

NEW HORIZONS
POLICY & PROCEDURE MANUAL



OGLE COUNTY DRUG COURT

Effective August 1, 2009

(Amended October 21, 2011)

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I. INTRODUCTION/HISTORY

“Drug Courts” are one of many “problem solving” courts which have emerged throughout the United States. The first drug court was established in 1989, and as of 2007, there were 2,147 drug courts serving both juveniles and adults.

The benefits of an effective drug court are many. These include:

- a) Re-arrest - A study of four drug courts in Suffolk County, Massachusetts found that drug court clients were 13% less likely to be rearrested, 34% less likely to be re-convicted and 24% less likely to be re-incarcerated than probationers who were not offered drug court.
- b) Crime Impact - A recent long-term evaluation of the Multnomah County Drug Court (Portland, Oregon) found that crime was reduced by 30% over five years.
- c) Cost Benefits - These five states estimated the following savings in tax dollars: New York - \$254 million; Washington - \$6,779.00/drug court client; California \$43 million; Oregon - \$10.00 savings on every \$1.00 spent; and Texas - \$9.43 savings for every \$1.00 spent.

In 2008, the Ogle County State’s Attorney’s Office began exploring the need for a drug court in Ogle County. In large part, this was due to a lack of resources within the state of Illinois. In collaboration with the Ogle County Probation Department and the Judiciary, several meetings were conducted. Also, the Lee and DeKalb County drug courts were visited.

Following this, a drug court training grant was applied for through the Bureau of Justice Assistance, U.S. Department of Justice. In preparation for this training, our drug court team members were identified and regular meetings were conducted. The original drug court team members were:

Honorable Kathleen Kauffmann - Drug Court Judge
Ogle County State’s Attorney Ben Roe - Drug Court Prosecutor
Ogle County Sheriff Greg Beitel - Law Enforcement
Attorney Eric Morrow - Public Defender
Director of Court Services Greg Martin - Drug Court Coordinator
Brigitte Beckman - Drug Court Probation Officer
Brenda Palmieri - Treatment Provider, Sinnissippi Centers, Inc.
Jack King - Evaluator, Northern Illinois University

The formation of the Ogle County Drug Court “New Horizons” is a product of the one-week training these members attended in April, 2009. The staff of the National Drug Court Institute assisted each team with establishing the basics of a functional drug court. Since that training, we have added/changed several members. Our current team is:

Presiding Judge, Honorable Kathleen Kauffmann
Ben Roe, State’s Attorney
Michael Schabacker, Chief Deputy, Ogle County Sheriff’s Department
Eric Morrow, Public Defender
Greg Martin, Director of Court Services

Brigette Beckman, BA, CADC, Probation Officer
Brenda Palmieri, BS, CADC, Sinnissippi Centers, Inc.
Jack King, Evaluator, NIU
Gerda Clark, Lieutenant, Supervisor, Ogle County Jail
John Kaltenbach, Detective, Rochelle Police Department
Sean Knight, Sergeant, Police Department
Brian Peterson, BA, Probation Officer
Sherri Egan, Quality Assurance
Elaine Carow, Community Liaison
Cathy Stoddard, Educational/Career Consultant

The following document is the established procedure and policy manual for the Ogle County Adult Drug Court.

II. MISSION STATEMENT

The mission of the Ogle County Drug Court, New Horizons, is to reduce the cost of substance-related crime, while holding offenders accountable for their behavior and preventing recidivism, by effectively addressing substance-related crime in Ogle County through the education and intensive individualized treatment of offenders, thereby enabling them to become productive, responsible citizens.

III. ELIGIBILITY CRITERIA

- Drug Court is voluntary. Defendants interested in applying for admission must do so through their attorney.
- The defendant must be a resident of Ogle County.
- The defendant must have pending felony charges (non-violent and non-forcible).
- The defendant must be 17 years of age or older.
- The defendant must admit to a substance abuse problem and be motivated to working on this problem.
- The defendant must be a U.S. citizen or legal resident.
- The defendant must resolve all out of county cases.
- The defendant must be in stable physical health.
- The defendant may not have a serious mental health problem which would prohibit their participation in substance abuse treatment.
- The defendant must have transportation.
- If charged with possession with Intent to Deliver or Delivery, the amount of narcotics must be determined to be minor and be for the purpose of supporting the defendant's addiction.

- No applicant will be admitted without the agreement of the prosecution and the approval of the Ogle County Drug Court Team.
- The defendant must plead guilty and be sentenced to drug court.

IV. SCREENING PROCESS (see Attachment I in Appendix)

A three-step screening process will be completed on each referral. These are a legal screen completed by the Ogle County State's Attorney's Office, a clinical screen conducted by the Ogle County Probation Department, and a substance abuse assessment completed by our treatment provider.

Upon satisfactory completion of these three steps, the entire case will then be staffed with the Drug Court Team. No client will be offered drug court without the approval of the State's Attorney and the Team. The screening process is as follows:

Referring attorney must contact the Ogle County State's Attorney's Office. The contact person will be Susan Montavon. She can be contacted at (815) 732-1170 or by e-mail at smontavon@oglecounty.org. The only information needed is the defendant's name and case number.

Mr. Ben Roe will serve as our drug court prosecutor and will complete the legal screen. All felony arrests will be eligible except for those which are excluded under 730 ILCS 166/20 Drug Court Treatment Act.

Disqualifications:

- Possession of drugs where the amount is determined to be greater than for personal use.
- The defendant has a Class 2 or higher drug offense.
- The defendant has an offense that is a non-probation eligible offense.
- If the defendant's only charge(s) are alcohol offenses that affect the license including DWLR (Driving While License was Revoked) and DWLS (Driving While License was Suspended).

730 ILCS 166/20 Drug Treatment Act mandates the following criteria shall exclude a defendant if:

- The crime is a crime of violence.
- The defendant denies his use of or addiction to drugs.
- The defendant does not demonstrate a willingness to participate in a treatment program.
- The defendant has been convicted of a crime of violence in the past 10 years excluding incarceration time, including but not limited to: First Degree Murder, Second Degree Murder, Predatory Criminal Sexual Assault of a Child, Aggravated Criminal Sexual Assault,

Criminal Sexual Assault, Armed Robbery, Aggravated Arson, Arson, Aggravated Kidnapping, Kidnapping, Aggravated Battery resulting in great bodily harm or permanent disability, Stalking, Aggravated Stalking, or any offense involving the discharge of a firearm.

- The defendant has previously completed or has been discharged from a drug court program. Other factors which will be examined one that the defendant must be 17 years of age and cannot be an active confidential source for any police agency.

Following the passing of the legal screen, a referral will be made to the Ogle County Probation Department for the clinical screen (see Attachment II). A personal interview will be conducted by either the Drug Court Coordinator or the Drug Court Probation Officer. The goal of this interview is to inform the defendant of the requirements of drug court. The participant manual will be reviewed and all questions addressed. Other assessment tools may be used at this stage to measure level of motivation and substance abuse involvement (see Attachment III). At no time will the interview focus on the pending charges. Finally, this is not a substance abuse assessment, but a screen to determine the client's readiness to change. At this point in the process, the candidate is also required to attend two Drug Court sessions. In addition, the candidate will meet a Phase III or IV participant to discuss the program.

If the clinical screen is passed, the defendant will sign the participant consent (see Attachment IV), and a referral will be made immediately to Sinnissippi Centers, Inc. At that point, a substance abuse assessment will be completed. To be admitted to drug court, the client must meet the clinical criteria of substance dependence.

If the defendant has successfully completed these three steps, the client will be staffed by the entire drug court team. If found to be appropriate, a sentencing hearing will be scheduled within 7 days or as soon as practicable.

Finally, the State's Attorney reserves the right to disqualify candidates.

V. STRUCTURE OF DRUG COURT HEARING

The Ogle County Drug Court will meet each week. The Court's activities will be divided into two meetings. The first meeting will be a team staffing which will be conducted prior to the drug court call. This staffing will be attended by all the drug court team members. Any attorneys who have a client scheduled for a hearing can also attend in a limited capacity. The purpose of the staffing is to review new drug court candidates, as well as to review the progress of drug court participants. Sanctions or rewards will also be determined at this meeting.

Following this first meeting, the drug court call will be convened. Three types of hearing will generally be conducted. These are:

1. Sentencing hearing - At this hearing, the defendant and the defendant's attorney are present. A specialized drug court participant order will have been drafted. A sentencing order will be entered currently, the defendant to a term in the Illinois Department of Corrections. However, this sentence will be stayed and the defendant will be placed on two years probation and ordered to pay all fines, costs, and restitution associated with the case (see Attachments IV, V, VI, VII & VIII).
2. Compliance hearings - Drug court participants will initially be required to attend

court weekly. As participants advance through the phases, these hearings will become less frequent. However, throughout these hearings, the participants must abide by the clothing policy listed below:

- No tank tops, muscle shirts, crop tops, starter jackets, shirts with obscene words or pictures, (including alcohol/drug themes).
 - No sagging pants, (below the waistline).
 - No hats, caps, or bandannas.
 - No gang attire of any kind.
3. Termination from Drug Court - In most cases, this will be through successful completion of the term of probation. At that point, the original case will be dismissed along with all fines and costs, excluding specific drug court fees and restitution. A graduation ceremony will be conducted upon successful completion.

If the participant does not successfully complete drug court, then the original sentence will be imposed immediately.

VI. PHASES OF DRUG COURT

Drug Court is a minimum eighteen (18) month commitment. This length of time can be extended if the following phases are not completed on time. It is the opinion of the Drug Court Team that it is the participant's responsibility to submit a written request for phase advancement, noting in that request how each requirement of the phase was met.

- 3 mos. - 1st Phase
- 4 mos. - 2nd Phase
- 5 mos. - 3rd Phase
- 6 mos. - 4th Phase

Phase I: (3 mos.)

Attend Drug Court one (1) time weekly

Attend all treatment as ordered

Report to probation a minimum of four (4) times per month

Attend three (3) support groups per week

Approved living situation or plan

Drug testing as required

Primary treatment must be completed at this phase. Upon completion of treatment begin GED, seek employment, or investigate school opportunities.

30 days sober

Phase II: (4 mos.)

Attend Drug Court every other week

Continue with treatment as directed

Must be attending GED program, secure employment, or be attending school

Report to probation a minimum of three (3) times per month

Attend three (3) support groups per week (1 group per week can be pro-social organized activity)

Approved living situation or plan

Drug testing as required

When possible, attempt to secure an Illinois Driver's License

Obtain a sponsor/mentor/positive adult role model

Must pay 25% of drug court fees
2 hours of community service work of participant's choosing
90 days clean

Phase III: (5 mos.)

Attend Drug Court once every three (3) weeks
Continue treatment as directed
Obtain GED
Continue with full-time employment or school
Attend two (2) support groups per week
Drug testing as required
Report to probation a minimum of three (3) times per month
Maintain weekly contact with sponsor
Must be current with drug court fees
3 hours of community service work of participant's choosing
6 months total sobriety

Phase IV: (6 mos.)

Attend Drug Court as directed
Continue treatment as directed
Report to probation two (2) times per month
Random drug screens
Attend one (1) support group per week
Maintain full-time employment
Alumni Club Attendance
Present a Life Plan/Relapse Prevention Plan
Must pay all court fees and treatment fees in full to be discharged from Drug Court
4 hours of community service work of participant's choosing
Attend 2 alumni meetings
Maintain one (1) year sobriety

VII. INCENTIVE/SANCTION PROGRAM

Throughout the Drug Court process clients will receive incentives or sanctions. As they meet goals or expectations, they will be rewarded in various ways. However, if they **DO NOT** meet expectations, they will receive a sanction. At the time that either a sanction or a reward is given, a progress report will be completed (see Attachment IV). Copies of this document will be distributed to the Judge, the supervising probation officer and the client. The type of sanction will depend on the violation.

The following is a partial list of the incentives and sanctions offered by our Drug Court:

Incentives:

- Praise/acknowledgment from the Court
- Less frequent court appearances
- Quicker court appearances (A - list)
- Gift cards
- Random incentive drawing for reduction of fees
- Membership to health club

- Certificate at each phase completed
- Cake at one (1) year sobriety
- GRADUATION
- Any other incentive recommended by Drug Court Team

Sanctions:

- Three (3) page paper on a subject determined by the Court
- Extra meetings
- Sitting in court for a half or a full day
- Increased supervision
- Community Service Work
- Must pay for positive drug tests
- G.P.S., Electronic Monitoring or SCRAM (self-pay)
- Return to lower phase
- Jail
- Any other sanction imposed by the Drug Court Team

VIII. URINE TESTING/BREATHALYZER PROTOCOL

Each Drug Court participant will be assigned a color code. You will need to call the Probation Office each day between the hours of 8:30 am to 10:30am. The phone number you will need to call is (815) 732-3201, ext. 410. If your code is announced, you must report for a urine screen that day by 10:30 p.m. After hour testing will be done at the Ogle County Jail or at a location approved by the Probation Department.

The following will be considered violations of the drug screening protocol:

- Not keeping your appointment
- A positive drug screen
- A dilute specimen
- An altered specimen
- Any type of tampering, (i.e.: bringing someone else's urine)

Intoxilyzers will be used as needed.

Finally, you may be required to submit to either an intoxilyzer test or a urine screen during a home visit check.

IX. GRATUITIES/GIFTS

As officers of the court, by statute we cannot receive any gifts from our clients. For you, the biggest gift you can give the Drug Court Team is being a graduate of our program.

X. TERMINATION FROM DRUG COURT

Drug Court participants will face immediate termination for the following behaviors:

- Commission of a Forcible Felony
- Commission of any sex offense

- Being on warrant status for a significant time period
- Choosing to move outside of Ogle County
- At the recommendation of the Drug Court team

XI. DRUG COURT GRADUATION

Participants will be honored at a graduation ceremony when the following is accomplished:

- Complete all treatment recommendations
- Have twelve (12) months drug free
- Be gainfully employed or enrolled in school
- Actively involved in recovery activities or other positive outlets
- Be in a stable living situation
- All Drug Court costs must be paid

XII. CONFIDENTIALITY

Although Drug Court is considered an “open court” steps will be taken to ensure the confidentiality of our clients. This includes, but is not limited to:

1. The signing of a confidentiality statement by all Drug Court team members, Advisory Board Members, and approved visitors. These documents will be kept on file by the Drug Court Coordinator (see Attachment X).
2. In coordination with the Ogle County Circuit Clerk, official docket entries will be limited to the client’s appearance, if a sanction or incentive is given, phase changes, and the client’s next court date.
3. A consent for the release of confidential substance abuse records will be signed by the client at time of admission to Drug Court (see Attachment XI), as well as any specific releases as is deemed necessary.
4. A weekly progress report will be generated by the Drug Court Coordinator or his designee (Drug Court Officer). Following review of progress reports during the weekly staffing, the reports will be returned to the Drug Court Coordinator or his designee for shredding. The Drug Court Judge and Probation Officer will be allowed to keep their copies for their records.
5. The Drug Court Probation Officer will keep separate files on each client. These files will be kept in that officer’s office in a secured area. The Drug Court Coordinator may also have access to said file.

XIII. DRUG COURT STEERING COMMITTEE/ADVISORY BOARD

In conjunction with the formation of the New Horizons Adult Drug Court an Advisory Board was formed. It’s function is to support the mission of our program. Meeting a minimum of four times per year, this Board will review and give feedback on the Drug Court Program, assist with the community requests for interaction, develop fund raising strategies for special events (i.e. graduation), and other duties identified by the chair of this committee and the Drug Court Coordinator.

XIV. TRAINING

One important factor of the Drug Court is the training of our staff. As funds are available, the Drug Court coordinator will approve staff to attend the National Conference, the discipline specific training, as well as in-state conferences. In addition, New Horizons staff are members of the N.A.D.C.P., as well as our state association.

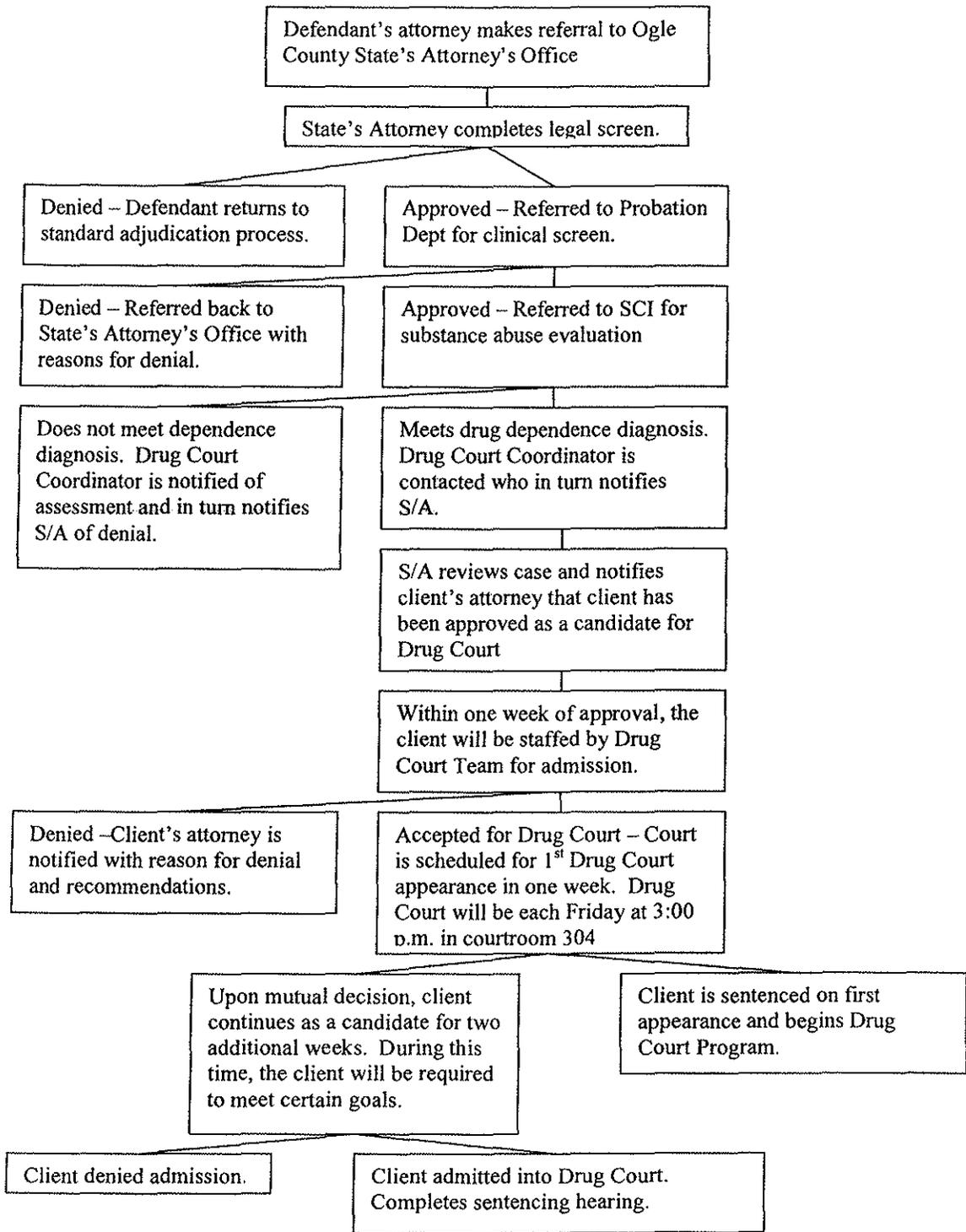
XV. EVALUATION OF DRUG COURT

As has been indicated, one of the Drug Court Team members will be an independent evaluator. This person will evaluate the effectiveness of our Drug Court and compile an annual report with recommendations. This will be presented at an annual retreat attended by the Drug Court Team.

In addition, other strategies to be used will be personal interviews completed by each Drug Court Client as they finish each phase. Also, data on each client will be kept such as number and type of sanctions/incentives, dirty urine screens, etc.

APPENDIX

FLOW CHART INTO THE OGLE COUNTY DRUG COURT NEW HORIZONS



OGLE COUNTY DRUG COURT
SCREENING INSTRUMENT

NEW HORIZONS

Defendant's Name: _____

Case#: _____

Referring Attorney: _____

Legal Screen: Yes No

Reason for denial: _____

Date

Signature

Clinical Screen: Yes No

Reason for denial: _____

Date

Signature

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TCU DRUG SCREEN II

During the last 12 months (before being locked up, if applicable) –

Yes	No
-----	----

1. Did you use larger amounts of drugs or use them for a longer time than you planned or intended? Yes No
2. Did you try to cut down on your drug use but were unable to do it? Yes No
3. Did you spend a lot of time getting drugs, using them, or recovering from their use? Yes No
4. Did you get so high or sick from drugs that it –
 - a. kept you from doing work, going to school, or caring for children? Yes No
 - b. caused an accident or put you or others in danger? Yes No
5. Did you spend less time at work, school, or with friends so that you could use drugs? Yes No
6. Did your drug use cause –
 - a. emotional or psychological problems? Yes No
 - b. problems with family, friends, work, or police? Yes No
 - c. physical health or medical problems? Yes No
7. Did you increase the amount of a drug you were taking so that you could get the same effects as before? Yes No
8. Did you ever keep taking a drug to avoid withdrawal symptoms or keep from getting sick? Yes No
9. Did you get sick or have withdrawal symptoms when you quit or missed taking a drug? Yes No
10. Which drug caused the most serious problem? [CHOOSE ONE]
 - None
 - Alcohol
 - Marijuana/Hashish
 - Hallucinogens/LSD/PCP/Psychedelics/Mushrooms
 - Inhalants
 - Crack/Freebase
 - Heroin and Cocaine (mixed together as Speedball)
 - Cocaine (by itself)
 - Heroin (by itself)
 - Street Methadone (non-prescription)
 - Other Opiates/Opium/Morphine/Demerol
 - Methamphetamines
 - Amphetamines (other uppers)
 - Tranquilizers/Barbiturates/Sedatives (downers)

11. How often did you use each type of drug during the last 12 months?

	DRUG USE IN LAST 12 MONTHS				
	NEVER	ONLY A FEW TIMES	1-3 TIMES A MONTH	1-5 TIMES A WEEK	ABOUT EVERY DAY
a. <u>Alcohol</u>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. <u>Marijuana/Hashish</u>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. <u>Hallucinogens/LSD/PCP/</u> <u>Psychedelics/Mushrooms</u>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. <u>Inhalants</u>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. <u>Crack/Freebase</u>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. <u>Heroin and Cocaine</u> <u>(mixed together as Speedball)</u>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g. <u>Cocaine</u> (by itself)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h. <u>Heroin</u> (by itself)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
i. <u>Street Methadone</u> (non-prescription)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
j. <u>Other Opiates/Opium/Morphine/Demerol</u>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
k. <u>Methamphetamines</u>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
l. <u>Amphetamines</u> (other uppers)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
m. <u>Tranquilizers/Barbiturates/Sedatives</u> (downers) ...	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
n. Other (<i>specify</i>) _____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

12. During the last 12 months, how often did you inject drugs with a needle?

- Never*
 Only a few times
 1-3 times per month
 1-5 times per week
 Daily

13. How serious do you think your drug problems are?

- Not at all*
 Slightly
 Moderately
 Considerably
 Extremely

14. How many times before now have you ever been in a drug treatment program?
 [DO NOT INCLUDE AA/NA/CA MEETINGS]

- Never*
 1 time
 2 times
 3 times
 4 or more times

15. How important is it for you to get drug treatment now?

- Not at all*
 Slightly
 Moderately
 Considerably
 Extremely

PARTICIPANT CONSENT
OGLE COUNTY DRUG COURT: NEW HORIZONS PROGRAM
IN THE CIRCUIT COURT OF THE FIFTEENTH JUDICIAL CIRCUIT
OGLE COUNTY, ILLINOIS

Participant Consent

_____ I have read the Ogle County Drug Court: New Horizons Program participant handbook. All my questions have been answered and I freely and voluntarily choose to participate in the Drug Court. I agree to abide by all the rules and requirements of the program.

_____ The material in the Ogle County Drug Court: New Horizons Program participant handbook has been read or explained to me verbally. All my questions have been answered and I freely and voluntarily choose to participate in the Drug Court. I agree to abide by all the rules and requirements of the program.

Participant's Name

Date

PARTICIPANT CONTRACT
OGLE COUNTY DRUG COURT
IN THE CIRCUIT COURT OF THE 15TH JUDICIAL CIRCUIT
OGLE COUNTY, ILLINOIS

I, _____, with a birth date of _____, and an address of _____

has entered a guilty plea in:

Charge: _____ Case #: _____

Charge: _____ Case #: _____

Charge: _____ Case #: _____

to wit, I understand that by entering into the Ogle County Drug Court I am bound by the following terms:

1. I will participate in substance abuse treatment as directed by the Court, including a 12-step program or another self-help program as approved by the Drug Court Team. I further agree to follow all other treatment recommendations as set forth in my treatment plan.
2. I agree to be supervised by the drug court supervisor or other person(s) designated by the drug court treatment team and report as directed.
3. I agree to submit to urine screens and abide by the chemical testing policy as outlined in the participant manual.
4. I agree to submit to intoxilyzer testing as directed by the drug court team.
5. I agree to attend drug court each week or as determined by my phase. Furthermore, I will abide by the drug court clothing policy as outlined in the participant manual and arrive at court on time.
6. I agree to pay for all treatment costs, court costs and fines associated with drug court.
7. I agree to abide by all county, state, and federal laws.
8. I will sign a consent form waiving confidentiality of any medical, treatment or social services records.
9. I understand that participating in drug court requires me to be drug and alcohol free at all times. I will not possess drugs (including marijuana), alcohol, or drug paraphernalia. I will not associate with people who use or possess, nor will I be present while drugs are being used by others.
10. I understand that I cannot possess or use any type of firearms during my drug court placement.

11. Before taking medication of any kind, I will check with a pharmacist to ensure that it is non-narcotic, non-addictive, and contains no alcohol. I will get permission for any and all medications prescribed or over-the-counter with my treatment provider and/or with the drug court team.
12. I agree to furnish the drug court team verification from my physician of any prescribed medications prior to drug testing. I understand that any medication that is prescribed must be documented and approved by the drug court team prior to its use (except in cases of medical emergency).
13. I agree that I am an Ogle County resident and will live in Ogle County until I graduate from drug court. Furthermore, I agree not to leave the state of Illinois without permission of the drug court team.
14. I agree to keep the drug court team advised of my current address, telephone number and employer. I understand that where I live and who I live with must be approved by the drug court team.
15. To further my goal of recovery and successful completion of the New Horizons Drug Court Program, I agree to be subject to searches of myself, my home, or personal belongings by a probation officer or other peace officer at any time of the day or night, without cause.
16. I agree not to be in any business where selling alcohol is the primary business.
17. I agree to inform any law enforcement officer that I come in contact with that I am a drug court client.
18. I may not participate in drug court if I am an affiliated street gang member.
19. I may not participate in drug court if I am serving as a confidential informant for any police agency.
20. I understand that the Judge may impose immediate sanctions, including jail time, without the filing of a written petition to revoke probation.
21. I understand that to successfully be discharged from the New Horizons Drug Court, I must successfully complete all five phases of the program.

Participant Signature

Date

Attorney for Participant

Date

State's Attorney

Date

Drug Court Judge

Date

IN THE CIRCUIT COURT OF THE FIFTEENTH JUDICIAL CIRCUIT
OGLE COUNTY, ILLINOIS

People of the State of Illinois,)
Plaintiff,)

vs.)

CASE NO. _____

DEFENDANT.)

DRUG COURT WRITTEN WAIVERS

() **JURY AND BENCH TRIAL**

I, the undersigned Defendant, having been advised of my right to a jury trial and/or to a bench trial, do hereby waive my right to both a jury trial and a bench trial and enter a plea of **GUILTY** to the offense(s) charged.

Dated: _____ Defendant: _____

() **RIGHT TO FILE A MOTION TO WITHDRAW GUILTY PLEA**

I, the undersigned Defendant, having been advised of my right to file a motion to withdraw my guilty plea, do hereby waive my right to file a motion to withdraw my guilty plea, upon my entry into drug court.

Dated: _____ Defendant: _____

() **RIGHT TO APPEAL**

I, the undersigned Defendant, having been advised of my right to file a Notice of Appeal, and/or to challenge any aspect of the sentence herein, do hereby waive my right to file a Notice of Appeal, or any post-trial motion regarding the sentence imposed pursuant to the plea agreement, upon my entry into drug court.

Dated: _____ Defendant: _____

OGLE COUNTY DRUG COURT
PROGRESS REPORT

Date: _____

Defendant's Name: _____ **Case#:** _____

Description of Event: _____

Recommendations: _____

Client's Signature

Date

Judge's Signature

Date

**CONFIDENTIALITY STATEMENT
OGLE COUNTY DRUG COURT: NEW HORIZONS PROGRAM
IN THE CIRCUIT COURT OF THE FIFTEENTH JUDICIAL CIRCUIT
OGLE COUNTY, ILLINOIS**

Confidentiality Statement

I _____, as a participating member or guest of the Drug Court, duly recognize my responsibility to the confidentiality of the Ogle County Drug Court, and hereby agree:

1. Any information discussed at a team meeting shall remain confidential and will not be revealed to anyone.
2. Names of program participants will be disseminated to *team members only.
3. Photos, Drug Court files and addresses of Drug Court participants will remain confidential, to be used by Drug Court Team members only.
4. Warrants of arrest are not confidential.
5. Information in the JIMS system is not confidential.

Signed: _____

Date: _____

Affiliation: _____

* Team members include law enforcement liaison officers and all team back-up members.

Note: This form is necessary in order to comply with Title 42 of the code of Federal Regulations governing Confidentiality of Drug Abuse Patient Records.

**CONSENT FOR THE RELEASE OF CONFIDENTIAL
SUBSTANCE ABUSE INFORMATION
OGLE COUNTY DRUG COURT: NEW HORIZONS
IN THE CIRCUIT COURT OF THE FIFTEENTH JUDICIAL CIRCUIT
OGLE COUNTY, ILLINOIS**

I, _____, Date of Birth _____, hereby consent to and authorize communication amongst the Ogle County Drug Court New Horizons Program, and consist of the representatives from the Ogle County State's Attorney's Office, the Public Defender's Officer, Court Services, the county law enforcement agencies, Ogle County Jail, and substance abuse treatment providers utilized by the Drug Court, and the Drug Court staff.

The information may be exchanged verbally, electronically, and/or in writing.

The purpose of, and need for, this disclosure is to inform the Court and all other named parties of my eligibility and/or acceptability for substance abuse treatment services and my treatment attendance, prognosis, compliance and progress in accordance with the Drug Court program's monitoring criteria. I understand that the information in my treatment record may include information related to sexually transmitted disease, acquired immunodeficiency syndrome (AIDS), or human immunodeficiency virus (HIV). It will also include information about behavioral or mental health services, and treatment for substance abuse.

Disclosure of this confidential information may be made only as necessary for, and pertinent, to, hearings and/or reports concerning my current charges.

_____ I understand that this consent will remain in effect and cannot be revoked by me until there has been a formal and effective termination of my involvement with the Drug Court program for the current charge. This includes, being declared unacceptable for the program, discontinuation of all court and/or probation supervision upon my successful completion of the of the drug court requirements OR upon sentencing for violating the terms of my drug court involvement.

_____ I understand that my records are protected under 42 U.S.C. 290dd-2, the Federal Confidentiality Regulation (42 CFR Part 2) and the Mental Health and Developmental Disabilities Confidentiality Act of Illinois and cannot be disclosed without written consent unless otherwise provided for in the regulations. I further understand that disclosure includes the right of the recipient to inspect and receive copies of the information to be disclosed.

_____ I understand that this written consent is not revocable while my case is pending unless there is a substantial change in my criminal justice status and that this authorization shall expire automatically, without express revocation, **18 months** form the date of authorization indicated below.

_____ It has been explained to me that if I refuse to consent to this release of information, I may become ineligible to participate in Drug Court.

Client Signature

Date

Witness Signature

Date

OGLE COUNTY DRUG COURT: NEW HORIZONS PROGRAM

Information on Drug Court for Defense Attorneys

The Ogle County Drug Court: New Horizons Program was developed to help addicted defendants address the issues of addiction and recovery. They must be committed and willing to change their current lifestyle and habits.

Their journey to recovery begins with a screening done by the Ogle County State's Attorney's Office and the Ogle County Probation Department. Following this, your client will be referred to a treatment provider for a substance abuse assessment. Treatment is intended to help the defendant. Initially, defendants will have a Drug Court status every week before the Drug Court Judge unless they are in a residential treatment facility. Their progress, or lack of progress, with court orders, treatment and abstinence will be reviewed each week by the Drug Court Team.

Responsibility and accountability are two of the most important parts of the Ogle County Drug Court: New Horizons Program. It is as important for drug court participants to meet with Drug Court staff and to keep all other appointments as it is to make their court appearances. They will be expected to provide urine drops. Failure to do a urine drop is counted as a dirty drop for which they will be held accountable. Honesty is a major part of recovery. It is vital that a drug court participant report any type of use of alcohol and/or drugs (including prescription and over-the-counter medication).

Drug Court participants will be held accountable and sanctions may be imposed for noncompliance including: writing an essay, more frequent drops, more frequent Drug Court office visits or court dates, sitting in the jury box, more intensified treatment, outside meetings, public service work, jail sentence, work release or electronic home confinement. Chronic issues of compliance could lead to termination from Drug Court.

If they successfully comply with the conditions of Drug Court, they will have: fewer court appearances, fewer office visits, fewer treatment sessions and/or fewer urine drops. Fines and fees, public service work and a jail sentence that may be reduced or canceled.

To become a Drug Court Graduate the participant must: complete their substance abuse treatment and be evaluated ready to graduate by the treatment provider, be drug free for a year and be engaged in gainful activities such as school, employment, job search or job training.

Note to Receiving Person/Organization: Under the provisions of the Mental Health and Developmental Disabilities Confidentiality Act of Illinois, you may not re-disclose any of this information unless the person who consented to this disclosure specifically consents to such re-disclosure. A general authorization for release of medical or other information is NOT sufficient for this purpose. Under the Federal Act of August, 1987, substance abuse patient records and/or any information from such records may NOT be further disclosed without specific authorization for such re-disclosure.

Client Signature

Date

Witness Signature

Date

Parent/Guardian/Authorized Representative

Date