

ST. MARY PARISH ADULT DRUG COURT OUTPATIENT CLINIC

A DRUG COURT TREATMENT PROGRAM

IN AND FOR THE

16TH JUDICIAL DISTRICT COURT
PARISH OF ST. MARY
FRANKLIN, LOUISIANA



POLICY & PROCEDURE MANUAL

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ST. MARY ADULT DRUG COURT OUTPATIENT CLINIC
POLICY & PROCEDURES MANUAL

INTRODUCTION

St. Mary Adult Drug Court Outpatient Clinic began operation on January 6, 1997 as a drug treatment court program and serves the Parish of St. Mary with a population of 52,000. The court is located in Franklin, Louisiana and the Clinic is located in Bayou Vista, Louisiana, at 1101 Southeast Boulevard. The Clinic's phone number is 985-399-5777 and the fax number is 985-399-4777. Our e-mail address is llevy@drugcourt.com. The intensive outpatient program is modeled on the Pensacola Drug Court Program and utilizes the 12 Step recovery principles of Alcoholics Anonymous.

In 1998, St. Mary Outpatient Drug Court Clinic opened another Clinic in New Iberia, Louisiana to serve the western end of the 16th Judicial District.

Honorable William D. Hunter, District Judge was instrumental in the planning and implementation of this program for the 16th Judicial District Court. As of this writing, he is the drug court Judge for both the adult and juvenile programs. This manual addresses the policies and procedures of the adult drug court program.

When Judge Hunter began to assemble the team for the drug court program, he called upon Lars Levy, the Administrator for Fairview Treatment Center and Claire House for Women & Children, to coordinate the treatment component of the program. Since that time, they have worked together, along with members of the District Attorney's Office, Probation, Indigent Defenders' Office and the community police agencies to form a coalition to target and treat chemically addicted offenders in the 16th Judicial District of Louisiana.

This effort would not be possible without the help of the Louisiana Supreme Court and the Office for Addictive Disorders for the Louisiana Department of Health & Hospitals. St. Mary Adult Drug Court Outpatient Clinic is a not for profit agency that provides treatment for individuals diagnosed with chemical dependency. St. Mary Adult Drug Court Outpatient Clinic operates under the licensing standards set forth by the Louisiana Department of Health & Hospitals, Office for Addictive Disorders. This manual is not an attempt to duplicate the Licensing Standards Manual, it is merely to address the policies specific to operating a treatment component of a drug court program.

MISSION STATEMENT

It is the belief of The St. Mary Adult Drug Court Team that the criminal justice population has a substance abuse problem; that is the primary factor in the causation of crime within St. Mary Parish and the 16th Judicial District of Louisiana. The St. Mary Adult Drug Court Team will provide judicial monitoring, legal support from the District Attorney and Defense Bar, intensive outpatient substance abuse treatment, supervision through probation and parole, and the support of Law Enforcement with the objective of reducing the rate of incarceration in Louisiana along with the goal of enabling clients to free themselves of addictive disorders.

PROGRAM PHILOSOPHY

Alcoholism and drug dependency are regarded as diseases with multiple causation, which may involve emotional, physiologic, environmental and maladaptive factors.

The St. Mary Adult Drug Court Outpatient Clinic is an outpatient program for the rehabilitation of chemically dependent adults who are referred by the 16th Judicial District Court.

The philosophy of the program is that, utilizing appropriate adaptive mechanisms, availing oneself of the resources of family, friends, community and treatment, and also structuring a suitable recovery environment, all people would be capable of living free from abuse of dependency of alcohol or other drugs. The St. Mary Adult Drug Court Outpatient Clinic is designed to mentally and emotionally rehabilitate most patients within a treatment period structured to meet their individual needs so that they should be able to successfully participate in outpatient treatment free from alcohol or other drugs. The treatment modalities used to accomplish this is the concept that is similar to the methods used by most recognized programs for substance abusers. Involved is the utilization of group, individual and family therapy, the self help programs of AA/NA and case management in a structured and disciplined environment.

For those patients, who because of their long history of substance abuse involvement, experience withdrawal symptoms severe enough to interfere with daily living, referral to a detox facility, whether social or medical, are performed. Clients unable to maintain sobriety while participating in the program may require referral to an inpatient facility in order to provide some stability in which to cope with their substance dependency.

STANDARD I

A. LA R.S. 13:5301-5304

St. Mary Parish Adult Drug Court is in practice and compliance with LA R.S. 13:5301-5304. See LA R.S. 13:5301-5304 in the index.

B. THE DRUG COURT TEAM

The Judge is the “leader,” he oversees the entire program. He works with all other players from admission to discharge. He monitors progress of clients, meets with clients on a regular basis at status hearings. The Judge has the final word on sanctions and incentives.

The District Attorney or Assistant District Attorney assigned to drug court meets regularly with all staff to discuss client issues and attends status hearings. He refers all clients for admission. He recommends appropriate sanctions for non-compliance. He monitors probation officers and police officers to assure compliance with court instructions.

The Indigent Defender or client’s personal attorney meets with clients prior to admission to advise on program criteria and expectations. He also helps clients discern whether the program is appropriate for their particular case. He advises clients regarding the consequences of failure to complete the program. He is present at time of pleading and revocation. He also addresses legal issues should they arise during client’s participation.

The Police Liaison acts as a conduit between the Court and treatment provider, working with all parties to assure client compliance. She works closely with the Judge, relaying information obtained in the field such as; clients’ home environment, work environment and places frequented by the client that may constitute an obstacle to maintaining sobriety. The liaison also follows up on any bench warrants issued and communicates daily with all community police agencies to monitor any re-arrests of participants.

The Administrator is responsible for the treatment component of the program. He supervises the Program Director and all administrative functions of treatment for the 16th Judicial District Drug Court including financial and budgetary responsibilities. He establishes policy and procedure in accordance with the Louisiana Department of Health & Hospitals and reports to the Regional Administrator for that agency.

The Program Director reports to the Administrator. She is responsible for the day-to-day operations of the Clinic including the training and supervision of all counseling staff. She is also responsible for the supervision and training of the drug testing component as well as the case management staff. She attends all staff meetings and status hearings. She directs activities and reporting to ensure quality and care to all clients.

The Primary Counselor is responsible for facilitating the client’s recovery through intensive outpatient treatment. The treatment will include education in chemical dependence and relapse

prevention. The methods used will include individual and group therapy sessions, as well as groups specifically targeted to cultural and women issues. The counselor will be responsible for maintaining accurate and complete case records on each client. He will attend status hearings and make recommendations to the court with regard to appropriate sanctions and incentives and phase advancement or demotion.

The Case Manager is involved in screening clients for admission and once accepted, begins to address client needs for ancillary services. These services include; medical, educational and employment needs. They may also include detox and/or inpatient treatment. He also follows up on status of client when referred to another facility. The case manager also prepares reports and maintains client records relating to employment and medical testing. The Case Manager is responsible for compiling all of the data that is presented at each status hearing. This status report lists each person on that day's docket, what happened at the last court appearance, what the current status of the client is in treatment, recommendations based on clients' participation and tracks what happens at the current status hearing. This report is given to the Judge, the Assistant District Attorney, Probation Officer and treatment provider. The report is also used in the staff meeting prior to the status hearing.

C. OTHER SUPPORTIVE TEAM MEMBERS

The Probation Officer screens all candidates and makes referrals for assessment by the treatment provider. Once client is admitted, probation collects all fees due to the court, monitors any sanctions rendered by the court, i.e.: community service. The probation officer meets weekly with treatment staff to monitor client participation. She is available daily should problems arise. She is assigned exclusively to the drug court program. She reports to the court on a regular basis concerning status of clients and attends all status hearings.

The Support Staff includes Licensed Practical Counselors, Licensed Social Workers, Board Certified Substance Abuse Counselors, Lab Technicians, an Administrative Manager, Van Driver, Contract Therapists and Psychiatrist and Clerical employees.

The Evaluator will do an independent process and outcome evaluation. At the time of this writing, the program is beginning another evaluation process with the Louisiana Supreme Court. The Supreme Court is currently collecting monthly data that will be used to evaluate the effectiveness of the program. The program also compiles data such as the Addiction Severity Index at intake and again at completion of the program. Additionally, the program has been evaluated as part of an U. S. Office of Justice Programming evaluation conducted by Dr. Ken Robinson and Dr. Faye Taxman

STANDARD II

A. ELIGIBILITY SCREENING

St. Mary Parish Drug Court screens all clients for eligibility in accordance with the Drug Court Law Statue, La. R.S.13: 5301-5304.

ARREST

The probation officer assigned to Drug Court by the District Attorney's Office screens defendants within 48 hours of arrest. The admission criteria established by the District Attorney's Office is designed to identify those individuals who qualify for the intensive outpatient treatment the program demands. This criterion is outlined in the section titled "Admission Criteria."

REFERRAL

Referrals from any one of the following sources: 16th Judicial District Court, local city court jurisdictions, or self-referrals. The St. Mary Parish Drug Court and the District Attorney's Probation Department then screen all referrals for eligibility.

The attached chart shows the progression of the defendant from arrest to admission.

B. CRITERIA FOR ADMISSION

- ! Adults age 17 and older with a history of chemical dependence and addiction.
- ! Persons charged with misdemeanor or felony crimes with no history of violence, gang affiliation or significant or substantial drug dealing.
- ! Criminal history may include crimes other than drug charges.
- ! When the arrest is for drug possession the amount must be consistent with personal use.
- ! The defendant must not have holds from other jurisdictions.
- ! A weapon cannot be used in the commission of crime.
- ! The defendant is not on probation or parole from previous activity.
- ! There cannot be other felony crimes or misdemeanors pending or charged in the same instrument that remain unresolved at the time of admission.

! All admissions must have prior screening and approval by the District Attorney's Office.

C. TREATMENT SCREENING

Prior to admission, after initial screening by the District Attorney's Probation Officer assigned to the drug court program, defendants submit to a screening process by St. Mary Adult Drug Court Outpatient Clinic's Case Manager. Where indicated, release forms are signed and sent to previous treatment providers including mental health professionals. This information is assessed to determine appropriateness for treatment.

The forms utilized in the screening process are attached and listed below:

- § 5a - Intake Screening
- § 5b - Alcohol Stages Index
- § 5c - Substance Abuse Questionnaire
- § 5d - South Oaks Gambling Screen
- § 5e - Consent for Drug Screen
- § 5f - Consent to Release Information to Court and its Officers
- § 5g - SASSI (Substance Abuse Subtle Screening Inventory)

Once the above-mentioned forms are completed and scored, the Case Manager/Counselor consults with the Program Director or Clinical Supervisor on staff and a determination is made with regard to acceptance into the drug court program. Much attention is made to be very inclusive as to admission procedures.

D. ARRAIGNMENT

The Indigent Defender or the defendant's personal attorney meets with prospective clients to inform them of their rights. The probation officer informs them of the expectations and requirements of the program. These requirements are outlined in the client handbook given to each client at intake. The requirements are listed in this manual in the section titled "Program Standards, Treatment Methods".

E. PLEA AGREEMENT

The defendant must plead guilty to the police report in order to be admitted into the drug court program. The Drug Court Judge imposes sentencing and set aside post adjudication. Plea-ins

takes place on Monday mornings at 9:00am. The defendant is issued an appointment card at court with an assigned counselor, time, and date to appear at St. Mary Adult Drug Court Outpatient Clinic. The intake is done and treatment begins that day.

There is a 30-day opt out period for the court and 14 day opt-out period for the client. During this period, clients are continually assessed for appropriateness and motivation for treatment, monitored closely by probation and police liaison officer and begin a relationship with the drug court judge. It is hoped that this close scrutiny will be a predictor of success. It also gives the client an opportunity to make the commitment to recovery based on first hand knowledge and experience of the program.

F. COURT CONSENTS

All clients sign a “Consent to Release Information to Court and its Officers” form to allow communication about confidential information and participation and progress in treatment in compliance with 42 CFR, Part 2 and LA R. S. 13:5301-5304.

STANDARD III

A. PROGRAM STANDARDS

TREATMENT REQUIREMENTS AND METHODS

Substance abuse treatment services will be provided by a multi disciplinary team including a licensed practical counselors, licensed social workers, licensed addiction counselors, substance abuse counselors, a medical director who is a licensed physician, a psychiatrist, a program director or clinical supervisor, case managers and support staff. The team will participate in the provision of treatment and aftercare services for up to 200 clients. St. Mary Adult Drug Court Outpatient Clinic will comply with the regulations as set forth in the Louisiana Department of Health & Hospitals, Standards Manual for Licensing Alcohol and Drug Abuse Programs and the Office for Addictive Disorders Monitoring Plan.

- < Assessment: To determine appropriate level of care and type of treatment recommended.
- < Referrals will be completed by the case manager utilizing state funded facilities and/or private programs where appropriate.

Should a client meet criteria for program admission as outlined on Page 4 “Eligibility Standards”, the following services will be performed when appropriate to that client’s treatment plan:

- < Intensive Outpatient; Clients will participate at four times per week in Phase I, at least two times per week in Phase II, at least once per week in Phase III, and group once a week for three months, and monthly individual sessions in Phase IV, and at least one time weekly in Aftercare. Each contact with clients in treatment will, regardless of Phase, last at least 3 hours in duration. Group sessions are scheduled during the evening to accommodate work and school schedules.
- < Three staffings will include Initial, Treatment Planning and Discharge. Staffing shall be required within 30 days of admission into the program and at least every 90 days thereafter until discharge.
- < The provider agrees to provide 4 phases of treatment, each varying in length of stay and intensity. The course of treatment in all 4 phases will culminate in the successful completion of the treatment program after a minimum of 12 months. Each client is required to complete the tasks assigned to each phase of treatment. These phase advancement tasks are outlined in the client handbook that is given to the client at intake. The phase advancement tasks start on page 12.
- < Provider agrees to report to the 16th Judicial District Court and its officers on the status of all participants at the regularly scheduled status hearing and whenever requested.

Treatment will provide an educational series of lectures consisting of topics including, but not limited to;

- Relapse Prevention
- Disease Concepts
- Anger and Conflict Resolution
- Vocational and Educational Enhancement
- Relationship Skills
- Family Dynamics
- Parenting Skills
- Cultural Issues
- Cross Addiction
- Spirituality
- Prevention of Sexually Transmitted Disease
- HIV Education
- Women's Issues
- Coping Skills
- Gambling
- Character Development
- Program Orientation Series
- Life Skills Training

- < The provider will provide individual therapy on an as needed basis as determined by the clinical staff and/or the client. The staff will make clients aware of this service and urge them to utilize it.
- < The provider agrees to offer family and relationships counseling each week. Education and therapy specific to the individual needs of the participants will be provided.
- < The provider agrees to provide case management services to clients in order to facilitate the utilization of available resources within the community
- < The provider will provide referrals for inpatient and/or detox treatment where indicated. When appropriate, clients may be referred for a psychological evaluation by a licensed psychologist. The clinic maintains a contract with its own psychiatrist. Pending the outcome of such an evaluation, clients may see by the staff or be referred for on-going treatment to St. Mary Mental Health or a private provider of such services. In the case of a co-occurring disorder client, the client may see the mental health counselor and/or caseworker, LPC or LCSW as well as their primary substance abuse counselor simultaneously.
- < The case manager will monitor all outside treatment until the client returns to the drug court program or is discharged.

- < Each client will receive a “client handbook” upon admission. The handbook outlines specific phase advancement tasks that are required to complete each phase. Client will attend Program Orientation Session with their primary counselor within 14 days of entering Phase I.
- < All clients are required to participate in either AA or NA groups independent of their regularly scheduled sessions at the clinic. This attendance is monitored by their primary counselor and reported at the status hearing.
- < The provider will perform urine drug testing on all clients throughout program participation on a random basis. Color Codes and phone calls are used.
- < The provider will provide an aftercare component to clients that have completed all 4 phases of treatment. The length of time in aftercare will be determined on an individual basis after consultation between the primary counselor and the client. Attendance in aftercare is voluntary. All graduates are encouraged to enroll. Clients will attend weekly and drug testing is random.
- < Fees are assessed at intake and are based on the client’s ability to pay. There are fines and fees that are due and payable to the District Attorneys’ Office and are separate from treatment fees. All treatment fees are based on a sliding scale provided by the Louisiana Department of Health & Hospitals. In the event that a treatment fee is assessed, terms are agreed upon and payment commences within the first 30 days. All clients are charged for drug screens, regardless of income. Those fees are:

Phase I	\$10.00
Phase II	\$7.50
Phase III	\$5.00
Phase IV	\$5.00
Aftercare	\$5.00

- < Once a client becomes employed, their ability to pay is re-assessed and they may have a treatment fee. All clients are informed of this condition at intake.
- < All clients must submit to a yearly physical examination by a licensed physician. The clinic also conducts mandatory tuberculosis and VDRL testing. The clinic offers voluntary HIV and pregnancy testing to all clients.

B. CASE MANAGEMENT

All clients receive a chart number and charts are maintained in compliance with licensing standards set forth by the State of Louisiana, Department of Health & Hospitals.

Each chart includes the following, documentation can be found in the index:

- Family Attendance Calendar Log
- Client Termination & Discharge Summary
- Case Activity Form
- Emergency Information
- Client Data Sheet
- Patient Rights
- Drug Screen Consent
- Treatment Plans
- Client Contract
- Progress Notes
- Intake Form
- ASI
- Substance Abuse Evaluation
- Alcohol Stages Index
- Gambling Assessment (SOGS)
- SASSI
- Labs
- Medical Screening
- Doctor's Progress Note
- Referral Form
- Phase Advancement Checklist
- Court Reports
- Correspondence
- UA Log Sheet
- Urine Screen Results
- Group Therapy Rules
- Orientation Session
- Releases of Information
- Change of Address Form
- Consent For Blood Work and TB Testing
- Statement of Income
- Proof of Income

During the intake/assessment process, client needs are addressed by the case manager to determine appropriate referrals for ancillary services such as; health care issues, education and job training and placement. Referrals and appointments are scheduled; a follow up is done to monitor progress.

The case manager maintains these records, as well as any additional referrals for services including psychological evaluations and mental health appointments.

C. PHASE ADVANCEMENT TASKS

These are the Phase Advancement tasks that have been extracted from the client handbook.

PHASE I ADVANCEMENT TASKS

ATTENDANCE

Each client must complete 8 weeks (4 sessions per week total of at least 32 sessions) of Education/Experiential work as found on the lecture schedule. Failure to appear for these lectures (whether excused or unexcused) may affect a client's ability to advance to Phase II. Clients must attend 1 individual counseling sessions per month (with your assigned primary counselor).

Clients are not allowed to miss groups, unless there is a medical reason for the absence. Any other reason for missing group must be pre-approved by your counselor. If you do

not have a medical excuse or did not receive permission prior to your absence from group, the judge will impose sanctions.

MAINTAINING SOBRIETY/DRUG FREE STATUS

Any positive drug screen/breath test will result in sanctions and possibly delay advancement to Phase II.

Clients must remain sanction free for one month before advancing to Phase II.

Maintain all conditions of probation including curfew and drug areas as well as bars, casinos, etc. (This will be monitored by Compliance Officer).

AA MEETINGS

Clients must provide documentation of having attended 3 AA/NA meetings per week. Your AA sheets are due the *first* group meeting of each week. Clients may receive 1 signature from attending church. You must attend the entire meeting in order to receive credit for the meeting. During Phase I, clients are encouraged to attend Open AA Meetings. *Open* AA Meetings are meetings that are open to the general public.

FAMILY ATTENDANCE

Clients are required to have family attend the family group therapy on Tuesday nights. Clients must have a minimum of 5 documented family group attendances in order to advance to Phase II. Family members must be **18 years old or older to attend**, unless pre-approved by your counselor.

You are not allowed to have a client currently enrolled in Drug Court attend Family Group Sessions on your behalf.

EMPLOYMENT/EDUCATION

Every client must get a full-time job or enroll in an educational program. Make an appointment with the Employment Case Manager for job referrals and educational placement. Clients are given one month to gain full time employment once entering the program. Clients are not allowed to work offshore or have an offshore-type of work schedule during Phase I because you need to attend meetings and be available for drug testing etc. Talk with your counselor about this if you need more information.

Clients needing to enhance their job performance skills may be referred to Job Readiness Class.

Clients going to school for less than 5 hours a day must attain a part-time job.

FEES

Clients must have a minimum balance of \$80.00 on their drug screen bill in order to advance to Phase II.

ASSIGNMENTS

1. Complete written work on a “*Drug History*.”
 - This assignment must be checked by your counselor and marked as completed on the group roster in order to be eligible to advance to Phase II.

PHASE II ADVANCEMENT TASKS

ATTENDANCE

Each client must complete 16 weeks (2 sessions per week total of at least 32 sessions) and all assigned random drug screens. Failure to appear for these sessions (whether excused or unexcused) will affect a client’s ability to advance to Phase III.

Clients must attend 1 individual counseling session per month (with your assigned primary counselor).

Phase II will last a minimum of 16 weeks~32 sessions.

Clients are not allowed to miss 2 groups in a row due to work, unless you are employed offshore. If you miss two groups in a row for work reasons, the judge will impose sanctions.

MAINTAINING SOBRIETY/DRUG FREE STATUS

Any positive drug screen/breath test will result in sanctions and possibly delay advancement to Phase III.

Clients must have at least 2 months drug-free or one month without any sanctions by the judge in order to qualify for advancement to Phase III.

AA MEETINGS

Clients must provide documentation of having attended 3 AA/NA meetings per week. Your AA sheets are due the *first* group meeting of each week. Clients may receive 1 signature from attending church. You must attend the entire meeting in order to receive credit for the meeting. Clients will be expected to obtain a 12-Step (AA/NA) Sponsor during Phase II. Clients must turn in a *sponsor letter* once a month.

FAMILY ATTENDANCE

Clients are required to have family attendance at Family Group therapy on Tuesday nights. Clients must have a minimum of 4-documented family group attendances in order to advance to Phase III. If you have trouble getting your family to attend, talk with your counselor to find ways to get your family involved. Family members must be **18 years old or older to attend**, unless pre-approved by your counselor.

You are not allowed to have a client currently enrolled in Drug Court attend Family Group Sessions on your behalf.

EMPLOYMENT/EDUCATION

Clients must keep a full-time job or be enrolled in an educational program. Your Employment Case Manager can help you with job referrals and educational placement. Clients may have offshore jobs or have an offshore-type work schedule after 6 weeks of continuous success in Phase II. Clients' offshore privileges, however, are based on their participation in the program. You must sign an Offshore Contract with your counselor stating you understand the rules of working offshore and the procedure for making up missed groups and AA/NA meetings. Clients must notify their counselors before going offshore. Upon return from offshore, clients must provide a valid work excuse and return to treatment. Be aware that the Judge may take away offshore privileges if a client is not progressing, not following his or her program schedule, or not making progress in treatment. The goal of treatment is to recover from alcoholism and drug dependence, while a job is an important part of recovery, it can never be allowed to overshadow treatment. Clients may only work an offshore schedule of 7&7 or 14&7.

Clients going to school for *less than 5 hours a day* must attain a part-time job.

FEES

Clients must have a minimum balance of \$50.00 on drug screens bill in order to advance to Phase III.

TREATMENT ISSUES

Each client will develop a plan for his/her recovery with the help of a Counselor. This plan will include short-term goals for each client's specific needs and plans. A minimum of 5 short-term goals must be identified and completed in order to advance. The Counselor will help the client in honestly identifying these goals.

Maintain employment or school attendance (this will be monitored by Case Manager).

Maintain all conditions of probation including curfew and drug areas as well as bars, casinos, etc. (This will be monitored by Compliance Officer).

ASSIGNMENTS

1. Present “*Drug History*” in group.
2. Complete written work on “*Consequences I’ve paid due to my use of alcohol and/or other chemicals*” and present in group.
3. Complete written work on “*15 ways my alcohol and/or drug use has negatively affected my family or loved ones*” and present in group.
4. List “*Personal Defense Mechanisms*” and present in group.
5. Obtain “*12-Step Sponsor.*”
6. That sponsor will write at least one letter per month about the client and the client is responsible for giving that letter to his/her Counselor each month.
7. Complete and present “*Relapse Prevention Packet.*”
8. These assignments must be checked by your counselor and marked as completed on the group roster in order to be eligible to advance into Phase III.

PHASE III ADVANCEMENT TASKS

ATTENDANCE

Clients must attend 1 group counseling session per week and all assigned random drug screens. Failure to appear for these sessions (whether excused or unexcused) will affect a client’s ability to advance to Phase IV.

Clients must attend 1 individual counseling session per month (with your assigned primary counselor).

Phase III will last a minimum of 12 weeks~12 sessions.

Clients are not allowed to miss 2 groups in a row due to work, unless you are employed offshore. If you miss two groups in a row for work reasons, the judge will impose sanctions.

MAINTAINING SOBRIETY/DRUG FREE STATUS

Any positive drug screen/breath test will result in sanctions from the judge and possibly delay advancement to Phase IV.

Clients must have at least 2 months of continuous sobriety or be one-month sanction free in order to progress to Phase IV.

AA MEETINGS

Clients must provide documentation of having attended 3 AA/NA meetings per week. You must attend the entire meeting in order to receive credit for the meeting. Clients may receive 1 signature from attending church.

Clients must turn in a *sponsor letter* once a month.

FAMILY ATTENDANCE

Clients are required to have family attendance at family groups on Tuesday nights. Clients must have a minimum of 3-documented family group attendances in order to progress to Phase IV.

Family members must be **18 years old or older to attend**, unless pre-approved by your counselor.

You are not allowed to have a client currently enrolled in Drug Court attend Family Group Sessions on your behalf.

EMPLOYMENT/EDUCATION

Clients must maintain full-time employment or enroll in an educational program. Clients going to school for less than 5 hours a day must attain a part-time job.

FEES

Clients must have a minimum balance of \$50.00 on their drug screen bill in order to advance to Phase IV.

TREATMENT ISSUES

Update a Plan of Recovery with a counselor to include *new* short-term goals individualized to each client's specific needs and plans. A minimum of 5 short-term goals must be identified and completed in order to advance. These goals are to be developed conjointly with the counselor and the client.

Develop a Continuing Care Plan with a counselor.

Maintain employment or school attendance (this will be monitored by Case Manager).

Maintain all conditions of probation including curfew and drug areas as well as bars, casinos, etc. (This will be monitored by Compliance Officer).

ASSIGNMENTS

1. Complete written work on “*My Identification of Relapse Warning Signs and Triggers*” and present in group.
2. Complete written work on “*My Specific Plan to Address my Relapse Warning Signs and Triggers*” and present in group.
3. Turn in a “*Sponsor Letter*” once a month.
4. These assignments must be checked by your counselor and marked as completed on the group roster in order to be eligible to advance into Phase IV.

PHASE IV ADVANCEMENT TASKS

ATTENDANCE

Clients must attend one Phase IV group counseling session per week for 12 sessions. After 12 weeks, clients are eligible to graduate but must attend Aftercare Groups and follow Aftercare Program rules until graduation from the program. Until graduation, clients must still follow U/A procedures. Failure to appear for these sessions (whether excused or unexcused) will affect a client’s ability to graduate.

Clients must attend 1 individual counseling session per month (with your assigned primary counselor) and all assigned random drug screens.

Phase IV will last a minimum of 12 weeks or 12 sessions.

Clients are not allowed to miss 2 groups in a row due to work, unless you are employed offshore. If you miss two groups in a row for work reasons, the judge will impose sanctions.

MAINTAINING SOBRIETY/DRUG FREE STATUS

Any positive drug screen/breath test will result in sanctions from the judge. If a client tests positive for drugs or alcohol, the judge will sanction the client by demoting back to Phase III.

Clients *demoted to Phase III* will be required to stay in Phase III for a minimum of one month. Client must complete the Phase III assignments, “*My Identification of Relapse Warning Signs and Triggers*” and “*My Specific Plan to Address my Relapse Warning Signs and Triggers*” before being eligible to return back to Phase IV. When promoted back to Phase IV, clients must restart the phase and complete the 12 weeks or 12 sessions.

Clients must have at least 3 months of continuous sobriety or two months without any sanctions from the judge in order to qualify for graduation.

AA MEETINGS

Clients will be required to have 2 AA Meetings weekly. You must attend the entire meeting in order to receive credit for the meeting. Clients may receive 1 signature from attending church. Clients must turn in a sponsor letter once a month.

FAMILY ATTENDANCE

Clients are encouraged to continue having family attendance at family therapy groups, however this is not mandatory in Phase IV. Family members must be **18 years old or older to attend**, unless pre-approved by your counselor.

You are not allowed to have a client currently enrolled in Drug Court attend Family Group Sessions on your behalf.

FEES

All fees owed to probation for fees and fines and to the clinic for treatment or drug screens must be paid in full prior to being nominated for graduation.

TREATMENT ISSUES

Discuss with a counselor during monthly individuals how client's Continuing Care Plan is working. Make adjustments as needed.

Maintain employment or school attendance (this will be monitored by Case Manager).

Maintain all conditions of probation including curfew and drug areas as well as bars, casinos, etc. (This will be monitored by Compliance Officer).

ASSIGNMENTS

Develop Continuing Care Plan/Aftercare Plan Packet with a counselor. Clients must have their Continuing Care Plans approved by Program Director before being eligible for graduation.

ADDITIONAL THERAPIES:

Additionally, a licensed therapist conducts specialty groups for Relapse on Friday nights to assist client who have relapsed during the course of the program. There is also, a Gambling Group conducting by a licensed therapist to assist clients who scored a 3 or more on the SOGS (South Oaks Gambling Screen). Clients who did not score a 3 or more on the SOGS and feel they have a gambling problem are welcomed to attend as well.

PROGRAM COMPLETION AND AFTERCARE

GRADUATION

A participant who has successfully completed all tasks assigned to each phase of treatment, as outlined in the “Phase Advancement Tasks” and has paid all fees owed to the courts, probation and treatment provider is eligible to graduate from the program. A graduation ceremony is held at the 16th Judicial District Courthouse in Franklin, Louisiana, and certificates of completion and medallions are awarded to each graduate. The decision concerning probation dismissal and dismissal of charges (Article 893 for felony charges and Article 894 for misdemeanor charges) rests with the District Attorney. Some graduates, although successfully discharged from the treatment component of the drug court program may remain on probation and dismissal of charges may come at a later date.

AFTERCARE PROGRAM

Clients who have completed all requirements of Phase IV must start the Aftercare Program the following week. Aftercare groups meet for one hour weekly. Clients must contact the Case Manager and obtain an Aftercare urine screen color. Clients are required to attend weekly group sessions, monthly individuals, submit to random urine screens and follow all rules and policies of the treatment program and probation. Clients will remain in Aftercare until all treatment fees, probation fees, fines, and court costs are paid in full. Once these fees are paid in full, the client will be allowed to graduate from the program upon the next scheduled graduation, however the client must still follow the Aftercare Program until then.

Graduates of our program are also encouraged to attend Aftercare meetings. Helping graduates maintain recovery after they leave treatment is an important goal at Drug Court. Clients should continue to readjust their behavior to the ongoing reality of a pro-social, sober lifestyle.

REVOCATION

Once a participant has passed the initial opt out period, he/she may be unsuccessfully discharged from the drug court program due to the following conditions:

- < Re-arrest for a new crime, such as, a serious drug charge or commission of a violent crime, with or without a weapon.
- < A hold from another jurisdiction not previously discovered.
- < A pattern of failure to maintain sobriety.
- < Serious non-compliance with program rules.
- < A pattern of nonattendance to treatment and/or status hearings.

ANCILLARY SERVICES

The drug court program relies heavily on outside services provided in the community. We have met with and continue to work with agencies to provide services for the client such as education, parenting, housing, medical services and job skills. The client's needs are assessed at intake and appointments are scheduled to access those services. St. Mary Adult Drug Court Outpatient Clinic has entered into cooperative agreements with the respective agencies. The agencies are listed in the section entitled "Qualified Service Organization Agreements".

STANDARD IV

DRUG SCREENING

The policy of St. Mary Adult Drug Court Outpatient Clinic with respect to drug screening is based on a random color-coded system. Additional tests such as oral swabs are used with GCMS confirmation available.

A. RANDOM TESTING

Clients are given the UA line telephone number to call daily for their urine screen color. Each phase is given a color suiting to SCDCO requirements for the randomness of its urine screens. Clients are given a color specific to their phase and/or counselor. Each client is given a handbook that outlines specific information for days and times to contact the UA line for urine screens. Clients are also informed that they may be asked to provide a urine specimen on days when their color is not called.

Amount of times colors are called:

- Phase I—2-4 times per week
- Phase II—2-3times per week
- Phase III—1-3 times per week
- Phase IV—1-4 times per month
- Aftercare—1-3 times per month

B. URINANALYSIS

During the screening at the Clinic, the defendant is required to submit a full panel drug screen. A positive test result does not exclude a defendant, but is used to determine first course of treatment, which may be medical or social detox or inpatient care. Additional drug screening that may be used includes oral swabs (saliva testing). A recommendation is made to probation based on the results of the total screening.

This drug screen includes testing for the following drugs of abuse:

- | | |
|--------------------------|--------------------|
| ○ Amphetamines | ○ Marijuana |
| ○ Barbiturates | ○ Methadone |
| ○ Benzodiazepines | ○ Opiates |
| ○ Cocaine | ○ PCP |
| ○ Ethanol | ○ Soma |

C. ORDERING TESTS

Full panel drug screens will be ordered on any prospective client that comes to the Clinic to be

screened for admission to the program. Full panels will also be ordered on every client entering the program and on clients that have been absent for a week or more. Any positive tests must be repeated at each testing until 2 consecutive negative screens have been recorded. From that point on, only 2 panels should be ordered for each client being tested. These 2 panels should vary depending upon reasonable suspicion or clients' drug of choice.

D. THE COLLECTOR

SECON provides St. Mary Parish Drug Court with a trained collector. A collector is a trained individual who instructs and assists a donor at a collection site, receives and makes an initial inspection of the urine specimen provided by a donor, and initiates and completes the Drug Testing Chain of Custody Form.

A collector should have appropriate identification. The collector is required to provide his or her identification (or collection company identification) if requested by the donor. There is no requirement for the collector to have a picture I.D. or to provide his or her driver's license with an address. Also, the collector is not required to provide any certification or other documentation to the donor proving the collector's training in the collection process.

E. COLLECTION SITE

1. A collection site is a facility (permanent or temporary) where a donor provides a specimen for a drug test. A collection site must have:
2. A restroom/stall with a toilet for the donor to have privacy while providing the urine specimen. The presence of a toilet is not absolutely necessary when a single-use collection container is used that has sufficient capacity to contain the entire void. Whenever available, a single toilet restroom is preferred. All types of restrooms including a mobile facility (e.g., a vehicle with an enclosed toilet) are acceptable.
3. A source of water for washing hands that, if practical, is external to the restroom/stall where urination occurs. If a water source is not available, providing a moist towelette outside the restroom/stall is an acceptable alternative.
4. Security features to prevent unauthorized access to the site during the collection.
5. Clients will be admitted into the clinic and the collection area in a controlled manner. Only 5 clients per staff member will be permitted at any one time in the collection area.
6. Features to prevent the donor or anyone else from gaining unauthorized access to the collection materials/supplies. The collector must ensure that the donor does not have

access to items that could be used to adulterate or dilute the specimen (e.g., soap, disinfectants, cleaning agents, water).

7. Features to provide for the secure handling/storage of specimens from collection until shipment.

F. COLLECTION SUPPLIES

The following items must be available at the collection site to conduct proper collections:

1. Single-use plastic collection containers. Each collection container must be individually sealed using a tamper-evident system (such as, sealed plastic bag, shrink wrap, or another easily visible tamper-evident system), be large enough to easily catch and hold at least 55 mL urine, and have graduated volume markings clearly noting levels of 45 mL and above.
2. Single-use plastic specimen bottles. Each specimen bottle with cap must be sealed using a tamper-evident system (such as, sealed plastic bag, shrink wrap, or another easily visible tamper-evident system), be large enough to hold at least 35 mL (or they may be two distinct sizes of specimen bottles providing that the bottle designed to hold the primary specimen holds at least 35 mL of urine and the bottle designed to hold the split specimen holds at least 20 mL), have screw-on or snap-on caps that prevent leakage, have markings clearly indicating the appropriate levels (30 mL for the primary specimen and 15 mL for the split specimen) of urine to be poured into each bottle, be designed so that the required tamper-evident bottle label/seal on the CCF fits with no damage to the seal when the employee initials it nor with chance that seal overlap would conceal printed information, and be leak-resistant.
3. Drug Testing Chain of Custody Forms (CCF).
4. Tamper-evident seals. Occasionally, the tamper-evident label/seal provided with the CCF will not properly adhere to the specimen bottle because of environmental conditions (e.g., moisture, temperature, specimen bottle material). If this occurs, the collector should have a separate tamper-evident label/seal that can be used to seal the specimen bottle.
5. Leak-resistant plastic bags. The plastic bag must have two sealable compartments or pouches (i.e., one large enough to hold two specimen bottles and the other large enough to hold the CCF).
6. Absorbent material. The absorbent material is placed with the specimen bottles inside the leak-resistant plastic bag in case a specimen bottle leaks during shipment.

7. Shipping containers. Boxes or bags that are used to transport specimens to the laboratory and can be securely sealed to prevent the possibility of undetected tampering. A shipping container/mailed is not necessary if a laboratory courier hand-delivers the sealed leak-resistant plastic bags containing the specimen bottles directly from the collection site to the laboratory.
8. Secure temporary location. If the sealed leak-resistant plastic bag containing the specimen bottles is not immediately placed in a shipping container, the sealed plastic bag must always be maintained within the line of sight of the collector to ensure that no one has access to the specimen until it is placed in a shipping container or it must be placed in a secured temporary location (e.g., inside a refrigerator that can be secured, inside a cabinet that can be secured). If the collector always places the sealed plastic bags immediately into shipping containers, there is no need to have a secure temporary location available at the collection site.

G. DRUG TESTING CHAIN OF CUSTODY FORM (CCF)

All urine specimens must be collected using chain of custody. Chain of custody is the term used to describe the process of documenting the handling and storage of a specimen from the time a donor gives the specimen to the collector to the final disposition of the specimen. SECON provides the chain of custody. The chain of custody is completed by the Drug Court Staff and provided to the SECON staff during time allotted for client urine screens.

H. COLLECTION PROCEDURE

The following steps describe a typical urine collection procedure.

STEPS

1. The collector prepares the collection site to collect urine specimens. All collection supplies must be available, the area properly secured, water sources secured, and bluing agent placed in all toilets.
2. The collector begins the collection without delay after the donor arrives at the collection site.

Note: Do not wait because the donor is not ready, is unable to urinate, or an authorized employer or employee representative is delayed in arriving.
3. The collector requests the donor to present an acceptable form of identification as described above.
4. The collector reviews the instructions on the CCF with the donor.

5. The collector begins entering information and/or ensures that the required information is provided at the top of the CCF (the laboratory name and address and a pre-printed specimen ID number) and in Step 1 of the CCF (employer's name, address, and I.D. number (if applicable), donor SSN or employee ID number, reason for test, drug test to be performed, collection site information).
6. The collector asks the donor to remove any unnecessary outer clothing (e.g., coat, jacket, hat, etc.) and to leave any briefcase, purse, or other personal belongings he or she is carrying with the outer clothing. The donor may retain his or her wallet.
7. The collector directs the donor to empty his or her pockets and display the items to ensure that no items are present that could be used to adulterate the specimen. If nothing is there that can be used to adulterate a specimen, the donor places the items back into the pockets and the collection procedure continues.
8. The collector instructs the donor to wash and dry his or her hands, preferably under the collector's observation and must not wash his or her hands again until after delivering the specimen to the collector.

Note: The donor must not be allowed any further access to water or other materials that could be used to adulterate/dilute the specimen.

9. The collector either gives the donor or allows the donor to select the collection container from the available supply. Either the collector or the donor, with both present, then unwraps or breaks the seal of the collection container.

Note: Do not unwrap or break the seal on any specimen bottle at this time.

Note: Do not allow the donor to take anything except the collection container into the room used for urination.

10. The collector directs the donor to go into the room used for urination, provide a specimen of at least 30 mL.

Note: Pay close attention to the donor during the entire collection process to note any conduct that clearly indicates an attempt to substitute or adulterate a specimen.

11. After the donor hands the specimen to the collector, the collector must check the specimen volume, and inspect the specimen for adulteration or substitution.
12. The collector and donor complete the chain of custody form, seal the specimen, and prepare the specimen for shipping.

I. SHIPPING PROCEDURE

1. All specimens shall be prepared for shipping to the laboratory via overnight courier. The laboratory will provide the necessary shipping materials and airbills.
2. The laboratory will document receipt of each specimen delivered by the overnight courier.

J. LABORATORY PROCEDURE

1. The laboratory personnel accession the specimens, review the chain of custody forms for accuracy, inspect the specimen seals to ensure integrity of the sample. If there are no discrepancies, the specimen is prepared for testing. If the specimen numbers on the CCF and the security seal do not match, or the CCF is improperly completed, or the security seal is broken, the laboratory will issue a “No Test” for this specimen.
2. The screening procedure used at is immunoassay technology for the following five drug groups: cannabinoids, amphetamines, cocaine metabolite, opiates, and phencyclidine. In addition, to determine specimen integrity a urine creatinine concentration is assayed on all samples. If the creatinine is abnormal, the specific gravity is determined with a refractometer and the color, clarity and odor are noted. These measures of specimen character constitute the adulterant test. Samples suspected of chlorine, glutaraldehyde or soap adulteration are also tested further
3. After each run, the analyst must review and sign the printout and aliquot chain of custody after determining the quality control acceptability. A “negative batch report” of each test specimen is generated from the host computer, followed by a review of the run data by another technologist. The certifying officer will review and sign the accompanying forms and enter the results into the computer. All suspect positive and adulterants are held in the computer to be released at a later time.
4. Positive screened specimens are held in frozen storage, and/or submitted to GC/MS confirmation testing, when requested.

K. RESULT REPORTING

Final reports are submitted by SECON via their website. Urine screen results are stored on their secure website and available for viewing daily.

L. POSITIVE RESULTS

Any client that has been identified as having provided a positive result is given the opportunity to admit or deny using drugs. If the client admits to using, it is addressed therapeutically as part

of the client’s addiction and reported to the court for appropriate sanction. A review of the client’s relapse prevention plan will be conducted. A decision will be made as to whether the client is in need of referral for services outside the scope of this clinic, such as detox, inpatient treatment, or halfway house placement.

If the client denies using he or she is offered the opportunity to have the sample in question sent to the state contracted lab for GC/MS confirmation testing. The Judge offers the client the opportunity to have a GC/MS performed.

M. GCMS TESTING

St. Mary Parish Adult Drug Court Outpatient Clinic recognizes that samples are not confirmed positive until tested and confirmed by GC/MS testing procedures. All positive results are presumptive until the judge orders GC/MS testing and the client pays the fee for the GCMS to be performed.

The prices for **GCMS Testing** are as follows:

\$25.00	Alcohol	\$25.00	Marijuana
\$25.00	Barbiturates	\$30.00	Amphetamines
\$25.00	Benzodiazepines	\$50.00	Opiates
\$25.00	Cocaine	\$52.00	Soma

Positive urine samples will remain under the control of the Lab Tech once they are collected for up to 6 months.

Every effort must be made to avoid the possible risk of contamination of any sample to be tested. Should contamination be suspected, the sample in question will be disposed of and any results derived from sample will be disregarded and deleted from the clients’ record.

N. CUTOFF LEVELS

The cutoff levels established are those that have been agreed to with Louisiana Reference Labs (or other state contracted independent lab) as being detectable by GC/MS confirmation testing at the lowest levels possible in accordance with the “zero tolerance” policy of the drug court philosophy.

Amphetamines	500 ng/ml	Ethanol	20 mg/dl	Opiates	300 ng/ml
Barbiturates	200 ng/ml	Marijuana	50 ng/ml	PCP	25 ng/ml
Benzodiazepines	200 ng/ml	Methadone	300 ng/ml	Soma	100 ng/ml
Cocaine	150 ng/ml				

O. ADULTERATED SAMPLES

Any client suspected of providing adulterated samples will be asked to provide a second sample immediately. If the results of the second sample differ significantly from the results of the first sample, a third sample may be requested. Once all test results have been obtained, the client may be cleared of suspicion or face sanction for this violation.

P. INFECTION CONTROL

Any staff member involved in the collection, handling and testing or has contact in any way with urine specimens is required to wear protective gloves while working in this environment. In the event that a urine specimen comes in contact with anyone, the following safety precautions will be implemented:

- < *Eye Contact:* The eye should be flushed immediately with cold water and reported to the nurses' station on the 2nd floor of Fairview Treatment Center. An incident report must be completed and reported to the program director.
- < *Skin Contact:* The skin should be washed immediately with soap and water and an incident report completed. Notify the program director.
- < *Clothing Contact:* The clothing should be removed immediately if possible. If not, the affected area should be soaked and diluted immediately. The clothing should be changed at the earliest possibility. An incident report must be completed and the program director notified.

No food or drink is allowed in the Lab at any time.

STANDARD V

The Judge is the “leader,” of the entire program serving as a linkage between clients and the criminal justice system. He works with all entities from admission to discharge. He monitors progress of clients, meets with clients on a regular basis at status hearings. The Judge has the final word on sanctions and incentives.

The drug court team meets weekly to discuss the status of the clients. The drug court team consists of the district attorney, probation, indigent defender, and the treatment team. All parties offer information concerning the client’s progress in treatment. The judge is open to all feedback given by the team and use the information for issuing suitable incentives and/or sanctions.

A. INCENTIVES

Incentives are a vital “tool” in the drug court program. They vary, depending on circumstance, from simple encouragement and praise from the Judge to the graduation ceremony upon program completion. Many of our incentives are provided by the local businesses in the community. The incentives utilized are as follows:

INCENTIVES

- Phase advancement
- T-Shirts
- Baseball Caps
- Mugs
- Reduction in status hearings
- Sanction free recognition at graduation ceremonies (receive a special certificate and AA Big Book)
- Client of the month awards (parking spot, certificate, AA Big Book, and urine screen payment certificate)
- Urine screen payment certificates
- Extend curfew hours
- Travel out of state for special occasions
- Graduation
- Serenity Prayer Medallions

B. SANCTIONS

Sanctions are used whenever non-compliance becomes an issue. This schedule is an effort to achieve consistency and uniformity. The schedule is included in the client handbook. The idea is that if a client knows “up-front” what is expected and what the consequences of non-compliance are he will be more compliant. The perception of the program is likely to be viewed as fair and consistent. The sanctions utilized are as follows:

SANCTION SCHEDULE

I. Drug Screen Sanctions (DSS)—Positive Urine Screens, Unexcused No Show for Urine Screens, Stalls, and Diluted Urine Screens after the 3rd dilute are all counted together as DSS sanctions.

1. DSS—1	2 Days Jail
2. DSS—2	4 Days Jail
3. DSS—3	6 Days Jail
4. DSS—4	8 Days Jail
5. DSS—5	10 Days Jail
6. DSS—6	12 Days Jail
7. DSS—7	14 Days Jail
8. DSS—8	16 Days Jail
9. DSS—9	18 Days Jail
10. DSS—10	20 Days Jail
11. DSS—11	22 Days Jail
12. DSS—12	24 Days Jail
13. DSS—13	26 Days Jail
14. DSS—14	28 Days Jail
15. DSS—15	30 Days Jail
16. DSS—16	Revoke

Admitting to a Relapse Policy:

The guidelines for admitting to a relapse and receiving a lesser penalty are as follows:

- In order to receive a reduction on sanction time based upon a confession of a positive drug screen, a client must make a voluntary confession to his/her counselor by 3:00 p.m. on the day following the drug screen. This confession must be made in person, by telephone, on your counselor's voicemail, or to the Counselor on Call.
- Clients who blow positive on a breath test and contact their counselors afterwards, *do not qualify* for a reduction of sanction time.

II. Dilute Urine Screen

1. 1st Dilute 8 Hours Community Service
2. 2nd Dilute 16 Hours Community Service
3. 3rd Dilute 8 Hours Jail
4. Any dilutes after the 3rd diluted urine screen will be sanctioned as a DSS sanction and will be counted as the next DSS sanction based upon your sanction history.

III. No Show for Treatment (Unexcused)

1. 1st No Show 8 Hours Community Service
2. 2nd No Show 10 Hours Community Service
3. 3rd No Show 1 Day Jail

- | | |
|------------------------------|-----------------|
| 4. 4 th No Show | 1 Weekend Jail |
| 5. 5 th No Show | 2 Weekends Jail |
| 6. 6 th No Show | 6 Days Jail |
| 7. 7 th No Show | 8 Days Jail |
| 8. 8 th No Show | 10 Days Jail |
| 9. 9 th No Show | 12 Days Jail |
| 10. 10 th No Show | Revoke |

IV. Falsify AA Meetings and/or Community Service

- | | |
|----------------------------|----------------------|
| 1. 1 st Falsify | 1 Day Jail for Each |
| 2. 2 nd Falsify | 2 Days Jail for Each |
| 3. 3 rd Falsify | 3 Days Jail for Each |
| 4. 4 th Falsify | 4 Days Jail for Each |

V. Missed AA Meeting or Failure to Turn In AA Meetings

- | | |
|--------------------|----------------------------|
| 1. 1 st | 8 Hours Community Service |
| 2. 2 nd | 16 Hours Community Service |
| 3. 3 rd | 8 Hours Jail |
| 4. 4 th | 16 Hours Jail |
| 5. 5 th | 1 Weekend Jail |
| 6. 6 th | 2 Weekends Jail |
| 7. 7 th | 6 Days Jail |
| 8. 8 th | 8 Days Jail |

VI. No Show Monthly Probation Meeting

- | | |
|----------------------------|----------------------------|
| 1. 1 st No Show | 8 Hours Community Service |
| 2. 2 nd No Show | 16 Hours Community Service |
| 3. 3 rd No Show | 8 Hours Jail |
| 4. 4 th No Show | 16 Hours Jail |
| 5. 5 th No Show | 1 Day Jail |
| 6. 6 th No Show | 2 Days Jail |

VII. No Monthly Individual and/or Sponsor Letter

- | | |
|----------------------------|----------------------------|
| 1. 1 st No Show | 4 Hours Community Service |
| 2. 2 nd No Show | 8 Hours Community Service |
| 3. 3 rd No Show | 12 Hours Community Service |
| 4. 4 th No Show | 16 Hours Community Service |
| 5. 5 th No Show | 8 Hours Jail |
| 6. 6 th No Show | 16 Hours Jail |

VIII. Inpatient Treatment and Halfway House

- | | |
|-----------------------|---|
| 1. Leave or Discharge | Sanction may vary according to the reason for discharge |
|-----------------------|---|

IX. Falsify Drug Screens

1. **1st Falsify** **30 Days Jail**
2. **2nd Falsify** **Revoke**

X. No Show for Lab Work and Physicals

1. **1st No Show** **Verbal Warning**
2. **2nd No Show** **4 Hours Community Service**
3. **3rd No Show** **8 Hours Community Service**
4. **4th No Show** **12 Hours Community Service**
5. **5th No Show** **8 Hours Jail**

XI. Unemployed

1. **After 30 days in program** **5 Hours Community Service Daily**
2. **After 60 days in program** **8 Hours Community Service Daily**
3. **After 90 days in program** **8 Hours Community Service Daily and weekends in jail**
4. **After 15 days of losing job** **25 Hours Community Service per week**

XII. No Show for Job Interview

1. **1st No Show** **Verbal Warning**
2. **2nd No Show** **1 Weekend Jail**

XIII. No Monthly Check Stub

1. **1st No Check Stub** **Verbal Warning**
2. **2nd No Check Stub** **4 Hours Community Service**
3. **3rd No Check Stub** **8 Hours Community Service**
4. **4th No Check Stub** **12 Hours Community Service**
5. **5th No Check Stub** **16 Hours Community Service**

XIV. No Show for Job Readiness

1. **One day in jail for each no show.**

XV. Unauthorized Use of Prescription Medicine

1. **Same as DSS sanction schedule.**

XVI. AWOL

1. **One day in jail for each day or revoke.**

XVII. Re-entry Client Positive Urine Screen Schedule

1. **1st Positive** **5 Days Jail**
2. **2nd Positive** **10 Days Jail**

- 3. 3rd Positive 15 Days Jail**
- 4. 4th Positive Revoke**

XVIII. Casinos, Truck Stops, Clubs, and/or Bars Violation

- 1. 1st 1 Weekend Jail**
- 2. 2nd 2 Weekends Jail**
- 3. 3rd 6 Days Jail**

XIX. Curfew Violation

- 1. 1st 4 Hours Community Service**
- 2. 2nd 8 Hours Community Service**
- 3. 3rd 16 Hours Community Service**
- 4. 1st 8 Hours Jail**
- 5. 2nd 1 Day Jail**
- 6. 3rd 2 Days Jail**

VI. STATUS HEARINGS

A. STATUS HEARINGS SCHEDULE BY PHASES

- ❖ Phase I - Status Hearing every week.
- ❖ Phase II - Status Hearing every 2 weeks.
- ❖ Phase III - Status Hearing every 3 weeks.
- ❖ Phase IV - Status Hearing every 4 weeks.
- ❖ Aftercare - Status Hearing every 8 weeks.

B. INCENTIVES AND SANCTIONS

As reported in Standard V, all clients are subject to incentives and sanctions in accordance with their behavior. The judge implies sanctions according to our sanction schedule. Incentives are given to reward the quality and improved behavior of the clients.

C. PROBATION

16th JDC District Attorney's Office supplies St. Mary Parish Adult Drug Court with a Probation Officer. She is assigned exclusively to the drug court program. The probation officer collects all fees, fines, and restitution due to the court. Clients must schedule a monthly meeting with her to make payments. Clients are sanctioned if they do not attend their monthly appointment. She reports to the court on a regular basis concerning status of clients and attends all status hearings.

VII. MONITORING AND EVALUATION

A. PROGRAM GOALS AND OBJECTIVES

GOAL 1: REDUCE SUBSTANCE ABUSE AND RECIDIVISM AMONG NON-VIOLENT OFFENDERS WHILE ENHANCING THEIR QUALITY OF LIFE.

Objective: Reduce the use of alcohol and mood altering drugs in 75% of the enrolled clients within 12 months of participation.

Objective: 75% of clients will not be rearrested for drug related offenses while participating in the program.

Objective: Improve the physical health of 80% of the clients participating in the program.

Objective: Provide services to the family and children members of clients.

Objective: Improve the emotional, psychological, cultural and spiritual well being of 75% of the clients who complete the program.

Objective: Improve the social functioning and communication skills of 80% of the clients who complete the program.

Objective: 80% of the clients who have completed the program will not be arrested for new offenses for one year after their completion date.

GOAL 2: DEMONSTRATE THE EFFECTIVENESS OF THE ST. MARY PARISH DRUG COURT PROGRAM IN REDUCING RECIDIVISM.

Objective: Collect data to measure the effectiveness of the program on those who complete as compared to those who did not participate.

Objective: Continue to input and track client data into the Supreme Court Drug Court Offices "DCCM" Internet base program.

GOAL 3: MEET THE NEEDS OF MINORITY CLIENTS MORE EFFECTIVELY.

Objective: Reduce recidivism of offenders who are minorities through participation in drug court program.

Objective: Provide services to minority clients in the form of a weekly cultural therapy group.

Objective: Continue to provide female specific therapy groups to enable female clients to address female only issues.

GOAL 4: ENHANCE AND INCREASE TRAINING FOR COUNSELORS, FOCUSING ON CHEMICAL DEPENDENCY.

Objective: In-house training by experienced staff, utilizing licensed contract counselors (LPC's & LCSW's) and Psychiatrist

Objective: Increase attendance at seminars and workshops.

Objective: Provide a minimum of one contact hour a week training and supervision by the Program Director all counselors seeking certification in Substance Abuse Counseling.

GOAL 5: TO CONTRACT WITH AND ESTABLISH AN ONGOING CONSULTATION WITH PSYCHIATRIST FOR CLIENT EVALUATION, MEDICATION MANAGEMENT, AND FOLLOW UP CARE.

Objective: The service will be utilized for those clients with a suspected mental health diagnosis.

B. ANNUAL FISCAL AND PROGRAM MONITORING

The SCDCO, as a fiscal agent of St. Mary Parish Drug Court, is responsible for monitoring program activities. St. Mary Parish Drug Court maintains compliance with State and Federal statutes, regulations, policies, standards and/or guidelines. The SCDCO reviews both fiscal and programmatic operations.

C. DCCM (Drug Court Case Management System)

St. Mary Adult Drug Court Outpatient Clinic has entered into an agreement with Louisiana Supreme Court to assist this drug court program in the implementation of an additional evaluation. The La. Supreme Court will monitor the evaluation implementation, develop process and outcome analysis as well as, cost effectiveness analysis. This process has begun with monthly data reports completed by our office and sent to the Supreme Court. The DCCM (Drug Court Case Management System) provide drug court and SCDCO with information that can help assess drug court performance and impact.

As a secure system the DCCM maintains two levels of integrity of stored data:

1. All client information is housed on a secure server at the Louisiana Supreme Court where redundant systems and disaster recovery protocols have been established.
2. An employee's position and role within the drug court determines his/her rights to the DCCM, including type and level of user access, i.e., screen access, data entry, and edit or view only capabilities.

All Drug Court employees and contract personnel must adhere to written policies, consistent with state and federal guidelines that protect against unauthorized disclosure of client records and personal identifying information.

VIII. CONTINUED INTERDISCIPLINARY EDUCATION

St. Mary Parish Drug Court Outpatient Clinic promotes continued education for our members so they may serve the best interest of their clients and the profession. Each licensed staff member, in accordance with their respective profession, must maintain a certain amount of CEUs each year for renewal of licensure. Staff members must turn in a copy of CEU certificates to the Administrative Manager to be filed in their personnel records as documentation of attaining these credits.

We pride ourselves in promoting continued education. The following organizations provide opportunities to learn about a variety of subjects pertaining to Drug Court:

LADCP (Louisiana Association of Drug Court Professionals)
NADCP (National Association of Drug Court Professionals)

IX. TANF (Temporary Assistance for Needy Families)

TANF (Temporary Assistance for Needy Families) services are non-assistance (services not funds) and are not limited to needy families. Our agency is required by the State of Louisiana Supreme Court to have the following documentation on file for each client that has legal guardianship of any children under the age of 18 years old. Also, if the client is not the Custodial parent and pays child support, we need documentation of the biological relationship to the children. Clients are informed that they need to turn in one of the following forms of information to the case manager within two weeks of entering the program:

- Child(ren) Birth Certificate
- Child(ren) School Report Card
- Court Ordered Child Support Papers
- Child(ren) Medical records

Attached is the TANF form clients are required to fill out.

X. RECORD MAINTENANCE POLICY

In accordance with state policy, all client records are stored for 6 years after discharge from the program. All clients' records are shredded after those 6 years have expired.

XI. CONTINUITY OF OPERATIONS PLAN (COOP)

In compliance with the Louisiana Supreme Court we have an Emergency Plan put into place for different types of emergency events. See COOP in Index.

XI. QUALIFIED SERVICE ORGANIZATIONS

St. Mary Adult Drug Court Outpatient Clinic and the following organizations or persons have entered into a cooperative agreement to provide ancillary services for our clients:

Dr. Mark DeManuel, M.D.	To provide medical examinations and referrals for additional medical treatment
Louisiana Supreme Court	To provide program evaluation
Louisiana Rehabilitative Services	To assist clients in acquiring job skills and training
Morgan City Adult Learning	To assist clients in acquiring GED
Franklin Adult Learning	To assist clients in acquiring GED
La. Dept. of Labor Employment Security	To assist in verification of employment and income Referrals for employment
Teche Action Clinic	Provides medical services including psychiatric as well as physical for clients based on an ability to pay
La. Technical College	Assists clients in continuing education to obtain an associate degree. Help clients access funding, transportation and child care issues
La. Dept. of Public Health	Provides follow up care including medications for clients that have been diagnosed with a sexually transmitted disease, tuberculosis, hepatitis or other communicable diseases
Bayou Council of Louisiana	Assists clients in accessing community-based services such as job training, parenting classes and educational workshops for quality of life issues
Chez Hope	Provides services to women and children who have been victimized by domestic abuse
Claire House for Women & Children	Provides services for addicted women and their children under age 12

St. Mary Adult Drug Court Outpatient Clinic has also met with area employers and many have agreed to hire our recovering clients. We maintain a relationship with these employers once the

client has been hired to verify continuing employment and job performance. Employers also contact us whenever they are experiencing problems with one of their employees in the program to try to resolve the matter quickly and to retain that employee. This relationship has proven to be very successful and is a tremendous support to the program.

Due to the continuing support of the employers and the agencies listed above, we have been able to greatly affect the quality of life for our clients and their families.

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Regular Session, 1997

HOUSE BILL NO. 2412

BY REPRESENTATIVE JACK SMITH

AN ACT

To enact Chapter 33 of Title 13 of the Louisiana Revised Statutes of 1950, comprised of R1.3S:.5 301 through 5304, relative to state district courts; to provide for drug and alcohol treatment programs through drug divisions to be operated by the district courts; and to provide for related matters.

Be it enacted by the Legislature of Louisiana:

Section 1. Chapter 33 of Title 13 of the Louisiana Revised Statutes of 1950, comprised of R.S. 13:5301 through 5304, is hereby enacted to read as follows:

CHAPTER 33. DRUG DIVISIONS

§5301. Purpose

The Legislature of Louisiana recognizes the critical need for criminal justice system programs to reduce the incidence of alcohol and drug use, alcohol and drug addiction, and crimes committed as a result of alcohol and drug use and alcohol and drug addiction. The legislature also recognizes that the problem of alcohol and drug abuse among the citizens of Louisiana is excessive and needs to be addressed and corrected not only for the health and welfare of the citizens of this state, but also because alcohol and drug abuse or dependency has been identified as a contributing factor in the commission of many crimes. It is the intent of the legislature by this Chapter to create a program to facilitate the creation of alcohol and drug treatment divisions in the various district courts of this state.

§5302. Goals

The goals of the alcohol and drug treatment divisions created under this Chapter include the following:

- (1) To reduce alcoholism and drug abuse and dependency among offenders.
- (2) To reduce criminal recidivism.
- (3) To reduce the alcohol and drug-related workload of the courts.

- (4) To increase the personal, familial, and societal accountability of offenders.
- (5) To promote effective interaction and use of resources among criminal justice personnel and community agencies.

- (6) To reduce the overcrowding of prisons.

§5303. Definitions

For the purposes of this Chapter:

- (1) "Alcohol and drug abuse program" means a program licensed by the state of Louisiana to provide education, prevention, and treatment directed toward achieving the mental and physical restoration of alcohol and drug abusers or addicts.

- (2) "Alcohol and drug abuser" means a person whose consumption of alcohol or other drugs, or any combination thereof, interferes with or adversely affects his ability to function socially or economically and endangers the health, safety, and welfare of the abuser and others.

- (3) "Alcohol or drug-related offense" means an alcohol or drug- related offense and also an offense in which alcohol and/or drug abuse or addiction is determined from the evidence to have been a factor in the commission of the offense.

- (4) "Alcoholic or drug addict" means any person who habitually uses alcohol or other drugs to the extent that the person endangers the health, safety, or welfare of that person or any other person or groups of persons.

- (5) "Conditions of probation" means the specification of formal terms and conditions which a defendant must fulfill in order to have the charges against that person dismissed in accordance with the provisions of Code of Criminal Procedure Articles 893 and 894.

- (6) "Drug division" means the division or divisions of the court to which alcohol or drug-related offenses are assigned or the employee of the court designated to administer the probation program, as provided by R.S. 13:5304(A).

- (7) "Probation" means referral of a defendant who has entered a plea of guilty in a criminal case charging an alcohol or controlled dangerous substance related offense to a supervised probation program as provided in Code of Criminal Procedure Articles 893 and 894.

- (8) "Probationer" means a person who has been accepted into a drug division probation program.

(9) "Treatment program" means any governmental agency or other entity which is licensed by the state of Louisiana to provide substance abuse or addiction treatment on a residential or outpatient basis.

§5304. The drug division probation program

A. Each district court by rule may designate as a drug division one or more divisions to which alcohol or drug-related offenses are assigned and may establish a probation program to be administered by the presiding judge or judges thereof or by an employee designated by the court.

B. Participation in probation programs shall be subject to the following provisions:

(1) The district attorney may propose to the court that an individual defendant be screened for eligibility as a participant in the drug division probation program if all of the following criteria are satisfied:

(a) The individual is charged with a violation of a statute of this state relating to the use and possession of any narcotic drugs, coca leaves, marijuana, stimulants, depressants, or hallucinogenic drugs, or where there is a significant relationship between the use of alcohol or drugs, or both, and the crime before the court.

(b) The district attorney has reason to believe that the individual who is charged suffers from alcohol or drug addiction.

(c) It is in the best interest of the community and in the interest of justice to provide the defendant with treatment as opposed to incarceration or other sanctions.

(2) Upon receipt of the proposal provided for in Paragraph (1) of this Subsection, the court shall advise the defendant that he or she may be eligible for enrollment in a court-authorized treatment program through the drug division probation program.

(3) In offering a defendant the opportunity to request treatment, the court shall advise the defendant of the following:

(a) If the defendant is accepted into the drug division probation program, then the defendant must waive the right to a trial. The defendant must enter a plea of guilty to the charge, with the stipulation that sentencing be deferred or that sentence be imposed, but suspended, and the defendant placed on supervised probation under the usual conditions of probation and under certain special conditions of probation related to the completion of such substance abuse treatment programs as are ordered by the court.

(b) If the defendant requests to undergo treatment and is accepted, the defendant will be placed under the supervision of the drug division probation program for a period of not less than twelve months.

(c) During treatment the defendant may be confined in a treatment facility or, at the discretion of the court, the defendant may be released on a probationary basis for treatment or supervised aftercare in the community.

(d) The court may impose any conditions reasonably related to the complete rehabilitation of the defendant.

(e) The defendant shall be required to participate in an alcohol and drug testing program at his own expense, unless the court determines that he is indigent.

(f) If the defendant completes the drug division probation program, and successfully completes all other requirements of his court-ordered probation, the conviction may be set aside and the prosecution dismissed in accordance with the provisions of Code of Criminal Procedure Articles 893 and 894. If the defendant was sentenced at the time of the entry of the plea of guilty, the successful completion of the drug division probation program and the other requirements of probation will result in his discharge from supervision. If the defendant does not successfully complete the drug division probation program, the judge may revoke the probation and impose sentence, or the judge may revoke the probation and order the defendant to serve the sentence previously imposed and suspended, or the court may impose any sanction provided by Code of Criminal Procedure Article 900, and extend probation and order that the defendant continue treatment for an additional period, or both.

(4) The defendant has the right to be represented by counsel at all stages of a criminal prosecution and in any court hearing relating to the drug division probation program. The defendant shall be represented by counsel during the negotiations to determine eligibility to participate in the drug division probation program and shall be represented by counsel at the time of the execution of the probation agreement, and at any hearing to revoke the defendant's probation and discharge him from the program, unless the court finds and the record shows that the defendant has knowingly and intelligently waived his right to counsel.

(5) The defendant must agree to the drug division probation program. If the defendant elects to undergo treatment and participate in the drug division probation program, the court shall order an examination of the defendant by one of the court's designated licensed treatment programs. Treatment programs shall possess sufficient experience in working with criminal justice clients with alcohol or drug addictions, or both, and shall be certified and approved by the state of Louisiana. The designated treatment program shall utilize standardized testing and evaluation procedures to determine whether or not the defendant is an appropriate candidate for a treatment program and shall report such findings to the court and the district attorney.

(6) The designated treatment program shall examine the defendant, using standardized testing and evaluation procedures, and shall report to the court and the district attorney the results of the examination and evaluation along with its recommendation as to whether or not the individual is a suitable candidate for the drug division probation program. Only those defendants who suffer from alcoholism or a drug addiction, or both, or who are in danger of becoming dependent on alcohol or drugs and who are likely to be rehabilitated through treatment shall be considered for treatment.

(7) The court shall inform the defendant that the treatment program examiner or district attorney may request that the defendant provide the following information to the court:

(a) Information regarding prior criminal charges.

(b) Education, work experience, and training.

(c) Family history, including residence in the community.

(d) Medical and mental history, including any psychiatric or psychological treatment or counseling.

(e) Any other information reasonably related to the success of the treatment program.

(8) The designated program shall recommend to the court a preliminary length of stay and level of care for the defendant.

(9) Besides the report submitted by the examiner, the judge and district attorney shall consider the following factors in determining whether drug court probation would be in the interests of justice and of benefit to the defendant and the community:

(a) The nature of the crime charged and the circumstances surrounding the crime.

(b) Any special characteristics or circumstances of the defendant.

(c) Whether the defendant is a first time offender of an alcohol or drug-related offense, and, if the defendant has previously participated in this or a similar program, the degree of success attained.

(d) Whether there is a probability that the defendant will cooperate with and benefit from probation and treatment through the drug division probation program.

(e) Whether the available drug division probation program is appropriate to meet the needs of the defendant.

- (f) The impact of the defendant's probation and treatment upon the community.
 - (g) Recommendations, if any, of the involved law enforcement agency.
 - (h) Recommendations, if any, of the victim.
 - (i) Provisions for and the likelihood of obtaining restitution from the defendant over the course of his probation.
 - (j) Any mitigating circumstances.
 - (k) Any other circumstances reasonably related to the individual defendant's case.
- (10) In order to be eligible for the drug division probation program, the defendant must satisfy each of the following criteria:
- (a) The defendant cannot have any prior felony convictions for any offenses defined as crimes of violence in R.S. 14:2(13).
 - (b) The crime before the court cannot be a crime of violence as defined in R.S. 14:2(13), including domestic violence.
 - (c) Other criminal proceedings alleging commission of a crime of violence as defined in R.S. 14:2(13) cannot be pending against the defendant.
 - (d) The defendant cannot have been convicted of aggravated burglary or simple burglary of an inhabited dwelling if the defendant has a record of one or more prior felony convictions.
 - (e) The crime before the court cannot be a charge of driving under the influence of alcohol or any other drug or drugs that resulted in the death of a person.
 - (f) The crime charged cannot be one of multiple counts of distribution, possession with intent to distribute, production, manufacture, or cultivation of controlled dangerous substances.
- (11) (a) The judge shall make the final determination of eligibility. If, based on the examiner's report and the recommendations of the district attorney and the defense counsel, the judge determines that the defendant should be enrolled in the drug division probation program, the court shall accept the defendant's guilty plea and suspend or defer the imposition of sentence and place the defendant on probation under the terms and conditions of the drug division probation program. The court also may impose, sentence and suspend the execution thereof, placing the defendant on probation under the terms and conditions of the drug division probation program.

(b) If the judge determines that the defendant is not qualified for enrollment, the judge shall state for the record the reasons for that determination.

(c) A treatment program may petition the court to reject a referral through the drug division probation program if the treatment program administrator deems the defendant to be inappropriate for admission to the treatment program. Additionally, a treatment program may petition the court for immediate discharge of any individual who fails to comply with treatment program rules and treatment expectations or who refuses to constructively engage in the treatment process.

C. (I) The terms of each probation agreement shall be decided by the judge. The defendant must agree to enter the program and sign a probation agreement stating the terms and conditions of his program. The defendant must plead guilty to the charge in order to be eligible for the drug division probation program.

(2) Any probation agreement entered into pursuant to this Section shall include the following:

(a) The terms of the agreement, which shall provide that if the defendant fulfills the obligations of the agreement, as determined by the court, then the criminal charges may be dismissed and the prosecution set aside in accordance with the provisions of Code of Criminal Procedure Articles 893 and 894, or, if the defendant has been sentenced following the plea of guilty, then the successful completion of the drug division probation program may result in the discharge of the defendant from continued supervision.

(b) A waiver by the defendant of the right to trial by jury under the laws and constitution of Louisiana and the United States.

(c) The defendant's full name.

(d) The defendant's full name at the time the complaint was filed, if different from the defendant's current name.

(e) The defendant's sex and date of birth.

(f) The crime before the court.

(g) The date the complaint was filed.

(h) The court in which the agreement was filed.

(i) A stipulation of the facts upon which the charge was based, as agreed to by the defendant and the district attorney.

(j) A provision that the defendant will be required to pay a probation supervision fee.

(k) A provision in cases where applicable that the defendant will be required to pay restitution to the victim.

(l) A provision that once the defendant is receiving treatment as an outpatient or living in a halfway house he will participate in appropriate job training or schooling or seek gainful employment.

(m) A copy of the plea agreement.

(3) A defendant who is placed under the supervision of the drug division probation program shall pay the cost of the treatment program to which he is assigned and the cost of any additional supervision that may be required, to the extent of his financial resources, as determined by the drug division.

(4) If the probationer does not have the financial resources to pay all the related costs of the probation program:

(a) The court, to the extent practicable, shall arrange for the probationer to be assigned to a treatment program funded by the state or federal government.

(b) The court, with the recommendation of the treatment program, may order the probationer to perform supervised work for the benefit of the community in lieu of paying all or a part of the costs relating to his treatment and supervision. The work must be performed for and under the supervising authority of a parish, municipality, or other political subdivision or agency of the state of Louisiana or a charitable organization that renders service to the community or its residents.

D.(1) When appropriate, the imposition or execution of sentence shall be postponed while the defendant is enrolled in the treatment program. As long as the probationer follows the conditions of his agreement, he or she shall remain on probation. At the conclusion of the period of probation, the district attorney, on advice or the person providing the probationer's treatment and the probation officer, may recommend that the drug division take one of the following courses of action:

(a) That the probationer's probation be revoked and the probationer be sentenced because the probationer has not successfully completed the treatment and has violated one or more conditions of probation; or, if already sentenced, that the probation be revoked and the probationer be remanded to the appropriate custodian for service of that sentence.

(b) That the period of probation be extended so that the probationer may continue the program.

(c) That the probationer's conviction be set aside and the prosecution dismissed because the probationer has successfully completed all the conditions of his or her probation and treatment agreement.

(2) The district attorney shall make the final determination on whether to request revocation, extension, or dismissal.

(3)(a) If an individual who has enrolled in a program violates any of the conditions of his probation or his treatment agreement or appears to be performing unsatisfactorily in the assigned program, or if it appears that the probationer is not benefiting from education, treatment, or rehabilitation, the treatment supervisor, probation officer, or the district attorney may move the Court for a hearing to determine if the probationer should remain in the program or whether the probation should be revoked and the probationer removed from the program and sentenced or ordered to serve any sentence previously imposed. If at the hearing the moving party can show sufficient proof that the probationer has violated his probation or his treatment agreement and has not shown a willingness to submit to rehabilitation, the probationer may be removed from the program or his treatment agreement may be changed to meet the probationer's specific needs.

(b) If the court finds that the probationer has violated a condition of his or her probation or a provision of his or her probation agreement and that the probationer should be removed from the probation program, then the court may revoke the probation and sentence the individual in accordance with his or her guilty plea or, if the individual has been sentenced and the sentence suspended, order the individual to begin serving the sentence.

(c) If a defendant who has been admitted to the probation program fails to complete the program and is thereafter sentenced to jail time for the offense, he shall be entitled to credit for the time served in any correctional facility in connection with the charge before the court.

(d) At any time and for any appropriate reason, the probationer, his probation officer, the district attorney, or his treatment provider may petition the court to reconsider, suspend, or modify its order for rehabilitation or treatment concerning that probationer.

(e) The burden of proof at all such hearings shall be the burden of proof required to revoke probation as provided by law.

E. The appropriate alcohol and drug treatment program shall report the following changes or conditions to the district attorney at any periodic reporting period specified by the court:

- (1) The probationer is changed from an inpatient to an outpatient.
- (2) The probationer is transferred to another treatment center or program.
- (3) The probationer fails to comply with program rules and treatment expectations.
- (4) The probationer refuses to engage constructively in the treatment process.
- (5) The probationer terminates his or her participation in the treatment program.
- (6) The probationer is rehabilitated or obtains the maximum benefits of rehabilitation or treatment.

F. Upon successful completion of the drug division probation program and its terms and conditions, the judge, after receiving the recommendation from the district attorney, may vacate the judgment of conviction and dismiss the criminal proceedings against the probationer or may discharge the defendant from probation in accordance with the provisions of Code of Criminal Procedure Article 893 or 894.

G. Discharge and dismissal under this Chapter, as provided in Code of Criminal Procedure Articles 893 and 894, shall have the same effect as acquittal, except that the conviction may be considered in order to provide the basis for subsequent prosecution of the party as a multiple offender and shall be considered as an offense for the purposes of any other law or laws relating to cumulation of offenses. Dismissal under this Chapter shall occur only once with respect to any person. Nothing herein shall be construed as a basis for the destruction of records of the arrest and prosecution of the person.

H. Nothing contained in this Chapter shall confer a right or an expectation of a right to treatment for a defendant or offender within the criminal justice system.

I. Each defendant shall contribute to the cost of substance abuse treatment received in the drug treatment program based upon guidelines developed by the drug division.

J. Each judicial district that establishes a drug division shall adopt written policies and guidelines for the implementation of a probation program in accordance with this Chapter. The policies and guidelines shall include provisions concerning the following:

- (1) How to examine the defendant initially to determine if he or she is qualified for enrollment.
- (2) How to advise the defendant of the program if the court has reason to believe the defendant may suffer from alcohol or drug addiction.

(3) What licensed treatment programs are certified by the court.

K. Each drug division shall develop a method of evaluation so that its effectiveness can be measured. These evaluations shall be compiled annually and transmitted to the judicial administrator of the Supreme Court of Louisiana.

L. (1) Except as otherwise provided for by law, the registration and other records of a treatment facility are confidential and shall not be disclosed to any person not connected with the treatment facility or the drug division and district attorney without the consent of the patient.

(2) The provisions of Paragraph (1) of this Subsection shall not restrict the use of patients' records for the purpose of research into the cause and treatment of alcoholism and drug addiction, provided that such information shall not be published in a way that discloses the patient's name and identifying information.

M. No statement, or any information procured therefrom, with respect to the specific offenses with which the defendant is charged, which is made to any probation officer or alcohol and drug treatment worker subsequent in the granting of probation, shall be admissible in any civil or criminal action or proceeding, except a drug division probation revocation proceeding.

N. A record of the fact that an individual has participated in a drug division probation program shall be sent to the office of the attorney general and shall be made available upon request to any district attorney for the purpose of determining if an individual has previously participated in a drug division probation program.

O. The provisions of Code of Criminal Procedure Article 893(A) and (D) which prohibit the court from suspending or deferring the imposition of sentences for violations of the Uniform Controlled Dangerous Substances Law or for violations of R.S. 40:966(A), 967(A), 968(A), 969(A), or 970(A) shall not apply to prosecutions in drug division probation programs as authorized by this Chapter.

SPEAKER OF THE HOUSE OF REPRESENTATIVES

PRESIDENT OF THE SENATE

GOVERNOR OF THE STATE OF LOUISIANA
APPROVED:

