



Washington County Treatment Alternatives and Diversion (TAD) Program

Pre-Trial Diversion Program for Opiate/Heroin/Methamphetamine and Stimulant Offenders

Participant Manual

Our Mission

Elevate leads the way to healthy communities. We all have the desire to live the best life we can. At times, however, we may need help doing that. Elevate guides and empowers individuals, families and communities to effectively address substance use and mental health challenges.

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Mission & Goals

Mission Statement: The Washington County Treatment Alternatives and Diversion (TAD) Program aims to provide a safe and effective alternative to the traditional criminal justice system for individuals with an opioid or stimulant use disorder that emphasizes personal accountability as well as the importance of evidence-based treatment in order to treat the underlying cause of criminal behavior, thereby reducing the recidivism of this population and increasing public safety in Washington County.

Goals of the Washington County TAD Program: The primary goal of the Washington County TAD Program is to reduce recidivism for individuals involved in the criminal justice system. The program aims to provide access to and coordination of treatment to address the substance use disorder that typically underlies criminal behavior. The program also holds clients accountable by involving all the different professionals and agencies involved in there program as well as through frequent alcohol and drug testing. We hope that by increasing access to treatment while holding clients accountable, that clients will find a path to long-term recovery and avoid future involvement in the criminal justice system.

The Diversion Team

The Washington County TAD Program is overseen by a group of professionals involved in the criminal justice system in the county. We believe it is imperative to the creation and sustainability of an effective diversion program to have involvement and support from various agencies in the criminal justice system. A team approach allows decisions to be made taking into consideration a variety of viewpoints and ensures the interests of clients, the community, and the criminal justice system are represented.

Members of the Washington County Diversion Coordination Committee:

Honorable Sandra J. Giernoth	Lead Treatment Court Judge, Washington Co Circuit Court
Julie Maule	Washington County Court Commissioner
Christine Zimmermann	Drug TAD Program Coordinator/DTC Coordinator, Elevate, Inc.
Mark Bensen	Washington Co District Attorney, District Attorney's Office
Jeannette Corbett	Assistant District Attorney, District Attorney's Office
Gillion Parham	Lead Public Defender, Public Defender's Office
Timothy Drewa	Public Defender, Public Defender's Office
Captain Scott Lehman	Jail Administrator, Washington Co Sheriff's Department
Sergeant Michael Hennes	Sergeant, Washington Co Sheriff's Department
Michelle Hetebrueg	Field Supervisor, Department of Corrections
Nate Fogle	Probation Agent, Department of Corrections
Julie Driscoll	Chief Health & Human Services Officer
Vanessa Baumann	SUD Coordinator, Washington County Human Services Dept.
Brenda Dunlap	Director of Adult Services, Elevate Inc.
Donald Myles	Drug TAD Case Manager, Elevate, Inc.

Program Description: The TAD Program serves non-violent offenders with a substance use disorder through diversion of sentences. Those individuals who successfully participate in case management and treatment services avoid having to serve portions of their sentence for their offense as determined by the Deferred Prosecution Agreement. The length of the program is approximately one year. All clients are required to maintain sobriety, engage in AODA treatment, comply with the conditions of the DPA, and demonstrate the skills necessary for ongoing recovery from their substance use disorder.

Eligibility & Ineligibility

Eligibility Criteria

Potential clients must meet the following eligibility requirements in order to be referred to the TAD Program. Any questions regarding eligibility can be directed to program staff. However, it is necessary for clients to complete a full assessment to determine their eligibility and appropriateness for the program.

- Client is at least 17 years of age
- Client is a Washington County Resident
- Client is not a “violent offender” as described in Wisc. Stat. 165.95
- Client has a pending charge for possession of narcotics, methamphetamine, cocaine/cocaine base, or prescription drugs; felony bail jumping or possession of paraphernalia if those charges were related to an opiate drug overdose and the client meets the definition of an “aided person” pursuant to section 961.443 (2) (b)2. in Washington County. Client does not have any previous convictions or currently pending charges for manufacturing or delivery of any drug
- Client meets the criteria for a substance use disorder

Ineligibility Criteria

There are two primary reasons for which clients may be denied participation in the program. The first is if the client has a previous conviction or current charge for a “violent offense”. The second is if a client has a previous conviction or pending charge for manufacturing or delivery of any drug/narcotic. The Washington County District Attorney’s Office is the agency that makes referrals to the program. As such, they determine if a client would be ineligible for the program due to their criminal history. Program staff also conduct a criminogenic risk and needs screening during the assessment.

Wisc. Stat. 165.95 states:

(1) In this section, "violent offender" means a person to whom one of the following applies:

- (a) The person has been charged with or convicted of an offense in a pending case and, during the course of the offense, the person carried, possessed, or used a dangerous weapon, the person used force against another person, or a person died or suffered serious bodily harm.
- (b) The person has one or more prior convictions for a felony involving the use or attempted use of force against another person with the intent to cause death or serious bodily harm.

Please feel free to contact Elevate and speak with program staff if you have any questions regarding your potential eligibility for the program. While some questions may be able to be answered over the phone, staff may encourage you to speak with your attorney and/or to schedule a time to come in to complete a full assessment.

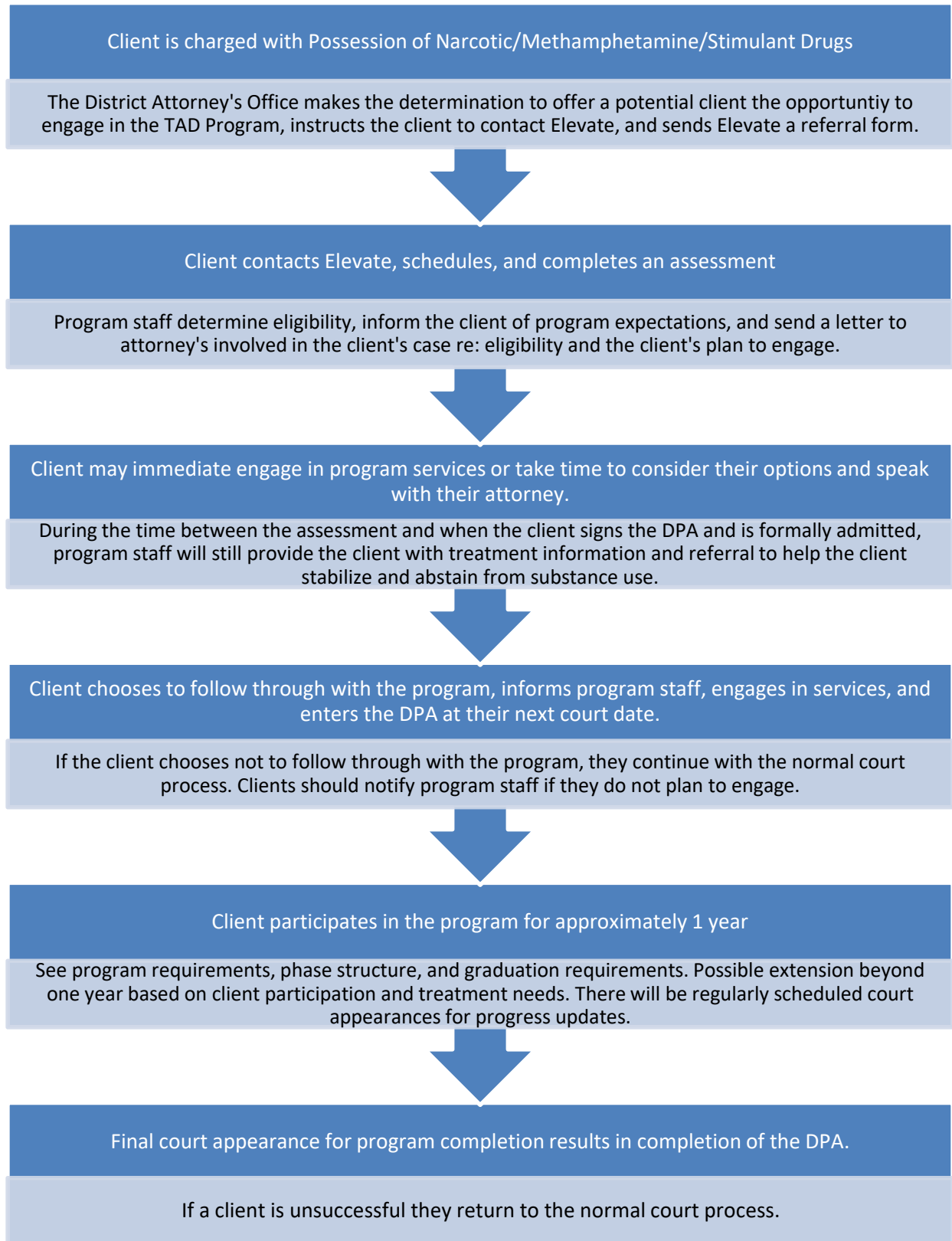
Referral & Admission Process

- **All clients wishing to engage in the TAD Program MUST complete an assessment at Elevate prior to participating in the program and/or signing a Deferred Prosecution Agreement.**
- The Washington County District Attorney's Office is the agency that refers clients with a pending possession of narcotic drug charge to the TAD Program.
- Once a client with a pending possession of narcotic drugs charge is offered the opportunity to engage in the program, the District Attorney's Office sends Elevate a referral form, and the client should contact Elevate to schedule an assessment.
- Clients themselves must contact Elevate to set up an assessment. If the client is incarcerated, program staff will schedule a time to meet with the client while in custody.
- We encourage clients to call well in advance of when they will need to have an assessment completed as we cannot guarantee that a client will be able to have an assessment within 72 hours of when they contact Elevate.
- An assessment will take place at Elevate, Inc. and will take approximately 90 minutes.
- At the time of the assessment clients will be informed of all the rules and expectations of the program.
- Following the assessment, with the client's consent, program staff will send a letter to the client's defense attorney and to the prosecuting attorney notifying them of the client's eligibility and whether or not the client plans to engage in the program.
- Clients may take additional time after the assessment to consider whether or not they would like to participate, and all clients are encouraged to speak with their attorney prior to making a decision.
- Clients **MUST** inform program staff and engage in program services **PRIOR** to entering an agreement that involves the program.
- We encourage clients and referral sources to contact Elevate with any questions about eligibility, referral, the assessment or the program and its requirements.
- If the program is full there will be a wait list of up to five clients. Once that is full the program will be closed to new admissions or referrals. The program communicates this information directly to the District Attorney's Office. The District Attorney's Office may notify potential clients once the program is again accepting referrals.

Deferred Prosecution Agreement

The TAD Program functions as a pre-trial diversion and deferred prosecution agreement program. All clients participating in the program will be on a Deferred Prosecution Agreement. We encourage all clients to read, speak with their attorney, and ensure they fully understand the program and DPA requirements before engaging in the program. All clients will be required to abide by the conditions of the DPA throughout their participation in the program. While engaged in the program clients will remain on bail and are expected to abide by the conditions of their bail.

Program Process



Confidentiality, Data Collection, and Program Evaluation

Participation in the Washington County TAD Program and the information gathered during the client's involvement in the program is Protected Health Information and is covered under the Privacy Act, 5 USC 552(a), Health Insurance Portability and Accountability Act (PL104-191) and CFR 42 specific to records for alcohol and drug prevention and treatment programs.

All clients participating in the program will be required to sign releases of information for other individuals involved in their program including treatment providers and attorneys. Program staff will review each release with clients to ensure they have a full understanding of what information will be shared, who that information will be shared with and why, and the period during which the information can be shared regarding their participation in the program. The purpose of this is to ensure effective coordination of treatment and case management services for all clients, ensure the client is meeting the program requirements while remaining in the community on a DPA, and that program staff can communicate the client's compliance or noncompliance with the court.

The TAD program is funded through a grant from the Wisconsin State Department of Justice. As a part of our grant requirements, we are required to collect and report information to the Wisconsin State Department of Justice. Program staff will review with each client what information will be collected and reported to DOJ at the time of their assessment and throughout the program. Information shared with DOJ regarding client participation in the program is still protected health information and is collected for the purpose of program and outcomes evaluation.

Program staff may also ask clients about their willingness to engage in a long-term recidivism study. One of the primary goals of the program is to reduce recidivism for program participants. Reduction on long-term recidivism is also a main indicator that a diversion program is effective. We hope to conduct a two-year or longer recidivism study comparing program participants with a control group. All clients will be fully informed about the nature of the study and what information will be collected. Clients may choose not to participate in this study and choosing to exclude themselves will in no way negatively affect their participation in the program.

Program Requirements

I. General Program Rules/Expectations

- Clients must follow all expectations described in the Deferred Prosecution Agreement.
- Clients must maintain absolute sobriety.
- Clients must engage in, demonstrate regular participation in, and potentially complete the recommended AODA treatment.
- Clients will have weekly individual meetings with their case manager during their involvement in the program.
- Clients will agree to submit to alcohol and drug testing while engaged in the program both at Elevate and with their treatment provider. Tests will be witnessed and clients may be subject to random requests for testing throughout their participation in the program.
- Clients will actively participate in the development and review of their Diversion Case Plan to ensure they are meeting program requirements and addressing appropriate needs during the program.
- Clients are to maintain regular phone contact outside of individual appointments as deemed appropriate by their case manager. Clients are expected to keep their case manager informed of their current and active phone number and notify their case manager if phone service is expected to be interrupted.
- Clients are to maintain residence in Washington County. Should a client move, they must inform their case manager prior to their change in residence to ensure that services can continue to be offered in a manner consistent with program expectations.

II. Financial Responsibility

- The total cost of the program for all clients is \$300.
- Clients are responsible for all costs associated with their AODA or other forms of treatment.
- If a client believes they cannot meet the financial requirements of treatment or other services, they should inform their case manager so that other services can be arranged without a lapse in treatment or service.
- Clients will be expected to pay \$25.00 per month in order to participate in the program. These fees help provide services for TAD clients.
- Clients are not responsible for the cost of any preliminary breath test (PBT), oral fluid (OFT) or urine drug screen (UDS).

III. Diversion Case Plan

- All clients will work with their case manager to develop a Diversion Case Plan shortly after their admission to the program.
- The purpose of a Diversion Case Plan is to set goals and monitor progress throughout the program.
- The Diversion Case Plan will outline primary program requirements and when reviewed with the client will ensure that the client is making progress toward program goals that will result in successful completion of the program.
- Clients will also be encouraged to identify personal goals for their time in the program that their case manager can assist with. These goals and the client's progress in attaining them will also be outlined in the Diversion Case Plan.
- The Diversion Case Plan may be shared and coordinated with a client's AODA treatment provider and/or probation agent to ensure coordination of services.

IV. AODA Treatment

- Clients will be required to engage in the recommended AODA treatment following their assessment if they are not already actively engaged in treatment.
- The Program will refer all clients to treatment providers that will work with the client's insurance and that offer the necessary levels of care based on the client's need in or around Washington County.
- Clients are to keep their case manager informed of their progress and participation in treatment.
- If a client feels they are in need of additional treatment services they should inform their case manager so that additional services can be arranged in a timely manner to address whatever needs the client has.
- If a client has a conflict with their treatment provider or expect that they will face discharge from treatment they should notify their case manager as soon as possible.
- Clients are expected to maintain engagement in treatment until they are successfully discharged from their treatment provider.
- If a client successfully completes treatment, but at a later point demonstrates the need for services again, they may be referred for treatment services again.
- Clients must sign a release of information for their treatment provider in order for their case manager to verify treatment engagement and participation and for care coordination purposes.
- If a client is receiving any prescribed medication, the client will be expected to sign a release of information for the doctor prescribing the medication so that their case manager can verify it. This includes any form of medication-assisted treatment (MAT), such as Suboxone or Vivitrol.
- If a client has additional treatment needs, such as mental health, they can discuss this with their case manager in order to find and engage in the necessary services.

V. Alcohol and Drug Testing

- Clients engaged in the program will be expected to submit to regular alcohol and drug testing which are conducted by using a preliminary breath test (PBT), urine drug screen (UDS), or oral fluid test (OFT).
- **Clients will be required to submit at least two observed alcohol and drug tests at Elevate per week for the entire duration of the program.**
- Testing frequency may be increased up to three times per week or more based on client participation.
- Clients may also be required to come in for random testing at Elevate.
- All urine drug screens will be witnessed by a staff person of the client's same gender.
- Clients may also be required to submit alcohol and/or drug tests with their treatment provider and/or probation agent. Clients must agree to have alcohol and drug test results shared with the program.
- Clients are expected to provide verification of any missed appointments at Elevate or their treatment provider.
- Missed appointments for testing will result in a positive drug screen result.
- Any missed appointments must be made up within 24 hours.
- Repeated missed appointments will be considered an attempt to avoid testing.
- Clients are expected and encouraged to inform their case manager of any and all substance use between appointments and prior to testing.
- All urine drug screens that have preliminary positive results on the point of service test cup during an appointment at Elevate will be sent to a certified laboratory for confirmation.
- Any effort by a client to tamper with, adulterate, dilute, or otherwise affect the result of a urine drug screen to avoid detection of use will be considered a serious issue of non-compliance and may result in termination from the program.
- Clients should not drive to any appointment, or operate a motor vehicle at all, if they believe they are currently under the influence of alcohol and/or drugs.

- If a client appears to an appointment at Elevate and is determined by staff to be under the influence of alcohol or drugs, the client will be asked to find other transportation home so as not to risk their safety or the safety of others. If a client refuses and knowingly operates a motor vehicle, program staff may contact law enforcement as the client would be posing a serious risk to themselves and to others.

VI. Medication Assisted Treatment (MAT)

- The Washington County TAD Program does not prohibit a person from starting or continuing in the program because they use a medication that is approved by the Federal Food and Drug Administration for the treatment of their substance use Disorder
- If a client is prescribed a medication for the treatment of their substance use disorder it must: “be prescribed by a licensed health care provider, acting in the scope of his or her practice, that has examined the client and determined that the client’s use of the medication is appropriate treatment for their substance use disorder, the medication is appropriately prescribed by a person authorized to prescribe medication in the state, the client is using the medication as prescribed as part of treatment for a diagnosed substance use disorder”
- Clients receiving MAT are expected to sign a release of information for their provider so that the client’s case manager may verify it.
- Clients are encouraged to discuss their need for, or progress in, utilizing MAT during their involvement in the program.
- Elevate staff are aware that MAT can be very effective in combination with traditional counseling and supports the use of MAT as medically and clinically appropriate.

VII. Other Treatment Referrals

- Clients that have additional treatment needs including a mental health diagnosis should discuss these with their case manager.
- If a client is actively engaged or becomes engaged in some other form of treatment during their participation in the TAD Program, they should inform their case manager to ensure that all services being provided are coordinated and best serving the client.
- A client may be referred for additional treatment services if they are demonstrating symptoms that interfere with their daily life and functioning or participation in the program. If this occurs, the client will have a chance to discuss this with their case manager and the program coordinator.
- Elevate staff will do their best to communicate with all of the client’s treatment providers during their participation in the program as allowed by releases of information.

VIII. Over the Counter (OTC) Medications

- Clients should inform their case manager of any OTC medication that they take.
- Some OTC medications can affect the initial results of urine drug screen conducted at an appointment and may cause a false positive for a substance that the client did not ingest. If this is the case, as with all urine drug screens, the sample will be sent to the lab for confirmation.
- It is in the client’s best interest to be aware and vigilant in ensuring what medications they take, even OTC medications, while engaged in the program.
- If a client is taking OTC medication and informs their case manager, they may be asked to bring in that medication to their next appointment, especially if they have been taking it on a regular basis prior to the appointment.

- Clients that do not report taking OTC medication and who claim they have taken OTC medication only after a urine drug screen shows positive results may be asked to come in the next day to provide additional information about the medication they report taking and to submit another test.
- **Clients are NOT ALLOWED to use or consume any products containing CBD, alcohol or poppy seeds during their participation in the program. Any positive drug test result for THC will be considered noncompliance and reported to the court, even if you state it is due to CBD products. It is the client's responsibility to be aware of what products they are using and what ingredients they contain throughout the program.**

IX. Controlled Substance/Narcotic Prescription Drug Policy

- Clients are allowed to take a prescription medication in the manner described under the MAT guidelines section.
- If a client knows they will have a medical procedure during which they may be given a controlled substance/pain medication, they are encouraged to discuss this with their case manager and treatment provider to develop a safety plan so that prescribed and necessary use of this type of medication does not result in relapse or illegal drug use.
- Elevate strongly suggests that clients who are active in their recovery, treatment, and the TAD Program inform their doctor that they are in AODA treatment, about their opiate/drug use history, and that they are in a program that requires maintained abstinence.
- If the doctor feels that it is medically necessary to prescribe the client a controlled substance/pain medication, it is the client's responsibility to sign a release of information for Elevate/ case manager so that their doctor can provide verification of that medication.
- Clients should inform their case manager about any new prescription drugs that they are prescribed between appointments and will be required to bring any pharmacy information as well as the physical prescription to their next appointment.
- Be advised that the doctor/licensed practitioner will be contacted to verify the authenticity of any reported prescriptions.
- Clients are expected to bring in all narcotic and controlled substances in weekly or as designated by the case manager for a medication count. Prescriptions medications must be brought in the original container and have the prescription label attached. The case manager and client will count medications to ensure that all doses are accounted for. Examples include Xanax, Adderall, Suboxone, etc.
- TAD Program staff will not accept the use of a prescribed medication as a reason for a positive drug test unless the client follows the above procedure.

X. Scheduled Court Hearings, Court Reports, and Re-offending

After entering the program clients will typically have two future court dates set. One at six months from admission for a progress update and the second a year from admission for program completion. Program staff will make clients aware of court dates and attend court with the client if possible. Program staff will also show the client a copy of the letter being sent re: program compliance/noncompliance, review it with the client, and send a copy to the District Attorney's Office and the client's defense attorney.

A client may have additional court dates if there are instances of noncompliance when in the program. The purpose of these is to keep the District Attorney's Office, client's defense attorney, and the court informed of the client's progress. (See noncompliance and termination for more information).

If a client reoffends while active in the program, they should inform their case manager as soon as possible. A new offense may result in a client being discharged from the program.

XI. Other Considerations: Employment/Education, Community Support Groups, Peer Group, Violence or Threats, Honesty, Etc.

Employment/Education: Clients are encouraged to find employment or engage in educational pursuits during their involvement in the TAD Program that are consistent with their efforts to maintain sobriety. We feel that pursuing employment or educational goals can be an important part of an individual's recovery process. If a client would like assistance in discussing or finding employment/education, they should discuss this with their case manager.

Community Support Groups: staff may encourage clients engaged in the TAD Program to at least try attending some community support groups. Examples of these include Alcoholics Anonymous, Narcotics Anonymous, SMART Recovery, and others. Community and peer support outside of formal supports such as treatment and TAD can be instrumental in building a strong recovery. However, community support groups alone will not satisfy the treatment requirement of the program.

Peer Group: We encourages clients engaged in the TAD Program to be aware of the peer group they continue to associate with during their involvement in the program. We strongly discourage clients from continuing to associate with individuals who are actively using while engaged in the program. We also encourage clients to discuss the social aspect of their recovery with their treatment provider and case manager. Discussing situations where a client may be around others who are drinking and/or using drugs can also be an instrumental part in building certain recovery skills such as relapse prevention and refusal skills.

Violence/Threats: If any client demonstrates violent or inappropriate conduct toward TAD Program/Elevate staff, community corrections staff, public safety workers, treatment providers, or any other member of the community they may be immediately discharged from the program. If a client is arrested for a violent offense during which the client carried, possessed, or used a dangerous weapon, the person used force against another person, or a person died or suffered serious bodily harm, the client will be immediately discharged from the program.

Honesty: Above all, we encourage clients in the program to be honest with program staff. TAD Program staff reward honesty and are willing to work with clients that are honest about struggles they are having in their recovery. We understand that it may feel natural to be dishonest about substance use or struggles in the program due to the program's connection with the court and the penalty if discharged unsuccessfully. TAD Program staff are here to help clients through the program and in their recovery, and cannot do their best to help if they do not have all the information.

Phases

The Washington County TAD Program is organized into three phases. A phase structure outlines the major focuses of the program over the year, helps organize client goals as they progress through the program, and sets clear objectives for moving through and completing the program.

Phase 1: Acute Stabilization

Length: 4 Months

Goal: the primary goal of the acute stabilization phase is to assist the client in meeting their immediate needs supportive of initial abstinence from alcohol and drugs.

Actions:

- Client works with staff to address immediate treatment needs up to and including detoxification to help support the client in abstaining from substance use in a safe manner.
- Client will develop a Diversion Case Plan with their case manager within the first month of the program.
- Client will engage in the recommended AODA treatment.
- Address other immediate needs and/or safety concerns including but not limited to: medical, mental health, psychiatric, housing, and transportation.
- Client will meet with their case manager two to three times per week.
- Client will submit alcohol and drug testing at least two to three times per week.
- Focus of the first phase is to help the client become stable and ensure they have started taking steps to getting the services they need to be successful in the program and in their recovery.

Graduate:

- Client has a developed Diversion Case Plan
- 1 month of demonstrated sobriety
- Client has engaged in the recommended AODA treatment
- Client has made progress toward stabilization goals identified in the Diversion Case Plan (i.e.: followed through with necessary medical appointments, had any needed mental health or psychiatric assessments, obtained stable housing, and has transportation to and from appointments, and other identified needs).

Phase 2: Clinical and Social Adaptation

Length: 4 months

Goal: the client demonstrates regular engagement in treatment and the ability to apply treatment topics and skills to their daily life. In addition, the client adapts their social environment to support sobriety and makes progress toward daily living supportive of recovery.

Actions:

- Client is regularly attending and participating in the recommended AODA treatment.
- Client is engaged in other treatment services as needed.
- Client is making progress toward treatment plan goals.
- Client demonstrates an awareness of high-risk situations for substance use and an effort to avoid high-risk places and peers.
- Client starts identifying sober supports.
- Client has made progress toward attaining stable housing, transportation, and/or financial support needed to follow through with treatment and other services.

- Client demonstrates a basic understanding of AODA educational topics including: identifying and managing triggers and cravings, relapse prevention, healthy daily living skills, and other areas as determined by their treatment provider.
- Client will have a six-month court review hearing.
- Client will submit alcohol and drug testing at least twice per week.
- Client will meet at least once per week for an individual meeting with their case manager.
- Client works with their case manager to identify longer-term goals supportive of long term recovery.
- Focus of the second phase is to support the client in their treatment and recovery efforts, reinforce what they've learned and support their ability to utilize those skills in their daily life.

Graduate:

- Client is engaged in and making progress in treatment.
- Minimum of 3 months sober.
- Client has continued to make progress in completing goals identified in their diversion case plan.
- Client has a basic sober support system put in place.
- Client has made completed treatment related goals.

Phase 3: Maintenance and Continuing Care

Length: 4 months

Goal: the client has developed a lifestyle and recovery plan that is supportive of long-term sobriety. The client will work with staff to ensure they have the ability to continue this after discharge from the program and set up any services needed for continuing care.

Actions:

Client will continue weekly individual appointments with their case manager.

Client will continue to submit at least two alcohol and drug tests per week.

Client will continue in the recommended AODA treatment.

Client will demonstrate knowledge of relapse prevention skills and the ability to utilize them to prevent return to substance use.

Client will continue utilizing sober support network and also develop pro-social activities supportive of long term recovery.

Client will work with their case manager to develop a continuing care plan to ensure the client can maintain services and positive gains made in recovery after they complete the TAD Program.

Graduate:

- The client will have at least 6 months of demonstrated maintained sobriety.
- Accomplished the majority of AODA treatment goals as determined by treatment provider.
- Client has developed a relapse prevention plan and a continuing care plan. The client will review these with their treatment provider and case manager.
- Client will attend the final scheduled court hearing to review the DPA and complete the court process.
- Client will have completed all identified goals on their Diversion Case Plan.

Graduation & Termination

I. Requirements for Graduation

- Client has complied with all conditions of the Deferred Prosecution Agreement.
- Client has demonstrated at least six months of maintained sobriety as verified through alcohol and drug testing.
- Client has completed the recommended AODA treatment. – OR – The client continues to be engaged in AODA treatment voluntarily or at the recommendation of their treatment provider.
- The client has made significant progress in attaining AODA treatment goals and demonstrated the knowledge and ability to apply skills learned in treatment in order to maintain sobriety.
- The client has completed a relapse prevention plan and a continuing care plan and reviewed it with their treatment provider and case manager.
- The client has met the identified goals included in their Diversion Case Plan.

II. Non-Compliance

You may be staffed for immediate termination if any of the following occur:

- Charged with a new criminal offense.
- Attempt to tamper with, dilute, adulterate, or otherwise or alter test results.
- Falsified medical/court/or other documents to falsify compliance with program requirements.
- Violence or threat of violence directed at anyone.

Instances of Non-Compliance:

- Missed appointment without verified and approved excuse.
- Delay of engagement in the recommended AODA treatment.
- Discharge from recommended treatment provider due to non-compliance.
- Positive drug screen or preliminary breath test.
- Dishonesty about use.
- Failure to meet expectations of the Diversion Case Plan.

Responding to Noncompliance:

- Any instances of non-compliance will be addressed with the client as they occur.
- Responses to noncompliance depend on the violation and the client's overall participation in the program and may include but are not limited to:
 - Increase in alcohol and drug testing frequency.
 - Increase in case management meetings.
 - Homework assignment related to the violation.
 - Communication with the client's treatment provider(s) and/or probation agent.
 - Recommended increase in level of care (this pertains to AODA treatment and would be recommended if the treatment provider agreed due to the client's inability to maintain sobriety).
 - Extended program length.
- If a client disagrees with an instance of noncompliance, they may ask to have it reviewed by the program coordinator.

III. Termination Procedures

- Repeated instances of noncompliance will put a client at risk of being discharged from the program and will result in a letter being sent to the District Attorney's Office and the client's defense attorney. This will likely result in a court hearing being scheduled to address the client's noncompliance with the conditions of the program and the DPA.
- The case manager will staff the client's case with the program coordinator.
- The case manager will review the letter regarding noncompliance with the client before it is sent.
- The case manager, client, and potentially the program coordinator will develop a "behavioral contract" that summarizes the noncompliance and expectations the client must meet in order to continue in the program.
- A client that follows all expectations of the behavioral contract may be allowed to continue in the program.
- Any program violations after the behavioral contract is developed will result in termination from the program.
- If a client is terminated from the program, a similar procedure will be followed in which a letter outlining the reasons for termination will be sent to the District Attorney's Office and the clients' defense attorney.
- Termination from the program will likely result in the District Attorney's Office moving to revoke the Deferred Prosecution Agreement and a sentencing hearing being scheduled.
- If the primary reason for discharge is continued substance use and/or failure to engage in treatment, staff will review treatment options, resources, and make a referral for the client if they wish prior to discharge. We recognize that stopping substance use is very difficult, and even if a client is terminated from the program deserves every opportunity to get help for their substance use disorder.

Important: The District Attorney's Office has the authority to revoke the Deferred Prosecution Agreement for any violation of that agreement. The judge also has the authority to revoke the Deferred Prosecution Agreement even if program staff advocate that a client continue in the program.

Note Regarding Non-Compliance and Termination

It is our goal that every seriously motivated client with the desire to recover from his or her substance use successfully complete the program. We encourage clients to be open and honest with program staff about struggles they may be having or additional needs they have in order to develop a successful recovery plan. If there are times when a client is struggling that result in instances of non-compliance these can serve as intervention points to provide clients what they need to succeed. We understand that trying to develop a sober lifestyle is not easy, and that it is very difficult, if not impossible to do alone. Program staff will work with clients to achieve goals related to sobriety and provide them the services they need. We encourage open communication of those involved in a client's program in order to better serve the client and to help discourage addictive behavior and thinking that would encourage clients to avoid potential consequences of their substance use. Except for in extreme circumstances all clients will be given chances to obtain the help they need before being terminated from the program.

Conclusion

The goal of the Washington County TAD Program is to help you achieve a life free of crime and dependence on mind-altering substances. The program staff and treatment providers are here to assist you, but the final responsibility is yours. To succeed, you must be motivated to commit to a drug free and crime free life style and work toward full integration into the community as a productive member of society. We look forward to assisting you with this journey.

Contact Information

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