

Family Dependency Treatment Court of Hancock County Policy and Procedure Manual

Judge Kristen K. Johnson Hancock County Juvenile Court 308 Dorney Plaza

Findlay, Ohio 45840

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1.0 PROGRAM INFORMATION

1.1 Introduction

This manual outlines the policies and procedures of the Family Dependency Treatment Court of Hancock County. The Family Dependency Treatment Court of Hancock County links services and partnerships of Job and Family Services, child advocates, treatment agencies, and the Court in an effort to coordinate the services needed to restore parents' sobriety and provide for the safety, and well-being of their children. As the program develops, the policies and procedures are subject to change.

1.2 Mission Statement

The mission of the Family Dependency Treatment Court of Hancock County is to serve the best interests of children, by providing collaborative evaluation, and treatment services for substance abusing parents who have lost, or are at risk of, losing custody of their children to abuse, neglect, or dependency. These intensive services will improve the mental health of parents, and the well-being of their children through intervention, and treatment in a holistic, strength-based community-supported justice system.

1.3 Advisory Committee

The Family Dependency Treatment Court Docket Judge formed the Advisory Committee, which is comprised of key officials, relevant parties, and policy makers who developed the agreement set forth in this document, and the terms of the specialized docket operations [Sup.R., Appx.I, Std.1(A)]. The Family Dependency Treatment Court Docket Judge serves as the chair of the Advisory Committee, and attends Advisory Committee meetings [Sup.R., Appx.I Std.1(B)].

1.4 Advisory Committee Responsibilities

1.4.1 Implementation Responsibilities

The Advisory Committee is responsible for the implementation of the following:

- Developing written policies and procedures that define the goals, and objectives, identify target population, detail program entry, and case flow, and provide the written roles, and responsibilities of each Treatment Team member [Sup.R., Appx. I, Std.1(C)].
- Creating a written participation agreement, and participant handbook detailing the rights and responsibilities of the participants in the Treatment Court docket [Sup.R., Appx. I, Std.1(D)].

Collaboratively developing, reviewing, and agreeing upon written legal and clinical eligibility, completion, termination, and neutral discharge criteria [Sup.R., Appx. I, Std.3(A)].

1.4.2 Post Implementation Responsibilities:

The post implementation responsibilities of the Advisory Committee include the following:

- Developing and regularly reviewing a community outreach and education plan [Sup.R., Appx. I, Std.1; Recommended Practice (D)].
- Reviewing the target population.
- Reviewing the use of graduated sanctions.
- Reviewing treatment resources.
- Reviewing quarterly reports.
- Reviewing financial expenditures.
- Developing, and annually reviewing a written sustainability plan [Sup.R., Appx. I, Std. 1;
 Recommended Practice (E)].
- Reviewing policies and procedures.
- Assessing overall functionality of the specialized docket a minimum of every two (2) years.

1.4.3 Advisory Committee Members

Chair: Hancock County Juvenile Court Judge

Court Administrator

Family Dependency Treatment Court Coordinator

Hancock County Job and Family Services Director and Supervisor

Board of Alcohol, Drug Addiction and Mental Health Services Director

Hancock County Prosecutor/Agency Prosecutor

Hancock County Public Defender

Licensed Treatment Provider

Center for Safe and Healthy Children Director

Hancock County Commissioner

Findlay Police Department Representative

CASA Director

Juvenile Probation Representative

1.5 Goals, Objectives, and Performance Measures- [Sup.R., Appx. I, Std.1(C)]

1.5.1 Goals, Objectives and Performance Measures

The Family Dependency Treatment Court of Hancock County has three (3) primary goals, each of which has specific, corresponding objectives and performance measures.

- Goal 1: To reduce the number of days children are in out-of-home care, whether it is kinship or foster care.
- Goal 2: To increase the number of participants that successfully complete all phases as specified in order.

• Goal 3: To decrease new substantiated allegations of child abuse or neglect during participation in, and for one (1) year following completion of the program.

1.5.2 Program Objectives

The Program Objectives of this Project are as follows:

- <u>Objective 1</u>: Utilize screening process that will better determine the needs of the program participants in Family Dependency Treatment Court.
- Objective 2: To reduce the current average number of days children are in out-of-home placement by 30% within an eighteen (18) month period.
- Objective 3: To reduce recidivism in program participants for twelve (12) months after completing the program, through increased services of support groups and alumni associations.

1.5.3 Performance Measures:

1.5.3.1 *Training:*

Performance Measure 1: 100% of all Family Dependency Treatment Court Team will be trained in the Recovery-Oriented System of Care model, complete online learning courses, and participate in phone conferences/webinars.

1.5.3.2 Direct Service:

- Performance Measure 2: Fifteen (15) adults will graduate annually. (In addition, adults unwilling to enter programming voluntarily, in will be engaged in some of the services of the Program.)
- Performance Measure 3: Fewer than 35% of program participants, after entering the program, will re-offend (be arrested or seen at Common Pleas/Municipal Court, Adult division for a new offense or Violation of a Court Order) during their participation in the program.
- Performance Measure 4: 100% of program participants will participate in individual and/or family therapy (mental health and/or AOD counseling).
- <u>Performance Measure 5</u>: 70% of program participants who enter the program will successfully graduate from the program.
- <u>Performance Measure 6:</u> The current average number of days children are in out-of-home care will be reduced by 30% within an eighteen (18) month period.

1.6 Target Populations [Sup.R., Appx. I, Std.1(C)]

1.6.1 Fair Selection

Family Dependency Treatment Court of Hancock County targets those who are in the high risk/high need category. The program's focus is on parents, single or married, who are evaluated, and diagnosed as having substance abuse/dependency issues, coupled with a filing of abuse, neglect, or dependency regarding one, or all of their children. Client must be a willing participant

and will not be excluded from the program based on race, ethnicity, religion, sexual orientation, gender, or disability. The Family Dependency Treatment Court serves those individuals who have been:

- Legal residents of Hancock County.
- Identified as having certain behavioral health issues (mental health, substance dependency, substance abuse, etc.).
- Referred to Family Dependency Treatment Court of Hancock County.

1.7 Capacity

Family Dependency Treatment Court of Hancock County has the capacity to serve up to fifteen (15) participants at a time.

1.8 Risks and Benefits of Participation

Clients who choose not to participate in our program are offered the opportunity of receiving some available services that participants are receiving. Most services, due to limited resources, are only available to Family Dependency Treatment Court of Hancock County participants. These include, but are not limited to: immediate access to mental health and/or substance abuse therapeutic services, and immediate inclusion into evidence based treatment. Clients eligible, but who will not voluntarily enter, comply, and/or complete, the Family Dependency Treatment Court of Hancock County Program may experience loss or transfer of custody of their children. By complying with, and successfully completing the program, parent(s) are more likely to secure reunification with their child(ren).

1.9 Eligibility Criteria

The Family Dependency Treatment Court of Hancock County serves participants who fall into the high risk/high need category. Below is the eligibility and disqualifying criteria for a parent to participate in the Family Dependency Treatment Court of Hancock County:

1.9.1 Written Legal Eligibility Criteria

The types of cases that may make an individual legally eligible for the Treatment Court program. Eligibility requirements include: must be an adult resident of Hancock County; have risk factors identified on the Global Appraisal of Individual Needs (GAIN) that indicate their need for the program, a parent/guardian of child(ren) on whom Hancock County Children Services has filed a complaint of abuse, neglect, or dependency. Violent and sex offense cases will be carefully reviewed on a case-by-case basis to determine eligibility.

1.9.2 Written Legal Ineligibility Criteria

The types of cases that may make an individual legally ineligible for the program. Disqualifying factors include: charges involving sex crimes; charges involving the use of a weapon; violent offenses involving a victim with a serious injury.

If the potential participant appears to be a candidate, and meets legal eligibility criteria, then the potential participant is referred for clinical assessment.

1.9.3 Written Clinical Eligibility Criteria

Written clinical eligibility criteria are collaboratively developed, reviewed, and agreed upon by the Advisory Committee. [Sup.R., Appx. I, Std.3(A)].

Clinically assessed to be in need of an Intensive Outpatient level of care, and as being drug and/or alcohol dependent, and because of this dependency, cannot safely and effectively parent his/her child(ren).

Cognitively able to participate in Family Dependency Treatment Court of Hancock County evaluation process, treatment recommendations and all services, and activities as deemed necessary.

1.9.4 Clinical Ineligibility

There are certain criteria that may make a participant ineligible. A clinical diagnosis of a severe mental illness that would hinder the ability to complete program requirements; and/or clinical diagnosis of a developmental disability that would prohibit the client from completing program requirements.

1.10 Decision on Admission or Termination [Sup.R., Appx. I, Std. 3(B)]

The Family Dependency Treatment Court Judge shall have discretion to decide the admission into, and termination from the Treatment Court program in accordance with the written legal and clinical eligibility criteria for Family Dependency Treatment Court of Hancock County. Cases are reviewed on an individual basis.

1.11 No Right to Participate [Sup.R., Appx. I, Std. 3(C)]

The written legal and clinical eligibility criteria and termination criteria does not create a right to participate in the Family Dependency Treatment Court of Hancock County.

2.0 PROGRAM ENTRY AND CASE FLOW

2.1 Referral Process

Referrals may come from Hancock County Job and Family Services (HCJFS). Informal referrals may also come from attorneys, prosecutor, Judge, or probation officers.

2.2 Screening and Assessment

The Family Dependency Treatment Court of Hancock County has policies and procedures regarding screening, assessment, and admission into Family Dependency Treatment Court. The specialized docket Judge has discretion to decide admission into the program.

2.3 Legal Eligibility Screening

All participants referred to the Family Dependency Treatment Court of Hancock County will meet with the Coordinator for legal eligibility screening. The Coordinator will explain the program requirements, and expectations to participant.

All participants will:

- Submit to a baseline drug test.
- Promptly receive a GAIN Assessment and be referred to appropriate services.
- Be placed, as soon as possible, in appropriate services and treatment programs. [Sup.R., Appx. I, Std.4(C)].
- Fill out, and sign, the necessary paperwork and releases for participation in the program.
- The Coordinator will assist the participant with the following:
 - Assists participant in filling out, and signing, the necessary paperwork and releases for participation in the program.
 - Assists participant in setting up MH/AOD assessment with an MH/AOD provider.
 - Informs MH/AOD provider of participant's name to expedite AOD assessment.
 - Assists participants in setting up physical with a medical health provider.

At this point in time, there is an explanation to the potential participant of the responses to compliance and non-compliance, including the criteria for termination. [Sup.R., Appx. I, Std.6(E)].

The Family Dependency Treatment Court of Hancock County targets the high risk/high needs population by:

- Evaluating the mitigating, and aggravating circumstances of current, or prior Court involvement.
- Performing a careful examination of the circumstances of prior offenses of participant.
- Completing a validated alternative assessment for potential participants where competency is in question.

2.4 Clinical Assessment

A licensed treatment agency will provide a clinical assessment. The clinical assessment confirms that the potential participant is appropriate for inclusion in the program.

The Judge shall have the discretion to decide the admission into, and termination from the Treatment Court program in accordance with the written legal and clinical eligibility criteria for the Family Dependency Treatment Court of Hancock County. [Sup.R., Appx. I, Std.3(B)].

All chemical dependency, mental health, and other programming assessments shall include available collateral information to ensure accuracy of the assessment. [Sup.R., Appx. I, Std.4(A)].

The potential participant is required to sign a release of information form to provide confidential communication about participation, progress in treatment, and compliance with program requirements in accordance with provisions of relevant law, including the "Health Insurance Portability and Accountability Act of 1996," 42 U.S.C. 300gg-42, as amended, and R.C. 2151.421 and 2152.99. [Sup.R., Appx. I, Std.4(B)].

All screening, and assessments for treatment determinations shall be provided by programs, or persons who are appropriately licensed and trained to deliver such services according to the standards of the profession. [Sup.R., Appx. I, Std.4(D)].

The Family Dependency Treatment Court of Hancock County has prompt assessment and referral to appropriate services. [Sup.R., Appx. I, Std. 4]. Clinical assessments are typically completed in seven (7) to ten (10) business days of referral. The Treatment Team considers clinical assessments, and treatment recommendations.

2.5 Program Admission and Participation Agreement

Once the Judge determines that the potential participant is eligible for program entry, the potential participant is offered admission into the program. Participants are to be placed in appropriate treatment services and programs, and under reporting supervision to monitor compliance with the Court requirements, as soon as possible. [Sup.R., Appx. I, Std.4(C)]. The program typically takes seven (7) to ten (10) business days from the time of referral for the participant to enter the program.

The participant agreement includes the Family Dependency Treatment Court of Hancock County requirements and program process. The participant has a right to a copy of the detailed written participation agreement and participant handbook outlining the requirements, and process of the treatment court program. [Sup.R., Appx. I, Std.2(D)]. The participation agreement is attached hereto.

2.6 Non-Discriminatory Practices

If the participant meets the written clinical and legal eligibility criteria for the specialized docket, then the participant is not to be denied admission to the specialized docket based on race, color, religion, gender, sexual orientation, national origin, ancestry, age, citizenship, marital status, veteran's status, disability, or any other legally protected class status in any of its Court's programs.

2.7 Case Flow

2.7.1 Entry Option One:

The HCJFS files an abuse, neglect, or dependency complaint based on circumstances in which substance abuse is indicated. A participant can voluntarily enter the program anytime.

- Participant attends any hearing.
- Participant admits to allegations in the complaint.
- Children of participant may have been/will be removed from care of participant.
- HCJFS makes a referral at any hearing.
- Participant voluntarily agrees to participate in a special docket.
- Judge directs the participant to complete eligibility process and MH/AOD assessment within two (2) weeks.
- Participant meets with Family Dependency Treatment Court of Hancock County Coordinator.
- Coordinator explains the special docket requirements and expectations to participant.
- Participant will submit to a baseline drug test.
- Participant will complete a GAIN Assessment.
- Coordinator assists participant in filling out/signing necessary paperwork and releases for participation.
- Coordinator assists participant in setting up an MH/AOD assessment with an MH/AOD provider.
- Coordinator informs MH/AOD provider of participant's name to expedite MH/AOD assessment.
- Coordinator informs participant of MH/AOD assessment date.
- Coordinator informs participant of physical with a medical provider.

The participant's attorney is present during this meeting with the Coordinator to assist with review of participant handbook and expectations and requirements of Family Dependency Treatment Court of Hancock County.

HCJFS updates family's case plan to show orders for MH/AOD assessment, and referral to Family Dependency Treatment Court of Hancock County.

Participant attends MH/AOD assessment with an MH/AOD provider.

MH/AOD provider submits assessment summary to HCJFS

Family Dependency Treatment Court of Hancock County Treatment Team deems participant eligible/ineligible for the special docket, according to the written eligibility criteria listed in the program description.

If participant is deemed eligible for the special docket, the Coordinator will invite participant to attend next status review hearing.

At first the status review hearing for a new participant, Judge will officially welcome him/her to be a participant in program.

Judge will sign the Court Order for participant to enter the special docket.

Coordinator will meet with participant to review expectations of participant in the program, and answer any questions.

Participant will continue with weekly status review hearings, attend treatment services as recommended, and follow any and all Orders from the Court.

If participant is deemed ineligible for program, then the case will be sent back to the regular dependency case docket for further dispositional orders.

The Treatment Team may consider referral and eligibility determination of a potential participant who is interested in voluntarily entering the special docket post disposition, on a case-by-case basis.

2.7.2 Entry Option Two:

HCJFS files a contempt motion for non-compliance with case plan, including participant not following treatment recommendations.

Judge gives participant a choice of special docket or sentencing.

If participant chooses special docket:

- Participant admits to allegations in Contempt Motion, and voluntarily enters docket.
- Judge orders participant to complete eligibility criteria including MH/AOD assessment with MH/AOD provider within two (2) weeks.
- Participant meets with Coordinator.
- Participant is given a baseline drug/alcohol screen and completes the GAIN Assessment.

The parent's attorney is present during this meeting with the Coordinator to assist with review of participant handbook and expectations and requirements of docket.

- Coordinator explains the program requirements and expectations to participant.
- Coordinator assists participant in filling out/signing necessary paperwork and releases for participation.
- Coordinator assists participant in setting up MH/AOD assessment with MH/AOD provider.
- Coordinator informs MH/AOD provider of participant's name to expedite assessment process at MH/AOD provider. Coordinator informs HCJFS of participant's assessment date.

- Coordinator updates family's case plan to show order for MH/AOD assessment and referral to program.
- Participant attends MH/AOD assessment with MH/AOD provider.
- Participant attends MH/AOD appointment.

MH/AOD provider submits assessment summary to Coordinator and HCJFS.

Treatment Team deems participant eligible/ineligible for the program according to the criteria listed in this manual.

If participant is deemed eligible for the program, Coordinator will invite participant to attend next status review hearing.

At first status review hearing for new participant,

Judge will officially welcome him/her to be a participant in the program.

Judge will sign the Court Order for participant to enter.

Coordinator will meet with participant to review expectations of participant in the program, and answers any questions.

Participant will continue with weekly status review hearings, attend treatment as recommended, and follow any and all Orders from the Court.

If participant is deemed ineligible, the case would return to the regular dependency docket.

2.8 Specialized Docket File Maintenance and Confidentiality

All files (electronic or paper) are maintained by the Coordinator.

Paper files are stored in the Family Dependency Treatment Court of Hancock County Coordinator's office.

Paper files are stored in a locked filing cabinet.

The Hancock County Family Dependency Court Treatment Team and the Court Administer are the only persons with access to the files.

The files contain progress reports, journal entries, counseling updates, and drug screen results.

Day to day activities frequently require that confidential documents be removed from secured areas, in order to perform necessary job functions. The following procedures shall be followed when such documents are in possession of an employee in the course of his/her job duty.

When not in a secured area, the confidential documents must not leave the employee's immediate control. Documents of this nature cannot be left unsupervised, while physical controls are not in place.

When not in a secured area, precautions must be taken to obscure the confidential information from view, such as by means of an opaque file folder, or envelope. Confidential information shall not be left in plain view in a vehicle.

Confidential documents must be inspected thoroughly to ensure they do not contain any misfiled confidential information from other files.

To protect electronic confidential documents, all employees shall leave their computers in a 'locked' or 'logged off' state when not in immediate vicinity of his/her work area.

2.9 Protection of Clients and Staff from Potential Risks

The Family Dependency Treatment Court of Hancock County provides policies for all staff in regard to the communication, or disclosure of client information, records, and services received by current, and former clients. All protected health information falls under the guidelines of HIPPA. Programs within The Family Dependency Treatment Court of Hancock County make every effort to ensure that all persons served are protected against abuses of confidential information. The identity, and privacy of participants will be protected consistent with state and federal laws (Part 2 of Title 42 CFR). Participants will be asked to sign a waiver authorizing the necessary transfer of information between Treatment Team members. Policies and procedures have been developed that safeguard confidentiality.

All service provider records, which include identifications, diagnosis, prognosis, and service provision to any individual client, are confidential. Records may not be disclosed without the expressed written consent of the participant served. This Court recognizes that in certain instances a disclosure of information is necessary in the following instances:

- A medical emergency disclosure to medical personnel.
- Service providers in order to carry out the duties related to the clients' services.
- In accordance with federal confidentiality laws related to scientific research, if there is a written consent, the client's identifying information may be disclosed.
- For federal, state, local, or any third party agencies that are performing mandated organizational audits.
- The Court orders the release of information.
- The client has expressed intent to harm themselves or another person.
- The Ohio Department of Jobs and Family Services for services, data compilation, maintenance of records, aftercare planning, and evaluation of programs.

This Court prohibits:

• The disclosure of any client information

- Requirement or encouragement to make public statements by any client served which express gratitude towards the organization.
- Using identifiable photos, video tapes, audio-tapes, artwork or any forms of creative writing for public display, or for fundraising purposes without the expressed consent of the person served.

Any disclosure of client information whether it is written and/or oral without the expressed written consent of the client will constitute a breach of confidentiality. Service provider personnel who abuse or violate any rights/privileges of current, or past clients are liable for any damages as the law would determine. This could also include disciplinary action, or termination of employment. Any staff or service providers acting in good faith in a reasonable manner and without negligence in providing documents, or any other treatment applications, will be free from liability, civil or criminal action.

Confidentiality disclosures will be reviewed and discussed with clients prior to signing documentation. It is court policy for staff to review the court's confidentiality policy with clients during any initial intake procedure. Participants will also be made aware that any releases of information can be withdrawn at any time. Clients will also be asked to sign a Release of Information, in that, the release will be in effect until termination of their case, unless requested in writing that the release be removed. Clients will review the name of the provider whom the release is given to, the types of information that will be given, the purpose of the information to be released, and who will be maintaining the information that is given. All release of information will be maintained in client's case files and updated accordingly.

Note: Upon termination of services, staff will obtain required signatures from client on a Release of Claims Form. This form discharges The Family Dependency Treatment Court of Hancock County from liability in the event the client voluntarily or inadvertently discloses confidential information about themselves, or any other persons, that have been served.

2.10 Treatment Team Members

The Treatment Team is responsible for the daily operations of the specialized docket. Treatment Team members agree to serve on the Treatment Team for a minimum of one (1) year. Treatment Team members work with local community leaders, to ensure the best interests of the community are being considered. Treatment Team members engage in community outreach activities to build partnerships that will improve outcomes and support specialized docket sustainability. The Family Dependency Treatment Court of Hancock County with both the Treatment Team and Advisory Committee has a community outreach and education plan (included as part of appendix). The specialized docket incorporates a non-adversarial approach while recognizing the roles of prosecutors and defense counsel. [Sup.R., Appx. I, Std.2]. Treatment Team members engage in on-going communication including frequent exchanges of timely and accurate information about the participant's overall performance. [Sup.R., Appx. I, Std.6(C)]. On-going communication

outside of Treatment Team meetings is made through emails, phone calls, and by texts on phone. [Standard 6 recommended practice B.].

Treatment Team members maintain professional integrity, confidentiality, and accountability. The Treatment Team is highly professional, and all files are highly secured. Treatment Team members should make reasonable efforts to observe required specialized docket service provider programs in order to have confidence in services provided and to better understand the treatment and programming process. The Treatment Team works with the Advisory Committee to assess the team functionality, review all policies and procedures, and assess the overall functionality of the specialized docket.

2.11 Duties of Treatment Team Members

2.11.1 Specialized Docket Judge

The Judge is the key member of any successful Family Dependency Treatment docket program, and takes the leadership position in directing the Treatment Team's activities. As the chair of the Treatment Team and Advisory Committee, [Sup.R., Appx. I Std 1(B)], the Judge reviews and approves admission into the program, monitors treatment progress, orders sanctions and rewards, determines the advancement of a participant through the program's phases, and approves a participant's graduation or unsuccessful termination from the program. The Judge attends the Treatment Team and Advisory Committee meetings, and has discretion to decide the admission into, or termination from, the specialized docket in accordance with the written legal and clinical criteria for the specialized docket [Sup.R., Appx. I, Std3(B)]. The Judge is knowledgeable about treatment and programming methods, and their limitations [Sup.R., Appx. I, Std.7]. [Recommended Practice (B)] The Judge is the decision-maker especially concerning incentives, sanctions, phase advancement, successful completion or termination, and discussion of progress with the participant at status review hearings. Family Dependency Treatment Court of Hancock County is a single Judge Court.

2.11.2 Family Dependency Treatment Court Coordinator

The Coordinator facilitates, and participates fully in team meetings, provides input on incentives and sanctions, phase advancement, successful completion, or unsuccessful termination. The Coordinator is responsible for the administrative aspects of the program, and directly oversees, and maintains the daily operation of the Family Dependency Treatment Court of Hancock County. The Coordinator provides compliance monitoring of each participant. The Coordinator makes recommendations, as well as presents each case in the status review hearing.

2.11.3 Caseworker: Hancock County Job and Family Services

The caseworker assists the Treatment Team with monitoring the parent's compliance on the agency case plan. The caseworker has the most contact with the parents outside the program, including frequent home and office visits. The caseworker is in the best position to notify the Court

of any compliance problems on the child protection case plan. The caseworker may also make recommendations for rewards and sanctions, program advancement, and graduation or termination.

2.11.4 Guardian Ad Litem

The Guardian Ad Litem is an independent representative for the child(ren). They provide the voice of the child(ren) throughout the process. The role of the Guardian ad Litem also becomes significant outside the family recovery docket if it is necessary for the Court to hear visitation, reunification, or other child protection issues on the regular dependency docket.

2.11.5 Licensed Treatment Providers

Appropriately trained and licensed staff members of designated treatment agencies are responsible for the treatment element of the specialized docket program [Sup. R., Appx. I, Std.1(B)]. Clinicians from treatment agencies conduct the treatment assessments, provide clinical diagnoses, and develop treatment plans for program participants. Treatment clinicians attend the Treatment Team meetings, and status review hearings. The clinician provides progress reports to the Treatment Team, and makes recommendations regarding rewards and sanctions, program advancement, and graduation or termination from the program. Those who provide treatment for the specialized docket must be appropriately licensed and trained to deliver services. When possible, treatment providers will maintain separate tracks for specialized docket participants.

2.11.6 Prosecutor

The prosecutor will participate on the Treatment Team at weekly Treatment Team meetings, and status review hearings. Whether or not the prosecutor participates at the weekly Treatment Team meetings or status review hearings, the prosecutor checks the potential participant's background to ensure the legal aspects of the program's eligibility criteria are met. The prosecutor has the ability to object regarding whether the parent enters the program. Family Dependency Treatment Court of Hancock County incorporates a non-adversarial approach while recognizing the distinct role of the prosecutor in pursuing justice, and protecting public safety and victim's rights [Sup.R., Appx. I, Std.2(A)]. As a Treatment Team member, the prosecutor reviews the participant's progress, and recommends incentives, sanctions, or program termination for non-compliance. In most specialized docket programs, the prosecutor is more involved at the beginning of the program rather than weekly participation at the Treatment Team, and status review hearings. The role of the prosecutor also becomes significant outside the specialized docket program at times when it is necessary for the Court to hear visitation, reunification, or other child protection issues on the regular dependency docket.

2.11.7 Defense Attorney

The participant's attorney plays a vital role in the Family Dependency Treatment Court docket program. It is the participant's attorney who is responsible for ensuring the participant is

knowledgeable about the process, and fully apprised of the Family Dependency Treatment Court docket program requirements, including the consequences for not complying with the program. The participant's attorney also serves as a safeguard in determining whether the participant understands program requirements, and how participation in the program could affect the outcome of the dependency matter. Family Dependency Treatment Court of Hancock County incorporates a non-adversarial approach while recognizing the distinct role of attorney in preserving the constitutional rights of the Treatment Court docket participant [Sup.R., Appx. I, Std.2(B)]. As a Treatment Team member, the participant's attorney advises the Treatment Team of the participant's suitability, and willingness to participate in the program, in addition to providing input on participants' progress throughout the program. Usually the participant's attorney does not participate at the weekly Treatment Team meetings. However, the participant has the right to request their defense attorney's participation. When the defense attorney attends the weekly Treatment Team meeting the prosecutor also will need to attend [Sup.R., Appx. I, Std.2(C)]. The role of the participant's attorney also becomes significant outside the family treatment court docket when it is necessary for the Court to hear visitation, reunification, or other child protection issues on the regular dependency docket.

2.12 Participant Monitoring

2.12.1 Treatment Team Meetings and Status Review Hearings

Treatment Team meetings are held every Thursday from 1:00 P.M., to 1:45 P.M, at the Hancock County Juvenile Court. [Sup.R., Appx. I, Std. 6(A)]. Required attendees: Judge, Program Coordinator, Job and Family services caseworkers, and treatment providers. The defense counsel attends as requested by the participant. Status review hearings are held every Thursday at 2:00 P.M., at the Hancock County Juvenile Court. [Sup.R., Appx. I, Std6(B)]. During the participant's initial status review hearing, the Judge will provide an explanation of the response to compliance and non-compliance, including the criteria for termination. Team members who attend status review hearing reviews include the Judge, Magistrate, Program Coordinator, Job and Family Services case workers, and licensed treatment providers. The defense counsel and prosecutor attend as requested, and needed. The Program Coordinator distributes the weekly team schedule, prepares, and hands out the progress sheets that contain the weekly drug screen results.

By the Judge attending the team meetings and status review hearings the specialized docket incorporates on-going judicial interaction with each participant as an essential component of the docket. [Sup., Appx. I, Std.7(A)].

The Family Dependency Treatment Court of Hancock County requires participants to appear at status review hearings based on their phase. The specialized docket participants appear before the specialized docket Judge weekly during the initial phase of the specialized docket [Sup., Appx. I, Std, 7(B)(1)]. Thereafter, the specialized docket participant regularly appears before the specialized docket judge to review the participant's progress through the specialized docket [Sup.R., Appx. I, Std. 7(B)(2)]. By requiring participants to appear at status review hearings the

participant is educated as to the benefits of complying with the specialized docket and consequences for non-compliance [Sup.R., Appx. I, Std.6 Recommended Practice (A)].

The Family Dependency Treatment Court of Hancock County establishes weekly status review hearings to institute, and reinforce the specialized docket policies, and to ensure compliance of the participant. [Sup.R., Appx. I, Std.7 Recommended Practice (A)].

Not all participants are required to appear at each status review hearing depending on their phase and progress in the Family Dependency Treatment Court docket. Time between status review hearings is increased and decreased based upon compliance with treatment protocols and observed progress. [Sup.R., Appx. I, Std.10 Recommended Practice (B)].

2.13 Summary of Treatment

A treatment plan will be developed with the participant. Treatment plans are detailed and include the specific provider, the frequency of service, and the responsibilities of the provider and the participant. The types of services include, as needed; psychiatric, Intensive Outpatient services, medication, counseling, substance abuse programs, housing, transportation, and vocational training. During the treatment plan developmental process, the Treatment Team should consider, but is not obligated to follow, clinical assessments, or treatment recommendations. [Sup.R., Appx. I, Std.4 Recommended Practice].

Participants receive a treatment plan based on their individual needs, and provided services will incorporate evidence-based strategies.

Family Dependency Treatment Court of Hancock County treatment plans take into consideration services that are gender responsive, culturally appropriate, and effectively address co-occurring disorders [Sup.R., Appx. I, Std.5].

Provided services including case plans are appropriate and clinically necessary to the degree that available resources allow [Sup.R., Appx. I, Std.5 Recommended Practice (A)].

Participants shall have prompt access to a continuum of approved treatment and rehabilitation services upon admission into the docket. [Sup.R., Appx. I, Std.9 (A)].

The participant has the right to request attendance of defense counsel during the portion of the Treatment Team meeting concerning the participant. [Sup.R., Appx. I, Std.2(C)].

Family Dependency Treatment Court of Hancock County maintains a current treatment plan, and a record of activities. [Sup.R., Appx. I, Std.9(B)]. Treatment plans continue to develop throughout the HCFDTC to reflect the participant's changing needs based on program progress. [Sup.R., Appx. I, Std9(C)].

All treatment and programming will be provided by appropriately licensed and trained programs or persons to deliver such services according to the standards of their profession. [Sup.R., Appx. I, Std.9(C)].

All provided services including case plans are appropriate and clinically necessary to the degree that available resources allow. [Sup.R., Appx. I, Std.5 Recommended Practice (A)].

2.14 Summary of Program Requirements

Progression through the program is based on the participant's performance in the treatment plan and compliance with the phases.

In order to phase advance, the participant shall meet phase expectations outlined below, and submit an end of phase report.

In order to write end of phase report, the participant will meet with Coordinator to discuss the topic.

Phase advancement determination takes place after the report is written and submitted. The report is reviewed by the Treatment Team for recommendation, and the Judge will make the final decision of the phase advancement.

Phase advancement is not solely based on preset timelines.

2.15 Case Plans

Each participant will work with the Coordinator to complete a case plan, outlining goals that the participant needs to work toward over the course of six (6) months. Case plans will be reviewed by each participant every six (6) months, thereafter. The Coordinator will review previous goals, and update whether or not those goals were met, and establish new goals that the participant needs to work toward during the next six (6) months. Case plans will continue to be updated every six (6) months, for the duration of program participation.

As part of their case plan, each participant will be mandated to participate in pro-social activities. Ongoing participation in pro-social activities will be encouraged even after program graduation.

2.16 Phases

Phases are the steps by which a participant's performance and progress through the specialized docket are monitored. [Sup.R., Appx. I, Std.6(D)].

Progression through the program is based on the participant's performance in the treatment plan, and compliance with the program phases. [Sup.R., Appx. I, Std.6(D)].

The participant may advance to next phase by accomplishing all phase goals listed below.

When the participant has accomplished the phase expectations, the Coordinator meets with participant, and discusses the end of phase report. This is discussed in Treatment Team, and upon a consensus of the team, it is recommended to the Judge at the status review hearing. The Judge orders to prepare the end of phase report for the next status review hearing. At the following review hearing the participant reads the report in court, and is awarded phase advancement by the Judge.

Phase advancement is not solely based on preset timelines. [Sup.R., Appx. I, Std.6(D)].

The participant shall appear before the Judge weekly in Phase One (1). [Sup.R., Appx. I, Std.7 Recommended Practice]. HCFDTC targets high risk/high needs participants in status review hearings on a weekly basis.

Thereafter, the specialized docket participant regularly appears before the specialized docket Judge to review the participant's progress through the specialized docket. [Sup.R., Appx. I, Std.7 (B)(2)].

Participants will appear at least once per month in subsequent phases. [Sup.R., Appx.7 Recommended Practice (A)].

Time between status review hearings are increased or decreased based upon compliance with treatment protocols and observed progress. [Standard 10 Rec. Practice (b)].

2.17 Orientation

During the orientation interview with a potential participant, the Coordinator will discuss key aspects of Family Dependency Treatment Court of Hancock County, including duration, treatment services, treatment compliance, drug/alcohol screening, and consequences of non-compliance/unsuccessful termination from the program.

The Coordinator will provide a written description of program requirements. The potential participant will sign a consent to release and exchange information form to begin communication between Treatment Team members. Potential participants will also be given assistance in securing a substance abuse assessment appointment.

Following the completion of the substance abuse assessment the Treatment Team shall recommend the potential participant, as appropriate, to the Judge for participation in the program. The Coordinator will set up a meeting with the participant and their attorney to review the Handbook and Participation Agreement. Once both the attorney and the participant sign the participation agreement, the potential participant is invited to attend their first status review hearing. During the status review hearing, the Judge will review the requirements of the program with the participant and the Judge will sign the participation agreement.

After the first status review hearing, the participant provides a base line drug screen to establish clean days, and to have appropriate services implemented.

2.18 Phases of Treatment

2.18.1 Phase One (1)- Compliance Phase (Ten (10)- Twelve (12) weeks)

Goals

- Achieve abstinence.
- Achieve stabilization.
- Compliance with program expectations.
- Establish safety for family and dependents.

Expectations

- Appear in the Family Dependency Treatment Court of Hancock County one (1) time per week.
- Provide drug/alcohol screens (minimum three (3) times per week).
- Meet with Coordinator three (3) times per week.
- Follow case plan.
- Ongoing evaluation of needs, and address if necessary.
- Attend and participate in a minimum of three (3) pro-sober meetings per week.
- Attend and participate in treatment as recommended (minimum of nine (9) hours per week).
- Comply with all Court Orders.
- Begin MRT.
- Medication compliance.
- Participate in family team meetings.
- Cooperate with GAL, HCJFS.
- Cooperate with treatment.

Achievements

- Meet all Phase One (1) Expectations.
- Written essay to identify goals, and plan to reach them.
- Complete GAIN Assessment.
- Recommendation from Treatment Team.
- Twenty-One (21) consecutive days negative/clean/sober

2.18.2 Phase Two (2) – Program Engagement Phase (Ten (10)- Twelve (12) weeks)

Goals

- Maintain abstinence.
- Maintain stability and safety.
- Engage in the recovery process.
- Develop and participate in sober pro social activities.
- Enhance parenting skills.

Expectations

- Appear in Family Dependency Treatment Court of Hancock County every other week.
- Provide drug/alcohol screens (minimum three (3) times per week).
- Meet with Coordinator three (3) times per week.
- Obtain a recovery coach.

- Develop an educational/vocational/employment plan.
- Begin to develop/re-establish sober peer relationships.
- Attend and participate in a minimum of three (3) pro-sober meetings per week.
- Follow case plan.
- Attend and participate in treatment as recommended (minimum of six (6) hours per week).
- Attend and participate in approved parenting program.
- Comply with all Court Orders.
- Develop reliable and team approved transportation plan.
- Cooperate with GAL, HCJFS.
- Participate in family team meetings.
- Medication compliance.

Achievements

- Meet all Phase Two (2) Expectations.
- Written essay of progress with goals and plan.
- Recommendation from Treatment Team.
- Thirty (30) consecutive days negative/clean/sober

2.18.3 Phase Three (3) – Growth and Development Phase (Eight (8)- Twelve (12) weeks)

Goals

- Maintain abstinence.
- Maintain stability and safety.
- Practice recovery tools.
- Capacity to support self and children.

Expectations

- Appear in Family Dependency Treatment Court of Hancock County every three (3) weeks.
- Provide drug/alcohol screens (minimum of three (3) times per week).
- Maintain and keep contact with recovery coach.
- Attend and participate in a minimum of three (3) pro-sober meetings per week.
- Meet with HCFDTC Coordinator two (2) times a week.
- Follow case plan.
- Medication compliance.
- Attend and participate in treatment as recommended (minimum of three (3) hours per week).
- Develop relapse prevention plan.
- Continue progress on educational/vocational plans.

- Continue to participate in sober activities.
- Maintain sober relationships.
- Work with family coach as needed.
- Comply with all Court Orders.
- Cooperate with GAL, HCJFS.
- Maintain team approved reliable transportation.
- Participate in family team meetings.
- Complete MRT.

Achievements

- Meet all Phase Three (3) expectations.
- Written essay of relapse prevention plan and achievements.
- Recommendation from Treatment Team.
- Demonstrate capability to care for self and children.
- Sixty (60) consecutive negative days/clean/sober

2.18.4 Phase Four (4) – Maintenance Phase (Eight (8)- Twelve (12) weeks)

Goals

- Demonstrate recovery skills.
- Maintain stability and safety.
- Maintain capability to support self and children.
- Maintain relapse prevention plan.

Expectations

- Appear in Family Dependency Treatment Court of Hancock County one (1) time per month.
- Meet with Coordinator two (2) times per week.
- Provide drug/alcohol screens (minimum three (3) times per week).
- Utilize relapse prevention plan.
- Attend and participate in a minimum of two (2) pro-sober meetings per week.
- Continue involvement with recovery coach.
- Continue with educational/vocational plan.
- Follow case plan.
- Maintain sober peer relationships.
- Engage in treatment/aftercare as recommended.
- Comply with all Court Orders.
- Medication compliance.

- Work with family coach, if needed.
- Sustain permanent housing.
- Maintain team approved reliable transportation.
- Participate in family team meetings.

Achievements/ Graduation

- Meet and maintain goals and expectations of Phase Four (4).
- Written essay of what changes have occurred, aftercare plan, and future story.
- Recommendation for graduation by Treatment Team.
- One Hundred, twenty (120) consecutive days negative/clean/sober

2.18.5 Graduation/Transition

Ceremony with celebration.

Graduation/Transition.

Achievement Certificate.

2.19 Incentives and Sanctions

Incentives are individualized according to the specific treatment plan, and directly related to the participant's achievements, as certain milestones of the HCFDTC treatment plan are attained. Immediate, graduated, and individualized incentives govern the responses of Family Dependency Treatment Court docket to the participant's compliance. [Sup.R., Appx. I, Std 10]. Incentives are also tracked to ensure that the participant is awarded on a progressive basis.

Incentives are given when a participant completes assignments, and goals, and is showing overall progress and change toward living a sober and safe life. Below are examples of incentives that may be given to participants:

Achievement Certificates.

Gift Certificates.

Verbal praise from the bench.

Recognition dinner.

Decrease in frequency of meetings with Coordinator.

Sanctions in the program are given when an infraction has been committed by a participant. These sanctions are graduated, and are used as teaching and guidance for behavior improvement. Immediate, graduated, and individualized sanctions govern the Family Dependency Treatment Court of Hancock County's response to the participant's non-compliance. [Sup.R., Appx. I, Std. 10]. Graduated sanctions are used to help the participant conform behavior to program requirements. Sanctions are crafted in an individualized, and creative manner, as well as in a

progressive manner based on the infraction. Sanctions may be issued when there is non-compliance with both program protocol, and the treatment plan. Sanctions serve as a deterrent to negative behavior, as well as to encourage future compliance.

Please Note: In some instances, a relapse may indicate a potential issue with progress in treatment, and the Treatment Team may want to explore a clinical re-assessment of the type of treatment the individual is receiving, and whether or not there should be any treatment adjustments. A participant who tests positive at intake will not be sanctioned by the Court for up to ten (10) days, or until testing clean. Any change in the treatment plan, and/or sanction, are enforced and reinforced by the Judge. [Sup.R., Appx. I, Std.8 (C)].

Infractions are also tracked, along with resulting sanctions, so that additional sanctions can be applied in a graduated manner.

Table 2.1, Infraction Levels and Recommended Sanctions

Infractions	Sanctions		
Failure to attend Court appearances and	Warnings and admonishment from the		
treatment appointments.	Judge.		
Failure to follow specialized docket rules.	Demotion to an earlier specialized docket		
Failure to keep scheduled appointments	phase.		
with the probation officer, case manager, or	Increasing frequency of alcohol and drug		
any other team member.	testing.		
Non-compliance with other requirements of	• Increasing frequency of Court appearances.		
the treatment plan.	Refusing specific requests, such as		
Non-compliance with random alcohol and	permission to travel.		
drug screens or testing positive for alcohol	Denying additional or expanded privileges		
and drugs.	or rescinding privileges previously granted.		
• Failure to improve troublesome behaviors.	Increasing supervision contacts and		
Failure to meet employment or vocational	monitoring.		
goals as determined by the Treatment	Individualized sanctions, such as writing		
Team.	essays, reading books, or performing other		
Failure to keep other appointments as	activities to reflect upon unacceptable		
scheduled, such as those for public benefit	behavior.		
aid, health care benefits, housing	Requiring community service or work		
assistance, social security applications, etc.	programs.		
	Escalating periods of jail.		
	Termination from the specialized docket.		

[Sup.R., Appx. I, Std. 10; Recommended Practices (D)(1) through (12)].

3.0 PROGRAM COMPLETION

3.1 Criteria for Successful Completion [Sup.R., Appx. I, Std.3(A)]

3.1.1 Compliant Behavior

- Demonstrated period of abstinence from alcohol and drugs, evidenced by submitting clean screens:
- Became an active member in helping other participants maintain sobriety;
- Displayed a change in thinking, attitude, and beliefs;
- Successfully completed treatment or programming;
- Demonstrated ability to identify, and eliminate criminal thinking patterns;
- Successful completion of all phases (Phase requirements attached);
- Determination by the Treatment Team that participant is ready to graduate.

3.1.2 Accomplishments

- Maintaining sobriety from all mood-altering substances, as evidenced by clean screens;
- Completion of treatment;
- Relapse prevention plan established;
- Regular treatment appointment attendance;
- Completed all Family Dependency Treatment Court docket program requirements;
- Completed vocational or educational plan;
- Displayed responsibility for his or her behavior;
- Demonstrated stability in the community;
- Self-promoted for successful completion;
- Aftercare participation.

Upon request of the participant, review of the compliant behavior, and accomplishments, the Treatment Team will recommend successful completion. The Judge has discretion to determine when the participant will successfully complete the program.

There will be a special graduation ceremony once a participant has successfully completed all phases of the program:

- Successful completion of all phases.
- Determination by the Treatment Team that participant is ready to graduate.
- The Coordinator will bring all information regarding why the participant is being nominated for successful completion of the program.
- Treatment Team will review the information; the team will have a recommendation for the Court.

- Judicial decision that the participant successfully complete Family Dependency Treatment Court.
- The Coordinator will help discuss topics for end of program report.
- Disposition of underlying case.
- Award of a certificate given by the Judge.
- Graduation ceremony.
- Aftercare components.

3.2 Program Follow-up Expectations

Once a participant successfully completes all phases of HCFDTC, the following requirements are expected:

- Continued sobriety;
- Keep child(ren) free from abuse, neglect, and dependency.

3.3 Termination

Family Dependency Treatment Court of Hancock County Judge has discretion in determining termination from the specialized docket based on the written termination criteria. [Sup.R., Appx. I, Std.3(B)].

3.3.1 Unsuccessful Termination [Sup.R., Appx. I, Std.3(A)].

Participants may be negatively discharged from the program. Program termination criteria may include, but are not limited to the following:

- Ongoing non-compliance with treatment, or resistance to treatment.
- New serious criminal convictions.
- A serious specialized docket infraction or series of infractions.
- A serious probation violation or series of probation violations.

The procedure for unsuccessful termination includes:

- Notice to the participant;
- Hearing concerning the unsuccessful termination with the participant represented;

Unsuccessful terminations may result in:

- JFS filing a Motion for Permanent Custody.
- Additional contempt filing on case plan.

Depending on the circumstances, the participant may be subject to jail and other penalties.

3.3.2 Neutral Discharge [Sup.R., Appx. I, Std.3(A)]

Neutral Discharge (Participant is discharged through no fault of their own but due to the following) may include, but is not limited to:

- Terminal illness;
- Participant moves out of county;
- Participant's needs are greater than the program;
- Military deployment;
- Serious injury or incapacitation;
- Serious mental health condition;
- Other factors that may keep participant from meeting requirements;
- Procedurally, the participant will have a hearing in which they would be represented.
- A neutral discharge may not have any effect on the dependency case.

3.3.3 Inactive Status

Inactive status is when a participant is still considered a participant in Family Dependency Treatment Court, but is unable to attend regular status review hearings due to the following:

- Placed in a residential facility and cannot be transported for status review hearings.
- In need of further assessments or evaluations to determine if the specialized docket is beneficial.

3.3.4 Termination/Discharge Hearings

Participants may be terminated or neutrally discharged from the Hancock County Family Dependency Treatment Program based upon recommendation by the Family Dependency Treatment Court Team. A staffing is held between the Family Dependency Treatment Court Team, and a course of action is recommended. The case will be set for a hearing, and the team will present its recommendation to the Judge, who will make the final decision regarding termination or neutral discharge.

4.0 SUBSTANCE MONITORING POLICY AND PROCEDURES

4.1 Purpose

As a part of ongoing supervision by the Hancock County Court of Common Pleas, Juvenile Division, it will be the duty of the Family Dependency Treatment Court of Hancock County Coordinator to arrange for appropriate drug testing on any participant within the program. The drug test will determine whether there is an intoxication substance present or not in the sample. The Family Dependency Treatment Court of Hancock County monitors a participant's substance use by random, frequent, individualized, and observed alcohol and drug testing protocols. [Sup.R., Appx. I, Std.8(B)]. The Coordinator will utilize Random.org to ensure the truly random nature of the sample collection.

The Family Dependency Treatment Court of Hancock County has written policies and procedures for sample collection, sample analysis, and result reporting. These policies and procedures address and contribute to the reliability and validity of the testing process. See below. [Sup.R., Appx. I, Std. 8(A)].

4.2 Sample Collection

All testing shall be random, frequent, and observed. Each participant is expected to submit to a drug screen on a random, weekly basis (minimum of three (3) times per week). The Coordinator will utilize Random.org to ensure the truly random nature of the sample collection. The participant will contact the Coordinator daily to inquire whether or not they are expected to submit to a screen that day. When the participant is informed that he/she needs to provide a sample, it is their responsibility to report for their drug screen. The participant is expected to make the appropriate arrangements to accommodate their drug screen and is expected to arrive promptly to give the sample (within thirty (30) minutes). Screens will be conducted at a location, and during a time frame to be determined by the Family Dependency Treatment Court of Hancock County.

The drug screens test for substances including: alcohol, metabolites, synthetic cannabinoids, cannabinoids, amphetamines, opiates, benzodiazepines, Buprenorphine, Ecstasy (MDMA), Tricyclic Antidepressants, and cocaine. All alcohol and drug testing is individualized based on participant's needs. Testing includes the participant's primary substance of dependence, as well as a sufficient range of other common substances. [Sup.R., Appx. I, Std.8(E)]. Drug testing may include monitoring for compliance of legally prescribed medications.

4.2.1 Responsibility for Administering Tests

Tests are administered randomly. The Coordinator will collect tests on a random basis. Any other appropriately trained staff may also collect tests. Tests may also be collected at counseling sessions. All staff that come into contact with the participants will be trained on drug testing procedures and have testing kits.

4.2.2 Test Observation

Staff members, who have been trained, will observe urine tests. In addition to observation, temperature strips are used on the testing bottles. Participants are sometimes searched for bottles of urine or substances they may be carrying to change or adulterate their tests. If such substances are found, the test is counted as positive. Female staff and team members are used to test female participants and male staff and team members are used to test male participants.

4.2.3 Confirmation

A field test is sent to the laboratory for confirmation. Tampering with tests by participants will be deemed a positive test result.

4.2.4 Diluting or Altering a Sample

If lab results indicate that the participant may have tried to flush out drugs, the test will be deemed positive, and participants will be immediately sanctioned.

4.2.5 Failure to Submit a Sample

Participants who miss a test, or are unable to produce a test, or avoid the test in other ways after having been given ample opportunity to perform, will be immediately sanctioned, in accordance with the guidelines for positive tests.

Participants that fail to give a sample within thirty (30) minutes shall be documented as positive, and may be sanctioned with the guidelines for positive tests.

4.2.6 Submitting an Adulterated Sample

Participants who submit an adulterated sample will be considered positive, and will be immediately sanctioned. Submitting the sample of another individual is treated as a positive test, and will be immediately sanctioned.

4.2.7 Documentation

Drug screens are documented in the database and reported to the Treatment Team weekly. The results are tracked on a long-term basis.

The Court is immediately notified when the participant: tests positive, fails to submit to testing, submits an adulterated sample or the sample of another individual, or dilutes the sample. [Sup.R., Appx. I, Std.8(D)].

Failing to submit to testing, submitting an adulterated sample or the sample of another individual, or diluting the sample is treated as positive tests, and immediately sanctioned. [Sup.R., Appx. I, Std.8(D)].

Please Note: In some instances, a relapse may indicate a potential issue with progress in treatment and the Treatment Team may want to explore a clinical re-assessment of the type of treatment the individual is receiving, and whether or not there should be any treatment adjustments. A participant

who tests positive at intake will not be sanctioned by the Court for up to ten (10) days or until testing clean (these matters will be enforced/reinforced by the docket Judge). [Sup.R., Appx. I, Std.8(C)].

Drug testing can and will occur on a random basis and can be administered in the field or at other location any time (weekday or weekend).

4.2.8 Random Testing

Drug tests may be increased, or decreased, in accordance with the participant's sobriety levels, and behavior in the program. Drug testing takes place at least three (3) times weekly. The Coordinator will utilize Random.org to ensure the truly random nature of the sample collection. Drug testing plans are discussed with counselors and the Treatment Team in accordance with the time of year, holidays, and other relapse triggers.

Participants are tested for alcohol using scientifically validated technology. [Standard 8 Recommended Practice].

Random screening requires a system to achieve true randomness so the participant cannot detect a pattern, and expend efforts to continue using while disguising or masking the true results. The Coordinator will utilize Random.org to ensure the truly random nature of the sample collection.

If the laboratory's analysis also indicates use of substances, the test shall then be considered positive; a sanction for the positive test, and will result after confirmation.

If the laboratory's analysis indicates no substance use, the test shall be considered negative.

4.2.9 Negative Screen

A drug screen shall be considered negative when the lab results indicate there are no illegal substances found in the urine provided by the participant. All negative screens results are logged.

4.2.10 Positive Screen

A drug screen is considered positive when the participant provides a sample that indicates use of controlled substances; or admits to using the controlled substance.

If the participant admits to substance use, the participant will be required to sign a sworn statement, indicating the facts surrounding the substance use incident;

- Fails to appear when they are required;
- Submits an adulterated sample;
- Mere possession of intoxicating substances or paraphernalia.

4.2.11 Procedure for Storing and Logging Positive Drug Screens

As soon as a drug screen indicates substance use, the staff member shall write the following on the test:

- Participant name;
- Time and date screen was given;
- Name of the staff member who administered the test.

4.2.12 Procedure for Secondary Analysis

When secured, the container must indicate the date and time the sample was given, the participant name, and the staff members name.

The staff member shall then ship the sample to the laboratory, according to the laboratory's specifications to have the sample confirmed by the lab.

The results of the original drug screen shall be logged ON PAPER as a positive screen.

The results of the drug screen shall not be logged until the results are obtained from the laboratory's secondary analysis.

If the secondary analysis indicates a negative screen, the paper log shall be corrected to so reflect the results.

4.2.13 Contagious Participants

Infection with contagious diseases will not in any way act to prevent or preclude urinalysis. The Family Dependency Treatment Court of Hancock County docket staff will note the specific infection such as tuberculosis, hepatitis, syphilis, and human immunodeficiency virus (HIV). Family Dependency Treatment Court of Hancock County docket staff will place the information on the test request, on the container label, and call the infection to the attention of others who may also be testing the participant, so that specific precautions may be taken in handling the sample.

5.0 PROFESSIONAL EDUCATION

5.1 Overview

The Family Dependency Treatment Court of Hancock County Docket Advisory Committee has established the importance a continuing education plan for the family Treatment Court Docket Treatment Team in order to promote effective Treatment Court docket planning, implementation, and operations. [Sup.R., Appx. I, Std.11]. The family Treatment Court docket will provide opportunities for professional education for all members of the Treatment Team and Advisory Committee. Cross disciplinary training will include a variety of topics including: the family Treatment Court docket model; family Treatment Court docket processes; best practices in substance abuse and mental health services; drug trends and alcohol and drug testing; for counsel on the non-adversarial approach of the family treatment court docket model; training on community resources; and such other training as is determined to be necessary by the Judge or Treatment Team.

5.2 Training Opportunities

Training opportunities will be provided annually. Every year, the Coordinator or Court Administrator will send a survey to all Treatment Team members regarding their requests for training for the year. A proposed training schedule will be proposed for the Judge's approval. Training opportunities will also include prosecutors and defense attorneys especially concerning the non-adversarial approach of family Treatment Court dockets and family Treatment Court docket processes.

6.0 EFFECTIVENESS EVALUATION

6.1 Supreme Court Reporting Data [Sup.R., Appx. I, Std.12(A)]

The Family Dependency Treatment Court of Hancock County docket shall comply with reporting data as required by the Supreme Court of Ohio. The family Treatment Court will report data that includes information on assessing compliance with these standards.

6.1.1 Ongoing Data Collection [Sup.R., Appx. I, Std.12(B)]

Each specialized docket shall engage in ongoing data collection, in order to evaluate whether or not the specialized docket is meeting its goals and objectives. Here, the specialized docket describes its data collection policies and procedures for this standard. The Court will utilize the data information to track cases, create reports for grant reporting, annual report data, grant application documentation and outcome measurement. The data collected will be utilized by the Advisory Committee as part of the functionality review [Sup.R., Appx. I, Std.11 Recommended Practice (B)].

6.2 Conducting Formal Evaluations

The Court Evaluator will be involved in all phases of planning to ensure the effective, and ongoing development of data collection, and the process and outcome evaluation as well as collect, record, and evaluate all data essential for evaluating the program. The evaluator will complete all necessary evaluation reports, and forward them to the appropriate entity. The evaluator will work closely with the team to assist in improving system coordination and accessibility, enhance the program, and to increase program capacity.

The following data will be gathered by all program/service providers to measure the goals, objectives, and measures, and will be incorporated into the process/outcome evaluation:

- Number of negative urinalysis results and negative breath-analysis results;
- Number of participants committing new offenses;
- Number of clients attending sober support services;
- Number of clients who continue to move towards satisfactory completion of their individual treatment plans;
- Number of clients who continue to move towards satisfactory completion of their individually identified educational/vocational goals;
- Number of clients who show documented progress towards satisfying any court imposed orders, as documented by Coordinator.

6.3 Reporting

All data collected will be entered within seven (7) business days of the forms being completed with each adult. Each adult will participate in GAIN interviews during the intake process.

6.4 Protection of Identities

Confidentiality is vital in establishing how data will be collected, stored, and how the use of the information collected will be shared. All client evaluation information will be coded with a Court identification or ID number for confidentiality purposes. Data access is given only to designated staff based on a need to know basis.

6.5 How Data Will Assure Continuous Quality Improvement

As data becomes available on the impact of the Hancock County Family Dependency Treatment Court, the Coordinator will share this information during weekly team meetings. Data will guide the team in deciding what is going well and what needs improvement or change. Exit interviews will be conducted with any adult who leaves the program to determine what might have made the difference for them.

The status of the Family Dependency Treatment Court of Hancock County initiative and its progress towards the objectives will occur in August of every year with the combined Treatment Team and Advisory Committee. Outcome and process questions will be developed by the evaluator to guide the discussion. Process questions to be addressed will include how closely the implementation matched the plan, what deviations occurred and why, the effects of the deviations, and an analysis of service delivery and costs. The evaluator will be present for the evaluation summits.

In some regards, continuous quality improvement happens in the weekly team meetings, as individual cases are reviewed, individual outcomes analyzed, and strategies refined. The program model inherently requires frequent monitoring through the progression of program stages, and inherently solicits continual input from the Judge, therapists, and participants. The addition of the data obtained through the GAIN assessment tools will help steer this process, and will provide better data upon which to base decisions.

7.0 Appendix

7.1 Local Rule [Sup.R., 36.20(A)]

Local Rules of Court Hancock County Juvenile Court Hancock County, Ohio

RULE 47 SPECIALIZED DOCKETS

The Court establishes Specialized Dockets in conformance with Sup.R. 36.20 of the Rules of Superintendence for the Courts of Ohio. For the purpose of decreased recidivism and increased family stability, the Court, on its own motion, may refer appropriate cases to any special Court program. Each program will coordinate agency collaboration, provide regular judicial oversight, and assess progress on goals. Each Specialized Docket is effective upon certification by the Supreme Court of Ohio, on or after September 1, 2016.

47.2 Family Dependency Treatment Court

(A) Establishment of the Family Dependency Treatment Court Docket

The mission of the Hancock County Family Dependency Treatment Court is to serve the best interests of children by providing collaborative evaluation and treatment services for substance abusing parents who have lost, or are at risk of losing custody, of their children to abuse, neglect, or dependency. These intensive services will improve the mental health of parents and the well-being of their children through intervention and treatment in a holistic, strength-based community-supported justice system. Specific program goals, with their performance measures, include:

- Goal 1: To reduce the number of days children are in out-of-home care, whether it is kinship or foster care.
 - <u>Performance Measure:</u> The current number of days children are in out of home care will be reduced by 30% within an eighteen (18) month period.
- Goal 2: To increase the number of participants that successfully complete all phases as specified in order.
 - <u>Performance Measure 5</u>: 70% of program participants who enter the program will successfully graduate from the program.
- Goal 3: To decrease new substantiated allegations of child abuse or neglect during participation in and for one (1) year following completion of the program.
 - <u>Performance Measure 3</u>: Fewer than 35% of program participants, after entering the program, will re-offend (be arrested or seen at Common Pleas/Municipal Court, Adult division for a new offense, or Violation of a Court Order) during their participation in the program and for

(B) Placement in the Family Dependency Treatment Court Docket

Family Dependency Treatment Court of Hancock County targets those who are in the high risk/high need category. The program's focus is on parents, single or married, who are evaluated and diagnosed as having substance abuse/dependency issues, coupled with a filing of abuse, neglect, or dependency regarding one (1) or all of their children. Client must be a willing participant and will not be excluded from the program based on race, ethnicity, religion, sexual orientation, gender, or disability. The Family Dependency Treatment Court serves those individuals who have been:

- Legal residents of Hancock County.
- Identified as having certain behavioral health issues (mental health, substance dependency, substance abuse, etc.).
- Referred to Family Dependency Treatment Court of Hancock County.
 Written Legal Eligibility Criteria
- The types of cases that may make an individual legally eligible for the treatment court program. Eligibility requirements include: must be an adult resident of Hancock County; have risk factors identified on the Global Appraisal of Individual Needs (GAIN) that indicate their need for the program, a parent/guardian of child(ren) on whom Hancock County Children Services has filed a complaint of abuse, neglect, or dependency. Violent and sex offense cases will be carefully reviewed on a case-by-case basis to determine eligibility.

Written Legal Ineligibility Criteria

- The types of cases that may make an individual legally ineligible for the program. Disqualifying factors include: charges involving sex crimes; charges involving the use of a weapon; violent offenses involving a victim with a serious injury.
- If the potential participant appears to be a candidate and meets legal eligibility criteria, then the potential participant is referred for clinical assessment.

Written Clinical Eligibility Criteria

- Written clinical eligibility criteria are collaboratively developed, reviewed, and agreed upon by the Advisory Committee.
- Clinically assessed to be in need of an intensive outpatient level of care and as being drug and/or alcohol dependent and because of this dependency, cannot safely and effectively parent his/her child(ren).

 Cognitively able to participate in Family Dependency Treatment Court of Hancock County evaluation process, treatment recommendations and all services, and activities as deemed necessary.

Clinical Ineligibility

There are certain criteria that might make a participant ineligible. A clinical diagnosis of a severe mental illness that would hinder the ability to complete program requirements; and/or clinical diagnosis of a developmental disability that would prohibit the client from completing program requirements.

Decision on Admission or Termination

The Family Dependency Treatment Court Judge shall have discretion to decide the admission into and termination from the treatment court program in accordance with the written legal and clinical eligibility criteria for Family Dependency Treatment Court of Hancock County. Cases are reviewed on an individual basis.

(C) Case assignment in Multi-Judge Courts

Hancock County has only one (1) Juvenile Court Judge. This Judge usually presides over all Family Dependency Treatment Court hearings. However, the Court's Magistrate may, on occasion, fulfill this role for the Judge.

(D) Family Dependency Treatment Court Docket Case Management

To be referred to the Family Dependency Treatment Court Docket, HCJFS must file an abuse, neglect, or dependency complaint based on circumstances in which substance abuse is indicated. If the potential participant meets the legal and clinical eligibility criteria, the Judge makes the decision to admit or deny the potential participant into the specialized docket program. The participant meets with the Treatment Court Coordinator to fill out the forms required for the specialized docket, including appropriate releases of information. Program requirements, as indicated in the Program Description, are reviewed. A Participation Agreement is signed and a Participant Handbook is given to the participant.

The specialized docket monitors each participant's performance and progress through weekly Treatment Team meetings and status review hearings. Team members may engage in ongoing communication outside of the Treatment Team meetings to discuss information about the participant's overall performance, either through phone calls, email messages, or face to face contact, but written updates are shared at the weekly status review meeting. At this meeting, the group discusses the progress each participant has made since the last hearing and voices an opinion on possible incentives/sanctions earned. All sanctions are used in a graduated manner. The Judge has the authority to make the final decisions on same. The specialized docket incorporates ongoing judicial interaction with each participant on at least a monthly basis, although new participants are seen weekly. The frequency of a particular participant's hearings depends upon their progress

through the program. Hancock County Family Dependency Treatment Court consists of four (4) phases. Advancement is not solely based on preset timelines, but there are a minimum number of hearings required to successfully complete each step. Progression through the program is based on the participant's compliance with school attendance and other Orders made by the Court.

(E) Termination from the Family Dependency Court Docket

Participants who have advanced through all four (4) phases of the program are eligible for successful completion of the program. Team members may give a recommendation for program completion, but the Judge determines whether a participant has successfully completed the program.

The specialized docket Judge also has the discretion to decide a participant's unsuccessful termination from the program. This decision would be based on a participant's ongoing non-compliance with program rules, despite the use of graduated sanctions, and/or a new child abuse and/or neglect charge that is serious in nature. Upon unsuccessful termination from the program, possible additional penalties may include further JFS filing a motion for permanent custody, and/or additional contempt filing on case plan.

A participant may also be discharged from the program with a neutral status if they move out of the jurisdiction of the Court, have/develop a serious medical/mental health condition that prevents their active participation in the program, or other reason deemed appropriate by the Judge.

7.2 Memoranda of Understanding with Relevant Parties [Sup.R.,Appx. I, Std.1(A)]

Ohio SSRP - Demonstration Jurisdiction Memorandum of Understanding

This Memorandum of Understanding (MOU) is entered into between Hancock County's: Juvenile Judge,

The director of Public Children's Services Agency (PCSA),

The director of the Alcohol, Drug and Mental Health (ADAMH) Board, and

The parties agree to form a collaborative partnership to implement the Office of Juvenile Justice and Delinquency Prevention Statewide System Reform Program initiative (SSRP).

In October 2014, Ohio became one of five states awarded federal funds from an Office of Juvenile Justice and Delinquency (OJJDP) initiative entitled, Statewide System Reform Program (SSRP). SSRP supports Ohio's efforts to increase the scale (number of families served) and scope (breadth of service array to meet family needs) of existing Family Drug Courts (FDC) and the integration of common FDC practices into all child welfare cases affected by parents with substance use disorders. These FDC

1. Adopt protocol to promptly identify a family's treatment needs.

A significant number of families in child welfare cases are affected by substance use and may also have co-occurring mental disorders yet they are not consistently identified early in the case.

Assure families are promptly placed in accessible, appropriate treatment.

The period following first contact with Public Children Services Agency (PCSA) provides a critical window for intervention and to ensure clinically-appropriate treatment and engagement services are provided.

Assure families are given access to a continuum of evidence-based alcohol, drug, and mental health services.

The continuum of services includes outpatient, residential, medication-assisted treatment, and other support services that may be needed. The therapeutic team (treatment providers, judge, lawyers, case managers, supervisors and other program staff) maintain frequent and structured communication to ensure swift and coordinated responsiveness. Co-occurring factors (e.g., mental disorders and concrete needs such as housing and employment services) are considered in treatment and case planning.

Increase judicial oversight.

practices are:

The courtroom, officers and attorneys are a critical component of the therapeutic experience and earlier and frequent judicial interaction with parents can improve outcomes. Ongoing judicial supervision communicates to families that someone in authority cares about them and is holding them accountable. Effective judicial oversight includes judicial officers who are knowledgeable about treatment methods, recovery monitoring, and the limitations of both.

Encourage institutional communication and administrative data-sharing to effectively measure the achievement of treatment goals and to gauge effectiveness.

Case management and monitoring systems provide timely and accurate information about program participants and operations for all stakeholders. Process evaluations (measuring progress in meeting operational/administrative goals) and outcome evaluations (measuring progress toward long-term goals) are implemented to identify program improvements.

 Facilitate Cross-system collaboration at the case-level, participate in collaborative training, identify system barriers and propose solutions to senior administrators who oversee implementation and monitor outcomes.

Trainings ensure that both senior managers and case-level participants understand cross-system roles and responsibilities, identify needed systems change, resolve conflict and maintain a high level of professionalism with practice protocols that promote collaboration.

This effort in Ohio will assist state policy makers to identify systems change and practice improvement opportunities and is supported by the OJJDP technical assistance provider, Children and Family Futures. Ohio SSRP is currently seeking a cohort of 3 demonstration sites focused on increasing the scale and scope of their FDC and 3 demonstration sites focused on infusing effective practices in dependency cases.

I. WHAT'S IN IT FOR MY COUNTY?

- 1. Opportunity to provide leadership to other Ohio counties to improve outcomes for families.
- No-cost training on evidence-based practice to improve family outcomes in your dependency cases from national child welfare and substance abuse experts, Children and Family Futures.
- Technical assistance concerning methods for reducing caseload costs, locating funding, and/or costsharing.
- 4. County-wide data analyses of your current practices and your post-integration practices.
- 5. Technical assistance to improve administrative data for program monitoring across systems.
- Development of a peer network across demonstration sites to share innovative strategies, materials, and practices to improve family outcomes and cost-effectiveness.

II. ANTICIPATED TIMELINE AND REQUIREMENTS

The demonstration counties will participate in testing strategies and providing feedback to the state SSRP team for approximately 24 months. Counties are expected to identify a project liaison who will be in a minimum of monthly communication with the state SSRP team and provide information on data and lessons to the larger Ohio effort. There are 4 phases:

Phase 1: Assessment of Need and Readiness for Change Fall 2015: Activities during this stage are designed for counties to clearly define their needs, the issue(s) they intend to resolve and their capacity to do so. This phase forms the foundation for successful engagement and retention of partners, policy makers and other critical stakeholders. Participants in this phase will increase their awareness of the issues and their understanding of the need for change by November 16.

Phase 2: Strategic Planning and Capacity Building Winter 2015: Using the data and information gathered during the first phase, SSRP and county staff will work together to develop mutual priorities for practice and policy changes. The sites will develop a strategic plan for pilot testing 1-2 practice or policy changes in Phase 3.

Phase 3: Testing Implementation Spring 2016 – Spring 2017: Phase 3 is focused on pilot testing program, practice or policy changes identified in Phase 2, and assessing and making the necessary adaptations and adjustments needed. Training all stakeholders, developing a common language and gaining a deeper understanding of each other's systems is critical in this phase. Using the principles of rapid-cycle testing to accommodate implementation-specific evaluation, counties will pilot their change strategies to obtain feedback about what works and what does not and to ensure that the project's

outcomes reflect the improvements that were envisioned. While this feedback loop on product use and improvement is expected to be continuous, the key benchmark of Phase 3 is the development and testing of products for broad dissemination, including statewide distribution with follow-on resources. Participants in Phase 3 demonstrate knowledge of and ability to make cross-system changes and institute collaborative practice(s), attend a demonstration county meeting to share that knowledge with other Ohio counties and the SSRP state leadership.

Phase 4: Follow up, Monitoring, Aftercare and Dissemination Spring 2017 – Summer 2017: Lessons from demonstration counties will be incorporated into Ohio's Spring, 2017, application to OJJDP for funds to more broadly implement the successful strategies garnered in Phase 3. Phase 4 will include periodic check-ins with the counties designed to reinforce and assist in sustaining change and to address remaining or emerging challenges. Counties will be expected to provide status reports to include follow-up data. This phase is specifically designed to ensure the work developed during Phase 3 is being sustained.

III. RESPONSIBILITIES

The parties understand that the Ohio SSRP mission is to use cross-system collaboration to increase the scale and scope of FDCs across the state or infuse/integrate family drug court practices – practices we have learned work for all families in dependency court – into all of Ohio's dependency cases.

The parties agree to participate and implement the provisions of this agreement.

The parties understand that should they be selected as a demonstration site they will convene a team of stakeholders to attend the one-day Demonstration Site Kick-Off Meeting to be held on November 16, 2015 in Columbus, OH (travel expenses will be paid.

The parties indicate, through their signature below, that they would like their county to be considered a demonstration site for the OHIO SSRP testing phase (Fall 2015 – Fall 2017).

OUR COUNTY'S DESIGNEE FOR FOLLOW UP IS:

Diana Hoover, Hancock Co. JFS Diana.hoover@jfs.ohio.gov	9/23/15
Name E-mail Date	
Littleble Blens 9/22/15	
Juvenile Court Judge Pate	
Diane SHO2 9/22/15	
County Director of JFS or PCSA Date	
Pur S/ 9/22/15	
ADAMH Board Director Date	

June 1, 2016

The following individuals serve on the Advisory Committee for the Hancock County Juvenile Court Specialized Docket Program. Each member is committed to adopting policies and procedures consistent with the goal of intervention and treatment in a strength-based, community-supported justice system to serve the best interests of children by restoring the sobriety of their parents and improving the mental health and well-being of the family by creating a Family Dependency Treatment Court.

Joles of	Gub Dan
Kristen K. Johnson, Judge	Century Health
Family Resource Center	A Renewed Mind
Children's/Services	Open Arms
Findlay Police Department	Mushaul E. Nullman Hancock County Sheriff's Office
Contraction of the separation	Hancock county Shellin's Office
ADAMHS O SOU	Mark C. Miller Hancock County Prosecutor's Office
Elizabeth Kelly, MDiv, MSW, LSW Blanchard Valley Health System	Hancock County Public Defender
	Thou ESSEL
Findlay Municipal Court	Center for Safe and Healthy Children
Lich J Cole	Mak & Spank
LASA	Hancock County Commissioner

7.3 Advisory Committee Contact Roster [Sup.R., Appx. I, Std. 1(B)]

7.3 Advisory Committee Contact Roster [Sup.R., Appx. 1, Std. 1(B)]			
Tina Pine	Ashley Ritz	Abby Hefflinger	
Century Health	Open Arms	Public Defender	
419-425-5050	419-420-9261	419-424-7276	
tpine@centuryhealth.net	aritz@openarmsfindlay.org	amhefflinger@co.hancock.o	
		h.us	
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Findlay Police Department	ADAMHS	Hancock County Pros.	
419-424-7194	419-424-1985	Office	
ghorne@findlayohio.com	pstuby@yourpathtohealth.or	419-424-7099	
	g	rsnewman@co.hancock.oh.	
		us	
TZ, TDI	TO! 1 (1 77 1)	M 1 C 1	
Kim Thomas	Elizabeth Kelly	Mark Gazarek	
BVHS	BVHS	Hancock County	
419-423-5454	419-429-6463	Commissioner	
kthomas@bvhealthsystem.org	ekelly@bvhealthsystem.org	419-424-7045	
		mdgazarek@co.hancock.oh.	
		<u>us</u>	
Lamas Cabulta	Lill Changhualran	Diana Haarran	
James Schultz	Jill Stonebraker	Diana Hoover	
A Renewed Mind	Children's Services	Hancock County JFS	
419-261-6564	419-429-8081	419-429-8073	
jschultz@arenewedmindservice	jill.stonebraker@jfs.ohio.gov	Diana.hoover@jfs.ohio.gov	
S.org Pat Hardy	Melissa Meyer	David Beach	
Century Health	Family Resource Center	Findlay Municipal Court	
419-425-5050	419-230-4840	419-424-7807	
	meyerm@frcohio.com	ddbeach@findlayohio.com	
phardy@centuryhealth.com	meyerni@ircomo.com	ddoeach@ffidiayoffio.com	
Brian Guerriero	Tom Blunk	Kristen Johnson	
Century Health	Center for Safe and Healthy	Juvenile Court	
989-429-2210	419-425-1475	419-424-7066	
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	.org	<u>us</u>	
Karmen Lauth	Kim Freytag	Leah Cole	
Children's Services	CASA	CASA	
419-429-8034	419-957-4872	419-348-5670	
Karmen.lauth@jfs.ohio.gov	kfreytag@casahc.org	lcole@casahc.org	
Michael Heldman	Tammy Pike	Shawn Carpenter	
HCSO	Juvenile Probation	Court Administrator	
419-424-7097	419-424-7066	419-424-7066	
meheldman@co.hancock.oh.us	tdpike@co.hancock.oh.us	srcarpenter@co.hancock.oh.	
		<u>us</u>	

7.4 Participation Agreement [Sup.R., Appx. I, Std. 1(C)]

IN THE COURT OF COMMON PLEAS OF HANCOCK COUNTY, OHIO FAMILY DEPENDENCY TREATMENT COURT

	: Case No
IN THE MATTER OF:	:
	:
	:
Name of Child	: Participation Agreement
	: Family Dependency Treatment Court
This matter is before the Court upon consideration, and their willingness to a family Dependency Treatment Court program participation agreement. The point of entry into Dependency Treatment Court occurs at the erby valid signature of stating such. The goal of Treatment Court is to provide collaborative evaluations abusing parents who have lost or a child (ren) due to abuse, neglect, or dependent	o volunteer into the Hancock County and adhere to the established to the Hancock County Family and of these official Court proceedings and the Hancock County Family Dependency aluation and treatment services to re at risk of losing custody of their
The Hancock County Family Dependency Treadversarial process designed to affect positive	-
Participant, has the Hancock County Family Dependency Trea agrees to comply with the Hancock County Fa and expectations. Participant has acknowledg	ntment Court. Participant understands and mily Dependency Treatment Court terms

that it has been reviewed with them. The participant has the right to request attendance of defense counsel during the portion of the treatment team meeting concerning the participant. Sup. R. Appx. I. Std.2 (C).

Elements of Agreement

1. Rights to be Waived- I understand my rights as set forth and provided by the United States Constitution; the Ohio Constitution and the Ohio Revised Code as set forth below. Further I have read the same and have had the same explained to me by the Court and/or my counsel. Therefore, I acknowledge the below rights and voluntarily waive the same.

Due to my child(ren) having been adjudicated abused, neglected, or dependent, I have been offered and accept the opportunity to participate in this program. In doing so, I voluntarily waive the following rights and accept the indicated terms:

- The right to prior written notice of hearings and service of process, including prior written notice of Contempt or Show Cause Hearings;
- The Court may impose immediate sanctions for non-compliance with the requirements of the Hancock County Family Dependency Treatment Court;
 - a. These sanctions may include incarceration or possible termination from the program;
 - b. As a condition of this waiver, any sanction imposed will be statutorily permitted by law and will be assessed on a graduated scale, depending on the severity of the non-compliance.
- The right of confidentiality, including medical records and the physician-patient privilege;
 - a. I waive any objections to communications between the treatment providers, Hancock County Job and Family Services, the Court and other agencies outside of my presence or the presence of my attorney;
 - I do not waive any right to privacy or confidentiality regarding any aspect of my case or treatment concerning communications with any person or agency that is not affiliated with the Hancock County Family Dependency Treatment Court;
- 4. I understand that any and all information gathered through my participation in the Hancock County Family Dependency Treatment Court may be disclosed to Hancock County Family Dependency Treatment Court team members;
- I understand the Judge will preside over the Hancock County Family Dependency Treatment Court;

- I understand a different Judge or Magistrate may hear issues related to my dependency case;
- 7. I hereby acknowledge that I have discussed these waivers with my attorney and that I completely and fully understand these waivers and their significance. I freely and voluntarily waive the rights as specified in this waiver as long as I am a participant in the Hancock County Family Dependency Treatment Court

I understand that entrance into the Hancock County Family Dependency Treatment Court is voluntary. However, once I agree to participate in the program, I will be Court ordered to complete the program and follow all rules and procedures of the program and that failure to do so may result in sanctions.

2. Program Expectations- The participant will follow and comply with the treatment plan, supervision plan, and Hancock County Family Dependency Treatment Court rules and requirements. This includes, but is not limited to, successful completion of all four (4) phases of the Hancock County Family Dependency Treatment Court and following all recommendations, requirements, and orders of the Hancock County Family Dependency Treatment Court team including monetary requirements such as fees, fines, costs, and child support. The participant understands that the minimum length of the program is twelve (12) months, but progression through the phases of the program is not based solely on a pre-determined timeline. The participant understands that failure to follow program expectations may result in immediate, graduated sanctions or termination.

The participant also agrees to not have illegal or illicit drugs in the home or to abuse alcohol in or out of the home.

The participant agrees to maintain medical insurance throughout the program.

 Assessment, Referral, and Treatment Expectations- Participant is willing to attend and fully participate in all treatment and programming assessments to which they are referred.

Participant shall complete a release of information to provide for communication of confidential information, participation/process in treatment, and compliance with the provisions of relevant law, including the "Health Insurance Portability and Accountability Act of 1996", 42 U.S.C 300gg-42, as amended, and R. C. 2151.421 and 2152.99. Sup.R.Appx. I, Std. 4(B).

Participant agrees to keep confidential all information regarding other program participants shared at status hearings or group sessions.

Participant shall be placed, as soon as possible, in appropriate treatment services and programs and shall attend as required. Sup.R.Appx. I, Std. 4(C)

 Participant Monitoring- Participant agrees to the monitoring requirements established in each phase description provided in the participant manual.

You will be expected to submit to a drug screen on a random, weekly basis (up to five (5) times per week). You will submit to individualized, frequent, random, and observed alcohol and drug screens. All alcohol and drug testing is individualized based on the participant's needs to include their primary substance of dependency, as well as a sufficient range of other substances. The participant will contact the coordinator daily to inquire as to whether or not they are expected to submit themselves to/for a screen that day. When the participant is informed that he/she needs to provide a sample, it is their responsibility to report for their drug screen in a timely manner (typically within thirty (30) minutes). Cooperation with requests made for the drug testing by the Court, or as required by Hancock County Family Dependency Treatment Court, is essential. Failure to submit, altering, submitting another's sample, or diluting a urine sample will be deemed positive and immediately sanctioned. Participant agrees to pay a confirmation scientific lab fee for secondary retesting.

Participant agrees that being in possession of illegal or illicit substances or alcohol is considered the same as using such substances and will be deemed positive for doing so.

Participant agrees to attendance requirements for status review hearings. Participant attendance for status review hearings will be weekly during the initial phase, or Phase I. Thereafter, the participant appears regularly before the Judge, as outlined in the phase descriptions, to review the participant's progress. Sup.R., Appx.I, Std. 7 (B)(2).

Phase Requirements- (Included in the participant's handbook)

A general criterion for phase advancement includes abstinence from substances, progress in treatment, compliance with Court orders, educational progress, and compliance with team recommendations.

Participant will report to the Hancock County Family Dependency Treatment Court Coordinator to monitor compliance with Court requirements. Sup. R., Appx. I, Std. 4(C).

Participant is aware that treatment providers will provide frequent, ongoing, timely communication with all treatment team members about the participant overall performance. Sup.R., Appx. I, Std. 6(C).

Participant understands and agrees that they will begin attendance immediately, and that the program length will be determined by cooperation with the Individual Treatment

Plan. Participant may earn additional time in the program if they fail to maintain abstinence or they do not complete all of the requirements of their mental health and/or drug and alcohol treatment plans. Participant's progress is NOT based solely on preset timelines. Sup.R., Appx. I, Std.6(D).

Participant has reviewed Court responses to program compliance and non-compliance outlined in the participant handbook. Participant acknowledges and understands criteria for program termination. Sup.R.,Appx. I, Std.6(E)

Participant understands that frequent ongoing judicial interaction is one (1) of the most essential pieces of the Hancock County Family Dependency Treatment Court program. Sup. R., Appx. I, Std 7 (A). The participant will appear weekly during the initial phase of the Hancock County Family Dependency Treatment Court program. Sup.R., Appx. I, Std. 7(B)(1). In subsequent phases the participant shall appear regularly. Sup.R., Appx. I, Std. 7(B)(2).

Participant agrees that the Hancock County Family Dependency Treatment Court program shall monitor the participant's substance use by individualized, frequent, random, and observed alcohol and other drug testing plans, up to five (5) times per week. Sup.R., Appx. I, Std. 8 (B).

Participant agrees that at the time of the positive test, during intake or if they relapse while in the program, the treatment team may consider an adjustment in treatment and/or the possibility of sanctions. Any change in the treatment plan and/or sanction is enforced and reinforced by the Judge. Sup.R.,Appx.I, Std.8(C).

Participant understands that immediate notification to the Court will occur when they test positive, fail to submit, submit an adulterated sample or the sample of another individual, or dilute the sample. Submitting any of the described tests will be treated as a positive and immediately sanctioned. Sup.R.Appx. I, Std. 8 (D). The Judge will enforce appropriate sanctions for submitting positive samples.

Participant agrees that non-compliance will be governed by immediate and graduated sanctions. The Judge may impose sanctions as a result of non-compliance: Community service, daily reporting, filing of Contempt of Court charges, and the possibility of incarceration. Sup.R.,Appx. I, Std. (10).

Successful Completion of Criteria

Upon request of the participant and review of the completion criteria the treatment team will recommend successful completion. The Judge has the discretion to determine when the participant will successfully complete the program.

6. Unsuccessful Termination Criteria

- a. Ongoing non-compliance with treatment or resistance to treatment;
- New criminal charge or serious violent activity;
- c. A serious Hancock County Family Dependency Treatment Court docket infraction or series of infractions:
- d. Long term inability to provide negative alcohol and/or drug screens;
- e. New allegations of physical or sexual abuse of a child;
- f. Participant fails to embrace or engage in substance abuse recovery, good mental health, and personal growth;
- g. Participant continues willful non-compliance with program goals and expectations;
- Participant poses a risk of health and safety to other participants.

An unsuccessful termination may result in Job and Family Services filing a Motion for Permanent Custody and the possibility of an additional Contempt of Court filing on case plan.

Depending on the circumstances, the participant may be subject to incarceration and/or other penalties.

The procedure for unsuccessful termination includes:

- a. Notice to the participant;
- Hearing concerning the unsuccessful termination with the participant represented.

Unsuccessful terminations may result in:

- a. Job and Family Services filing a Motion for Permanent Custody;
- Additional Contempt of Court filing on case plan;
- c. Depending on the circumstances, the participant may be subject to incarceration and/or other penalties/sanctions.

Termination/Discharge hearings

Participants may be terminated or neutrally discharged from the Hancock County Family Dependency Treatment Court program upon recommendations by the Hancock County Family Dependency Treatment Court team. A treatment team meeting is held and a course of action is recommended. The case will be set for a hearing and the team will present its recommendation to the Judge who will make the final decision regarding termination or neutral discharge. Sup. R., Appx. I, Std. 6(E).

THE PARTICIPANT ACKNOWLEDGES THAT HE/SHE HAS READ AND FULLY UNDERSTANDS THIS AGREEMENT AS IT DETAILS AND OUTLINES REQUIREMENTS AND PROCESSES. Sup. R., Appx. I. Std.2 (D), FREELY AND VOLUNTARILY RELINQUISHES THE RIGHTS DISCUSSED HEREIN AND AGREES TO ABIDE BY ALL THE RULES AND CONDITIONS OF THE SPECIALIZED DOCKET.

CERTIFICATE

I HEREBY CERTIFY that I have read and understood the above Waiver and agree to of its terms and conditions.		
Signature of participant	Date	
Printed name of participant		
Judge		

7.5 Treatment Team Contact Roster

Treatment Team Contacts

NAME	AGENCY	TITLE	WORK	CELL	EMAIL	ADDRESS
Judge Johnson	FDTC	Judge	419-424-7070		kkjohnson@co.hancock.oh.us	308 Dorney Plaza
Sarah Sabol	FDTC	Coordinator	419-424-7069	240-285-8100	smsabol@co.hancock.oh.us	308 Dorney Plaza
Bridget DeWulf	Century Health	Case Manager			bdewulf@centuryhealth.org	1918 N Main Street
Leah Cole	CASA	Director	419-424-3262 Ext 105		lcole@casahc.org	East Front Street
Nancy Bowman	A.R.M	Director	419-422-7800	419-345-9126	nbowman@arenewedmindserv	1624 Tiffin Ave
Karmen Lauth	CPSU	Supervisor			Karmen.Lauth@jfs.ohio.gov	7814 Co. Rd. 140
Jill Stonebraker	CPSU	Supervisor			Jill.Stonebraker@jfs.ohio.gov	7814 Co. Rd. 140

7.6 Sample of Release of Information Form [Sup.R., Appx. I, Std. 4(B).]

Hancock County Family Dependency Treatment Court Team Multiple Party Release of Information

I understand the Hancock County Family Dependency Treatment Court Team assists in the coordination of services for me. The primary goal is to develop a treatment plan in order to address my SUBSTANCE USE AND COMPLIANCE WITH HCFDTC REQUIREMENTS.

address my SUBSTANCE USE AND COMPLIANCE WITH HCFDTC REQUIREMENTS.
I,, authorize
Check all that apply: Heath / Treatment Agencies Century Health, Inc.
Legal / Law Enforcement Agencies ☐ Hancock County Juvenile Court ☐ Hancock County Prosecutor ☐ Probation / Parole ☐ Hancock County Bar ☐ Findlay Police Department ☐ Hancock County Sheriff Dept. Other Agencies
□ Hancock County ADAMHS board □ Hancock County Job & Family Services □ Hope House □ CASA/GAL of Hancock County □ Help Me Grow □ Open Arms □ Blanchard Valley Center □ Focus on Friends □ Representatives from the sober support community □ Other:
to communicate with and disclose to one another the following information: (check each specific item to be disclosed)
□ Admission / Diagnostic Assessment / Summary □ Treatment Plans / Treatment Summaries / Recommendations □ Progress Notes □ Legal History / Probation / Parole information □ Psychiatric Evaluation □ Medication List □ Lab / Drug Testing Results □ Discharge information □ Other:

Created 5/16

Hancock County Family Dependency Treatment Court Team Multiple Party Release of Information

□ Coordination of Treatment Services; □ Aftercare Planning; □ Satisfy Legal Requirements; □ Family Involvement; □ Billing/Payment of Bill; □ Employment Involvement; □ Other: □ Other:
I understand that the information disclosed is for professional purposes and only the minimum amount of information needed to achieve the purpose may be disclosed, which may include disclosures made during court sessions. I understand that rights of privacy and confidentiality associated with treatment do not change others' obligations to report information when required by law. (see R.C. 2151.421,2152.99,2152.72.
I hereby release the entities listed above from all legal responsibilities or liabilities that may arise from disclosures made pursuant to this authorization.
I understand that I might be denied services if I refuse to consent to a disclosure for purposes of treatment, payment or to fulfill legal requirements. I will not be denied services if I refuse to consent to a disclosure for other purposes.
This authorization may be revoked at any time, (except to the extent that action has already been taken in reliance on it), by notifying Century Health, Inc. of my intention to do so. The revocation must be in writing.
This authorization (unless revoked earlier) expires in 180 days which is
Expiration date: Or this event:
Signature of Client or Authorized Representative:
Date:
Printed name of authorized representative:
Signature of Guardian: Date:
Witness: Date:
Notice to all Books to the first of the firs

Notice to all Parties involved with the handling of confidential information

This information has been disclosed to you from records protected by Federal Confidentiality rules (42 CFR Part 2). The Federal rules prohibit you from making any further disclosure of this information unless further disclosure is expressly permitted by the written consent of the person whom it pertains, or as otherwise permitted by 42 CFR Part 2. A general authorization for the release of medical of other information is not sufficient for this purpose. Federal rules restrict any use of information to criminally investigate or prosecute any alcohol or drug abuse client. Drug abuse client records are also protected under the Health Insurance Portability Act of 1996 ("HIPAA"). 45 C.F.R. parts 160 and 164.

7.7 Sample of Weekly Progress Reports

Hancock	County Family Depe Status Re	_	itment Court
	Status ICC	port	
Orientation_	Phase 1 Phase 2	Phase 3	Phase 4
Client			
Report Date		Next court appea	arance
TREATMENT			
Treatment Agency		Level of Care	
Compliance	Non-complian	ce w/ Tx	
Diagnosis			
DRUG TESTING			
Urine:			
	Results		
Breathalyzer:			
Dates given	Results		
APPOINTMENTS WIT	TH PROVIDERS		
FRC:			
JFS:			
CH:			
A.R.M:			
OTHERS: PRIOR COURT ORDE	TDC .		
Attend Treatment	arings		
	nples as required by the par	ticinant Anno test	ing agreement and
	ne treatment agency.	acipani di de test	ing agreement, and
	step meetings weekly and p	rovide proof of a	ttendance to the Court.
	dvancement paper		
Work orders:			
Other:			
NEW COURT ORDER	as .		
	C Hearings Week	ly Mor	nthly
Attend Treatment	t with	,	
Provide urine samples as required by the participant drug testing agreement, and			
as requested by the treatment agency.			
Attend12-step meetings weekly and provide proof of attendance to the Court.			
Complete phase advancement paper Work orders:			
Other:			
NOTES			
TIOTES			

Last update: 7/21/2016

7.8 Journal Entries Utilized in Regard to The Specialized Docket

IN THE COURT OF COMMON PLEAS, HANCOCK COUNTY, OHIO JUVENILE DIVISION

IN THE MATTER OF:	: Case I	No.
	: TREA : ENTE	ATMENT COURT REVIEW
This matter was before the	Court on	_, 2016, for the purpose of a review hearing. The
Participant,	appeared. Also present ir	a court were the Family Dependency Treatment Court
Treatment Team.		
	COMPLIANCE	REPORT
Participant has been on Phase	since	3
Participant has days abs		
Number of Days Child (ren) in pl	acement:	_
FRC:		
CH: ARM: OTHERS:		
The Participant provided a positive	NON-COMPLIAN e drug screen for	
The ParticipantAdmitted to	useDenie	d use
Other:		
The Court orders that the Particip	ORDEI ant shall continue with th	RS e program as previously ordered subject to the
following modifications or condi-	ions	
Continue on Phase	Begin Ph	ase
Begin Phase Reports	Finish Pl	naseReports
Other		
Copies received by:		
Participant	Date	Judge Kristen K. Johnson

7.9 Probation Department Urine Testing Policies

SUBSTANCE MONITORING

Drug testing procedure

Truancy Court monitors a participant's substance use through the use of random, instant urinalysis. When initially entering the program, participants are asked about any recent illegal drug use. The first urinalysis is sometimes adjusted to accommodate for that, but a Violation of Court Order is usually not filed against youth testing positive at the onset of the program. For example, if a participant indicates that they smoked marijuana one (1) week prior to admittance to the program, their first drug screen may not take place until at least three (3) additional weeks have passed, giving the drug time to metabolize through their body. However, the Judge may also ask that a participant submit to a urinalysis despite an admission of recent use. This can serve as a baseline of recent use and the same procedure listed above will be followed. Most participants are screened once per month, but they may be screened at more frequent intervals, depending on their individual needs. Participants understand that they may be tested at any time that they appear for a hearing or meet with the Truancy Court Coordinator. At times, participants are also called and given less than twenty-four (24) hours to appear for a screen. The participant is expected to arrive on time for the screening and consequences can be given for failure to appear for the screen. All screens are collected under the direct observation by a same gendered member of the Court's staff. The screen will determine whether or not there is a drug by-product present in the sample. The Court currently uses a reliable screening tool that tests for Amphetamines, Barbiturates, Benzodiazepine, Buprenorphine, Cannabinoids, Cocaine, Ecstasy, Methadone, Methamphetamines, Morphine, Oxycodone, and Phencyclidine, but other drug categories may be added or removed, depending on supply/demand. It should be noted that each participant is asked about medications they are taking at the time of admittance to the program. If a participant submits a positive sample, documenting use after the Order to refrain from use was issued, additional charges may be requested. If a participant submits an adulterated sample, the sample of another individual, or purposefully dilutes the sample submitted, it will be considered a positive screen and additional charges can be requested. At the time of initial Adjudication, it is clearly explained to all participants that failure to submit to a screen when requested will also be considered a positive screen and will be treated as such, including immediate notification to the Judge. Results of all urinalyses, both positive and negative, are recorded and relayed to other team members at the status review meetings.

Urine sample collection

When collecting a urine sample to be tested, a same gendered Court staff member must witness the collection to avoid the possibility of the participant tampering with the specimen. The participant must remove all outer garments (coats, etc.) and leave personal items such as backpacks and purses away from themselves during the testing. Participants with long hair are instructed to keep their hair back over their shoulders, to not obstruct the direct line of sight. Once the sample is collected and the participant has secured the lid, they may then adjust their clothing and wash their hands. The participant should wipe the cup with a paper towel, then use a

clean paper towel to transport the cup, accompanied and observed by staff, to the appropriate area where the results will be read.

Urine sample testing

All staff members must wear protective gloves whenever they have contact with the specimen cup. Prior to reading the results, the staff member should check the color of the sample to insure it is not diluted, as well as verify that the sample is within an appropriate temperature range. If the sample volume is not sufficient for retesting, if needed, this is explained to the participant prior to the results being read.

If the test result is negative, both the participant and staff member sign the Rapid Drug Screen Report form to that effect. The sample is disposed of properly by the participant and the report is retained in the participant's file.

If the test result is positive, another staff member is called in to witness the results. If the second staff member verifies that the results are positive, both staff members sign the form. If the result is positive for any drug, excluding Cannabinoids, the Court Administrator, or their designee, must be the second person to verify the results. The participant signs the form and is given an opportunity to admit or deny using the illegal substance. If the participant continues to deny any use, they are given the option to place a deposit with the Court for additional testing at an outside, certified laboratory. All positive samples receive an insta-screen security seal indicating the name of the participant, the date the specimen was collected, and the staff member who read the results. The sample is then secured in a refrigerator that is used for the storage of these samples so that it is available for retesting, if requested by the participant. A chain of custody form accompanies the specimen and is initialed and signed by the participant and staff member. If the laboratory confirms the initial results, the participant's deposit pays for the testing. If the laboratory indicates that the initial sample did not have the presence of a drug's by-product, the Court pays the cost of the testing and the deposit is refunded to the participant. Team members, as well as the participant and their caregiver, are informed of the outside testing results. Additional charges may be requested for positive samples submitted during participation in Truancy Court and the youth will be referred to a licensed treatment provider to help address the issue. Once Adjudication on the new case has been completed, the sample will be disposed of in an appropriate manner. It should be noted that if a participant tests positive for any drug, the Court Administrator and the specialized docket Judge will be notified immediately. This could result in the participant being detained immediately, for their own safety, depending on the type of drug ingested.

Alcohol monitoring

At this time, Hancock County Juvenile Court does not routinely test all participants in the program for the use of alcohol. However, if at any time a participant is suspected of being under the influence of alcohol, the Court Administrator or probation staff can sample the participant's breath using an Alco-Sensor IV. The Probation Officer have been trained in the use of this

device and are responsible for keeping the device calibrated and in good working order. The staff will conduct each test as outlined in the Operator's Manual, using a clean mouthpiece for each test. When the test is complete the results will be recorded and be shared with the participant. If the participant provides a positive breath test sample, law enforcement will be contacted to further investigate the matter. Additional charges may be requested against the participant.

7.10 Sustainability Plan [Sup.R., Appx. I, Std.1; Recommended Practice (E)]

The Supreme Court of Ohio
Court Services Division, Specialized Docket Section
FAMILY DEPENDENCY TREATMENT COURT DOCKET
SUSTAINABILITY PLAN NARRATIVE

+	
County	Date
Hancock County	7/18/16
Program Coordinator Name	Program Coordinator Phone
Sarah Sabol	419-424-7069

Each court receiving CIP funding is required to develop a sustainability plan by as identified in the grant award agreement. Please prepare your sustainability plan using the outline below. As a certified specialized docket submitting this sustainability plan with the accompanying excel spreadsheet complies with Sup. R., Appx. I, Standard 1 Recommended Practices 1(D) and (E).

I. POTENTIAL COMMUNITY SOURCES

- A. Community Based Foundations
 - i. What community based foundations exist within the jurisdiction of the court you serve?
 - 1. Hancock County Community Foundation
 - ii. What potential funding could these foundations offer your program?
 - Hancock County Community Foundation has potential funding for community organizations and many grant opportunities throughout the year.
 - iii. Have you made contact with these foundations regarding potential funding for the sustainability of your specialized docket?
 - We have not made any contact with the Community Foundation, yet. We would like to start the program first that we can go to them with numbers of success rates, and goals for future success.
 - iv. How can you provide information regarding your family dependency treatment court docket to current and potential funding sources?
 - We will be continuously searching for potential funding sources along with being able to prove maintaining statistics to show/provide documentation to our community based foundations that we are making progress with our communities' families.
 - We will continue to have annual trainings and presentations around the community regarding the FDTC in order to have on-going communication through the community.
- B. What are the top 3 activities that you will focus on in the next 6 months regarding financial stability to move your FDTC towards self-sustainability?
 - Foster relationships between the community agencies that are already a part of our advisory committee to make sure that ongoing communication about funding sources and opportunities continues.

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- Look into the possibilities for drug screening and some other services to be provided through our treatment agencies, therefore reducing the cost of our program.
- Reaching out to other agencies that have received grant funding to start their programs and research how/if they have become self-sustained.

II. COLLOBORATIVE KEY PARTNERSHIPS/ADVISORY COMMITTEES

- A. How do you plan to use members of your advisory committee (Sup.R., Appx. I Standard 1(B)) in assisting with sustainability of your specialized docket?
 - Community education and understanding of the importance of the program is essential for all advisory committee members. It is also important to encourage the advisory committee members to refer participants, and educate citizens of the community of the mission of the program.
- B. What other organizations who serve the same clients are not members of your advisory committee?
 - i. Representatives from the Sober Support Group community
 - ii. Representatives from the Faith-based community
 - Representatives from the transitional housing/shelter agencies
 - Representatives from the Obstetrician and local pregnancy doctors that may see chemical dependent pregnant women.
- C. Do you plan on soliciting new members to your advisory committee? Please explain.
 - i. Yes, we are open to soliciting new members of the advisory committee in order to continue to expand the agencies that are involved. Due to the fact that we are in beginning stages of the specialized docket program, we are open to any new members that would have a unique point of view and fresh ideas.
- D. Has your advisory committee considered forming a 501(C)(3) organization to support your specialized docket? If not, please explain why.
 - We have not discussed this topic in any of our advisory committee meetings, but it is something to consider and address as a topic of discussion at ongoing advisory meetings.
 - E. What are the next steps for your advisory committee in the next 6 months to move your FDTC towards self-sustainability?
 - Continue educating the community on the fundamentals, along with the importance of the program to the community as a whole, is our priority at this time. Since the program has not yet begun taking participants, we are

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FAMILY DEPENDENCY TREATMENT COURT DOCKET
SUSTAINABILITY PLAN NARRATIVE

focusing on educating all agencies and organizations that serve the same clients. We believe that the more employees of the agencies and organizations that understand the program, the better our participants and our community will understand and support the program. We are hoping to start discussion and dialog regarding the mission and goals of the FDTC.

7.11 Community Outreach and Education Plan [Sup. R.,Appx. I, Std. 1; Recommended Practice (D)]

III. COMMUNITY OUTREACH AND EDUCATION PLAN (Sup.R., Appx. I Standard 1 Recommended Practice D)

- A. Written Program Materials
 - i. Do you have a program brochure?
 - Yes (Please see attached*)
 - ii. How do you utilize the brochure? How do your citizens get access to the brochure?
 - Our brochure will be given to community agencies around the county, including:
 - a. Focus of Friends
 - b. Family Center
 - c. Blanchard Valley Hospital
 - d. Police Departments
 - i. Findlay
 - ii. McComb
 - iii. Fostoria
 - iv. Bluffton
 - e. Sherriff's Office
 - f. Jail
 - g. Treatment Agencies
 - h. Job and Family Services
 - i. Women's Resource Center
 - Open Arms Domestic Violence and Rape Crisis Services
 - Given to community citizens at different events around the county including the National Night Out event in August, 2016.
 - iii. Submit a copy of all written program promotional materials.
- B. Media
 - i. How do you utilize written media outlets (i.e. newspapers, regional magazines) to inform your community about your program and/or specialized dockets in general (letters to the editor, announcements, etc.)?

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SUSTAINABILITY PLAN NARRATIVE

- The Courier has taken interest in the program and wrote an article about the initial proposal for the program in April, 2016 (please see attached*)
- Many local news stations also took notice and published articles regarding the initial planning stages of the program including WFIN of Findlay and WTOL of Toledo (please see attached*).
- We are looking forward more written media attention once the program is operational.
- ii. How are you utilizing social media and the internet to inform the community about your program and/or specialized dockets (i.e. Twitter, enewsletters, and website)?
 - The Family Dependency Treatment Court is explained and advertised on our website. We are currently looking at funds in order to make a letterhead in order to be more recognizable to the public.
- iii. How are you utilizing television and radio to inform your community about your program and specialized dockets in general (i.e. public service announcements, guest interviews, local celebrity endorsements)?
 - The Opiate Task Force is currently working on PSAs for this
 related topic concerning opiates. These PSAs will start discussion,
 and dialog regarding issues with opiate use among differing
 populations, including child abuse and neglect.
- Submit copies of any media publicity, such as press releases or newspaper articles
- C. What are the top 2 activities that you will focus on in the next 6 months regarding public relation activities to move your FDTC towards self-sustainability?
 - Reaching out to our local media outlets regarding the start of the FDTC is going to be important in order to help initiate discussion and dialog regarding the mission and goals of the program.
 - Attending all local events possible, in order to promote our program and get educational materials into the community.