notify the assigned case manager if a confirmation test is being requested. The case manager will then notify the WCS Drug Testing Lab of the challenge and request for confirmation.
4. The participant will be responsible for pre-paying for the confirmation test (\$22/test).

**OVER-THE-COUNTER MEDICATIONS
AND FOODS TO AVOID WHILE BEING
URINE/BREATH/SCRAM TESTED**

It is the participant's responsibility to limit exposure to the below list of products. It is the participant's responsibility to read labels or inquire of a pharmacist or assigned case manager before using/consuming the following products. Use of the products detailed below will NOT be allowed as an excuse for a positive drug, breathalyzer or SCRAM test. When in doubt, do not use or consume:

1. **Cough and Other Liquid Medications:** Alcohol containing cough/cold syrups such as Nyquil. Other cough syrup brands containing ethyl alcohol. All prescription and over-the-counter medications must be reviewed with your case manager before use. Non-alcohol containing cough/cold remedies are readily available at most pharmacies and major retail stores.
2. **Non-Alcoholic Beer/Wine:** Although legally considered non-alcoholic, NA beers (Sharps, O'Doul's) contain a residual amount of alcohol that may result in a positive test result for alcohol, if consumed.
3. **Food and Other Ingestible Products:** There are numerous other consumable products that contain ethyl alcohol. Flavoring extracts such as vanilla or almond extract, and liquid herbal extracts (such as Ginkgo Biloba), could result in a positive screen for alcohol or its breakdown products. Communion wine, food cooked with wine and flambé dishes (alcohol poured over a food and ignited such as cherries jubilee, baked Alaska) must be avoided.
4. **Mouthwash and Breath Strips:** Most mouthwashes (Listermint, Cepacol, etc.) and other breath cleansing products contain ethyl alcohol. The use of mouthwashes containing ethyl alcohol may produce a positive test result. Non-alcohol breath fresheners are readily available and are an acceptable alternative.
5. **Hygiene Products:** After shaves, colognes, hairsprays, mousse, astringents, bug sprays (Off) and some body washes contain ethyl alcohol. While it is unlikely that limited use of these products would result in a positive test for alcohol, excessive, unnecessary or repeated use of these products could affect test results. Participants must use these products sparingly to avoid reaching detection levels.
6. **Solvents and Lacquers:** Many solvents, lacquers and surface preparation products contain ethyl alcohol. Both excessive inhalation of vapors, and topical exposure to such products, can potentially cause a positive test result for alcohol. Frequency of use and duration of exposure to such products must be kept to a minimum. There are alternatives to nearly any item containing ethyl alcohol. A positive test result will not be excused by reference to use of an alcohol-based solvent. If a participant is employed where contact with such products cannot be avoided, this must be discussed with the case manager.

7. **Poppy Seeds:** It is possible to test positive for opiates after having consumed poppy seeds. Poppy seeds contain trace amounts of opium, which like heroin, is derived from the poppy plant. Research measuring the amount of seeds necessary to produce a positive result is varied. To avoid this issue, participants must avoid consuming poppy seeds. If a participant insists a positive result is due to poppy seeds, that person will be required to produce another urine sample the next day.

SECOND HAND MARIJUANA SMOKE

A positive test result due to the passive inhalation of second-hand marijuana smoke is not feasible given the conditions necessary to produce the 50 ng/ml level at which the Milwaukee County Pretrial Drug Testing Program tests. In various studies on passive inhalation, positive results have occurred where individuals were exposed to the smoke of 4-16 marijuana cigarettes in an extremely small, sealed, unventilated area for one hour a day over the course of several days. The conditions were extremely uncomfortable, causing watering of the eyes and irritation to the mucous membrane of the nose and throat. The few positive test results were detected at the 20 ng/ml level which is the most sensitive testing level.

The only study where the results were detectable at the 50 or 100 ng/ml level were a product of hour long exposure in the above sealed conditions to 16 cigarettes over 6 consecutive days. It is highly unlikely that the extreme conditions necessary to produce ANY positive test (even at the lowest 20 ng/ml level) could be encountered in a real-life situation without, at least, the tacit consent of the participant. **Accordingly, it is the participant's responsibility to remove him/herself from that situation.**

PHYSICIAN DISCLOSURE/PRESCRIPTION DRUG POLICY

Drug court participants are required to notify any medical practitioner whom they have visited for medical treatment of the following information:

- I am a participant in the Milwaukee County Drug Court program.
- I am required to disclose that I have an addiction to chemical substances.
- Unless absolutely medically necessary in the treatment of an illness or injury, I am NOT to be prescribed a medication containing a narcotic/addictive drug or any other type of medication they may interfere with the treatment of my addiction.
- I must request that my practitioner write on my medical file that I am a participant in the Drug Court, sign and date the file.
- I must request a copy of this entry from my practitioner and will present it to my case manager at my next scheduled contact.

Failure to comply with this policy may result in application of a sanction and/or termination from Drug Court.

D. Case Management/Community Supervision

Community supervision is the effort to monitor the participant's behavior and program compliance outside of the courtroom. Supervision is accomplished through a system of support, monitoring, advocacy and accountability to assist the participant through the change process.

Purpose of Case Management/Community Supervision

- Protect public safety
- Provide accountability
- Protect program integrity
- Support the progress of the participant
- Provide early intervention
- As an adjunct to treatment/reinforce treatment
- Confirm, inform and identify discrepancies
- Extend the Drug Court Team into the community
- Provide information to the Drug Court Team

Community supervision for Drug Court participants will consist of the following:

- Ongoing assessment of criminogenic/treatment needs
- Case/supervision plan based on assessment outcome
- Ongoing field contacts and regular home visits
- Regularly scheduled office contacts
- Random drug/breathalyzer testing
- Ongoing verification
- Referrals to AODA and medical treatment, GED, vocational, educational and employment programming. Referrals to other supportive and "life skills" programming such as parenting classes, anger management, CIP, MRT, etc.

The drug court case manager is responsible for providing primary case management and supervision of all drug court participants. The functions that comprise case management, assessment, planning, linkage, monitoring, and advocacy must always be adapted to fit the particular needs of the participant and program. During the period between each drug court session, the case manager or an approved designee will personally review progress with each participant.

Case management and supervision will provide: (1) planning for intervention services and the fulfillment of criminal justice obligations; (2) brokering treatment and other services and assuring continuity as the participant progresses through treatment and program completion; (3) monitoring and reporting progress of the participant; (4) supporting the participant by identifying problems, and advocating for the participant with legal, treatment, social service, and medical systems; (5) monitoring urinalysis, breath analysis or other chemical testing; and (6) monitoring of phases. The case management/supervision continuum must be designed to provide engagement and motivation, primary treatment services at the

appropriate intensity and level, and support services that will enable the individual to maintain long-term sobriety while managing life in the community. Treatment must be structured to ensure smooth transitions to the next level of care, avoid gaps in service, and respond rapidly to the threat of relapse. Case management can help accomplish all of the above.

The case management of drug court participants is built around the use of the substance abuse assessment, any mental health records, and current evaluation tools. It entails an interactive, coordinated process between the case manager and participant, with the ultimate goal of identifying the strengths and challenges of the participant and developing interventions and strategies around those issues.

Each participant is required to attend scheduled appointments with their assigned case manager. The schedule, frequency and location of these meetings are based on phase, progress and random testing schedule.

Essential Skills for Drug Court case Manager

- Previous case management experience with persons having substance abuse disorders.
- Motivational interviewing
- Relapse prevention
- Understanding of the Stages of Change
- Drug/substance testing
- Identify and respond rapidly to threat of relapse
- Understanding use of sanctions and incentives
- Pharmacology
- Addiction
- Cultural competence
- Extensive knowledge of community-based services

E. Treatment

All residents of Milwaukee County who are at least 18 years of age, who meet DSM-IV-TR Axis I or Axis II diagnostic criteria for a substance use disorder (American Psychiatric Association, 2000) and who meet financial eligibility criteria based on Wisconsin's HFS1 Uniform Fee System, will be eligible for services in Wiser Choice.

Entry into the system will include case identification, eligibility determination, registration, comprehensive screening, level of care determination, referral, voucher authorization and linkage to appropriate services. The Addiction Severity Index (ASI) will be used to assess clinical and functional needs. It will be supplemented to gather information that will further define the circumstances surrounding the substance use and the individual readiness for change. The comprehensive screening process will identify individuals' strengths, challenges and needs across multiple life dimensions in order to determine appropriate services and the optimal level of care for the individual to begin enrollment in

AODA and recovery support services. The ASI and the additional information gathered will be interpreted to determine intensity/severity rating on the dimensions of the American Society for Addiction Medicine's *Patient Placement Criteria for the Treatment of Substance-Related Disorders (Second Edition – Revised)* (ASAM PPC-2R). The Intake Worker will enter the ASAM and ASI data online, and the Care Coordinators, treatment, recovery support providers and Drug Court Team will be able to access the reports.

The CIU will provide a list (online or paper) of treatment providers who offer the designated level of care to the client from which to choose. After obtaining the client's consent, the Intake Worker will make the referral and the client will have contact with the Care Coordinator (known as a Recovery Support Coordinator, or RSC) within 24 hours, immediately if the client has urgent needs. The CIU will electronically authorize vouchers for care coordination services. The Recovery Support Coordinator may request any recovery support services and/or flexible expenditures to address pressing client needs identified by the assessment that might serve as a barrier to the client seeking treatment. The same procedures will be used to ensure genuine, free choice of recovery support services as those used for the treatment providers. The Intake Worker will make sure that a slot is available with the client's provider of choice, authorize treatment, contact the provider and schedule the initial appointment.

Within 24 hours following intake, the Recovery Support Coordinator and the client will, 1) develop an initial plan of care based on the comprehensive screening/assessment, and 2) choose additional services consistent with the plan in manner that ensures free choice, the providers for those services. The RSC will submit the plan of care to BHD and request authorization for the additional services. The BHD Care Manager will check the authorization requests against the plan of care and the assessment, and will provide authorization accordingly.

The Recovery Support Coordinator helps the client to form a Recovery Support Team consisting of both formal and informal/natural supports. The formal supports consist of representatives from various systems with whom the client and family are involved, e.g., treatment, recovery support providers, criminal justice, TANF, child welfare, etc. Informal supports may include relatives, friends, clergy or other members of the faith community, school personnel, and/or other community members. The purpose of the team is to assist the client to develop and achieve the goals of a *Single Coordinated Care Plan (SCCP)* that incorporates the needs of the client and the requirements and resources of all involved systems. The Recovery Support Team will meet early in the client's enrollment and develop the initial SCCP, which in addition to identifying goals also identifies service needs and available resources. Based on the SCCP, the Recovery Support Coordinator helps the client select additional services and choose providers, and requests voucher authorization for those services. The SCCP is reviewed at a minimum of every 30 days or as necessary and amended as the client's needs emerge or change.

Initial authorizations for treatment and recovery support services will be issued for a standard number of units and duration, according to level of care for treatment, in sufficient quantity to permit the SCCP team and the RSC to become familiar with the client's functioning. For clinical treatment, during the authorization period, the Recovery Support Team can apply an assessment of the client's functioning against the ASAM criteria and request a change (in either direction) of level of care at any time. The expiration of the authorization period or units will automatically trigger a re-evaluation of the placement criteria if further services are desired, with submission of clinical justification to the care manager required. By this point, the team will have a sense of how much more time will be needed at the current level of care. Therefore, the length and intensity of a subsequent authorization, rather than being standard, will be driven by the individual client's clinical presentation and needs. Reauthorization for recovery support services must also be justified by functional assessment and reflected in the Single Coordinated Care Plan.

F. Staffing and Status Hearings

Staffing and status hearings will be scheduled in accordance with the respective participant's phase.

G. Graduation Requirements

To be eligible for graduation from drug court, participants must, at a minimum, have actively participated in drug court for 12 months, have successfully completed each of the phases of drug court, and have in place a specific plan for after-care and continuing sobriety and recovery.

In determining whether a participant should be graduated from drug court, the team will consider the participant's current circumstances, including (1) stability in family and other significant personal relationships, (2) housing and employment/education, (3) support systems in place for continued sobriety, (4) progress in treatment of substance abuse and/or co-occurring disorders, (5) recommendations of treatment providers, and (6) plans for and commitment to continued sobriety and recovery.

When a participant qualifies for completion of phase IV and graduation from drug court, a written application for graduation will be submitted to the drug court team. A written application, prepared by the participant in the form prescribed by the drug court team, will be submitted to the coordinator and case manager for preliminary review with the applicant and subsequent presentation to the drug court team. The participant will be required to attend the team staffing at which the application for graduation is presented and reviewed.

Graduation ceremonies will take place in the courtroom and will be scheduled as needed. Upon graduation, a participant is relieved of all drug court requirements.

H. Termination from Drug Court

Termination from drug court will occur upon a participant's election to opt out of drug court following the execution of the drug court participant agreement.

Termination will also occur if a new charge(s) is filed against a participant alleging an offense(s) that is ineligible for drug treatment court. If a participant, while in drug treatment court, is charged with a new offense that would otherwise be eligible for drug court participation, the drug court team will consider the participant's circumstances on a case-by-case basis and determine if continued participation in drug court is appropriate and compatible with the new charge.

Termination from drug court MAY occur as the consequence of particularly serious violations of drug court requirements or policies or persistent non-compliance with drug court requirements.

Serious violations that may result in termination include, but are not limited to:

- Violence or threatened violence to another participant or to drug court personnel
- Filing of any new felony charge against the participant
- Tampering with a test sample
- Absconding from drug court

Persistent failures to comply with drug court requirements MAY result in termination, but in most instances, only after a succession of interventions has been imposed that has not resulted in improved compliance and progress.

Persistent failures that MAY result in termination include, but are not limited to:

- Positive/adulterated test results
- Missed or refused tests
- Dishonesty
- Missed court sessions
- Missed treatment sessions
- Missed supervision sessions
- Violations of criminal laws
- Failure to participate in treatment or other services
- Failure to demonstrate, over a reasonable period, progress through drug court and toward sustained sobriety
- Engaging in an inappropriate or prohibited relationship with another participant

Upon the recommendation that a participant be terminated, the team will consider the recommendation at the next scheduled staffing.

VI. REPORTING

A. Referral Summary

The referral summary is completed and sent to the team after all entry and treatment assessment is complete. This comprehensive report outlines the defendant's criminal history, risk and needs, treatment level of care, readiness for change and any other information that may assist the team in making an admission decision.

B. Violation Reports

Major violations will be reported to the drug court judge immediately. If a bench warrant is issued for a drug treatment court participant, this information will be passed along to the MPD Drug Court Liaison.

C. Status/Compliance Reports

Participant compliance reports shall be submitted to each Drug Court Team member. Said report will provide a detailed accounting of the participant's compliance with and progress in supervision, treatment, drug testing, and any other programming.

VII. PROGRAM EVALUATION

UNDER DEVELOPMENT-UNIVERSITY OF WISCONSIN MILWAUKEE

VIII. APPENDICES

Drug Treatment Court Forms/Documents

1. Milwaukee County Drug Treatment Court Entry Process Chart
2. Initial Eligibility Report
3. Drug Treatment Court Referral Summary
4. Status/Compliance Report
5. Drug Court Agreement
6. Participant Supervision Agreement
7. Physician Disclosure Notice
8. Consent for Release of Confidential Information Forms
9. Confidentiality Agreement for Drug Court Visitors
10. Institutional Review Board Form (UWM)