

STATE OF FLORIDA

IN THE CIRCUIT COURT, SEVENTH JUDICIAL CIRCUIT,
IN AND FOR VOLUSIA COUNTY

VS

CASE NUMBER(S): _____

CHARGE(S): _____

Volusia County Drug Court Participation Application and Disclosure 08/16/18

I have a substance abuse problem and hereby request to be considered for the Volusia County Drug Court Program. I understand that the opportunity to participate in this program is a privilege, not a right. Understanding that accountability is an important aspect of the program, I acknowledge that if I am accepted, the following will apply to me as long as I am a participant in the program:

1. **I will enter the Program as a condition of probation:** I understand that I will enter this program as a condition of probation and that I must comply with the requirements of the program as outlined in this participation agreement, all standard conditions of probation, including any special conditions imposed at sentencing. Failure to comply with the Drug Court obligations *may* result in a violation of my probation, the issuance of an arrest warrant, modification of my probation conditions (including, but not limited to, the completion of residential treatment). If I am found in violation of probation and sentenced out of the program, the presiding Drug Court Judge is not bound by any predetermined sentences.

If agreed upon by all parties at the time of sentencing, I may be eligible to have my plea/sentence vacated and all charges against me dismissed upon successful completion of the program.

2. **I consent to ex parte communication** (communication outside my presence and/or the presence of my attorney) among all members of the treatment team regarding my health, mental health, addiction, employment, legal status, and other personal information the treatment team deems appropriate as a part of my treatment. My consent to *ex parte* communication will be withdrawn and will end upon my return to a regular court docket for any reason.

3. **I hereby waive my right of privacy and confidentiality concerning information** contained in Department of Children and Families records. I consent to allow this information and all other information concerning me to be given to all Drug Court Team members as needed to carry out official tasks. This includes, but is not limited to: urinalyses results, treatment group attendance, office visits, field visits and overall program progress.

4. **I agree to waive my due process rights** with regard to the imposition of any sanction and to submit to any reasonable search of my person or properties while a participant in the Drug Court. The waiver of due process rights does not include a Drug Court Team decision for expulsion or termination from the program.

5. **Health:** I understand that health care is an important part of becoming clean and sober; therefore, I will make a diligent effort to maintain or apply for health care coverage as soon as possible upon entry into the program.

6. **Treatment:** I will cooperate with addictions screenings and/or assessments as needed to participate in drug court. I will report to my addictions treatment provider as instructed, which will be as soon as possible after entering the program. I will develop and sign an individualized treatment plan with my counselor and participate toward accomplishing the goals and objectives in my plan. Periodic modifications to my plan will be made. If my treatment plan requires additional evaluation, counseling, medication, medical treatment or residential placement, I understand that I may be required to pay some expenses related to these services. I agree to fully participate in the addictions treatment that will be delivered in the following drug court phases. Advancement to the next phase or graduation is based on the recommendation of the Team and final approval of the Judge.

Phase 1 (Assessment, Orientation and Stabilization): Minimum duration is twenty six (26) days.

- Court Appearances: Once (1) a week in front of the Drug Court Judge
- Group Therapy Sessions: Attend at least one (1) session each day, four (4) days per week
- Individual Therapy Sessions: Attend at least one (1) session per week
- Drug Tests: As instructed through the random drug testing system and by Drug Court Team members
- Support Groups such as: AA/NA/SMART Recovery: Attend one meeting each day, five (5) days per week
- Supervisory Office Visits: Once (1) a week with Court Services Officer

- Probation Office Visits: Once (1) a month as instructed by Probation Officer
- To advance to next phase: Complete ten (10) community service work hours at approved site
- To advance to next phase: Complete sixteen (16) group therapy sessions during the phase
- To advance to next phase: Acquire twenty (20) consecutive “clean urine days”

Phase 2 (Outpatient): Minimum duration is ninety (90) days

- Court Appearances: Once (1) every two weeks in front of the Drug Court Judge
- Group Therapy Sessions: Attend at least one (1) session each day, three (3) days per week
- Individual Therapy Sessions: Attend at least one (1) session every two weeks
- Drug Tests: As instructed through the random drug testing system and by Drug Court Team members
- Support Groups such as: AA/NA/SMART Recovery: Attend one meeting each day, four (4) days per week
- Supervisory Office Visits: Once (1) every two weeks with Court Services Officer
- Probation Office Visits: Once (1) a month as instructed by Probation Officer
- First Step, Inc. Fee: Pay in full within thirty (30) days of advancing to phase 2 (\$12.48 per case)
- Obtain and maintain lawful employment within four (4) weeks of advancing to phase 2
- To advance to next phase: Complete ten (10) community service work hours at approved site
- To advance to next phase: Pay treatment provider \$300 of drug court surcharge
- To advance to next phase: Acquire forty-five (45) consecutive “clean urine days”

Phase 3 (Transitional Outpatient): Minimum duration is one hundred twenty (120) days

- Court Appearances: Once (1) every three weeks in front of the Drug Court Judge
- Group Therapy Sessions: Attend at least one (1) session each day, two (2) days per week
- Individual Therapy Sessions: Attend at least one (1) session every three weeks
- Drug Tests: As instructed through the random drug testing system and by Drug Court Team members
- Support Groups such as: AA/NA/SMART Recovery: Attend one meeting each day, four (4) days per week
- Supervisory Office Visits: Once (1) every three weeks with Court Services Officer
- Probation Office Visits: Once (1) a month as instructed by Probation Officer
- To advance to next phase: Pay treatment provider 100% of drug court surcharge
- To advance to next phase: Acquire one hundred twenty (120) consecutive “clean urine days”

Phase 4 (Continuing Care): Minimum duration is sixty (60) days

- Court Appearances: Once (1) every four weeks in front of the Drug Court Judge
- Group Therapy Sessions: Attend at least one (1) session, one (1) day per week
- Individual Therapy Sessions: Attend at least one (1) session every four weeks
- Drug Tests: As instructed through the random drug testing system and by Drug Court Team members
- Support Groups such as: AA/NA/SMART Recovery: Attend as instructed by treatment counselor
- Supervisory Office Visits: Once (1) every four weeks with Court Services Officer
- Probation Office Visits: Once (1) a month as instructed by Probation Officer
- To graduate: Pay treatment provider 100% of drug court surcharge
- To graduate: Acquire sixty (60) consecutive “clean urine days” in phase 4 and a minimum of one hundred twenty (120) consecutive clean days accumulated between phases 3 and phase 4

7. **I understand that it will take a minimum of ten (10) months to graduate drug court;** however, based on my progress and the date of the next scheduled graduation ceremony, it could take longer. Graduates that have transferred into the program may withdraw their plea and have their charges dismissed. Graduates that have entered the program as a condition of probation may be successfully terminated from probation early.
8. **I will appear at all Drug Court Hearings** as instructed by any member of the Drug Court Team. The Drug Court Team is comprised of representatives from the State Attorney’s Office, the Public Defender’s Office, the Clerk of the Court, substance abuse treatment providers, the Florida Department of Corrections (D.O.C.) Probation Office, the Seventh Judicial Circuit’s Court Administration, and the Drug Court Judge.
9. **I understand that supervision officers employed by both the Florida D.O.C. Probation and Court Administration** will conduct supervisory contacts concerning me. These contacts may occur, consistent with the confidentiality of my treatment, at my home, my work, the treatment center, the courthouse, or anywhere

deemed necessary. I will report when and where as directed by these officers. Each participant must provide a working telephone number on which they can be contacted at any time.

10. **Remaining drug free:** I understand that drug court will assist me to remain drug free by requiring the following:
- **Urine samples:** I understand that I may be required to provide urine samples at any time while I am in this program. Failing to provide a valid sample, giving a *diluted sample*, *low volume sample* or missing a urinalysis may result in a sanction as great as a sanction imposed for a *positive result*. When an independent drug-testing lab is utilized for special needs, I may be ordered to pay for the testing services. Substituting or adulterating my urine specimen may result in termination from drug court.
 - **Alcohol:** I will not ingest alcohol or enter an establishment whose primary purpose is to sell alcoholic beverages. Examples of alcohol include beer, wine, whiskey, Nyquil, Sterno and mouthwash.
 - **Illegal Drugs:** I will not ingest, purchase or possess any illegal drugs. Examples of illegal drugs include cocaine, marijuana and heroin.
 - **Prescription Drugs:** I will not use prescription drugs without a valid prescription. I will report this within twenty four (24) hours to my Supervision Officer except in case of an emergency where disclosure may take place the next workday after using the prescription. I understand that use of a controlled prescription drug may delay my advancement in or completion of the program, whether or not that drug was validly prescribed. Currently, the program is not able to incorporate the use of methadone or buprenorphine in the course of addictions treatment. Finally, I must disclose to any doctor who intends to prescribe medication to me, that I am a participant in the Volusia County Drug Court Program where abstinence from mind altering substances is my goal.
 - **Over the Counter (OTC) Drugs:** I will not ingest mind altering OTC drugs that may result in a positive drug screen. Such medications include those that contain alcohol, dextromethorphan, pseudo-ephedrine and ephedrine. I will discuss all over the counter medications and supplements that I plan to take with my Supervision Officer before I take the medication. This is particularly important before ingesting diet pills, herbal supplements or energy drinks. Examples of OTC drugs that contain prohibited ingredients include, but are not limited to: Nyquil, Actifed, Sudafed, Coricidin, Nasal Crom and Robitussin DXM. Examples of OTC medications that will not result in a positive drug screen when taken as directed include: aspirin, acetaminophen, ibuprofen and naproxen.
 - **Other substances:** I will not possess or ingest any mind and/or mood altering substances. I will not possess or ingest designer drugs, smoking mixtures, synthetic cannabinoids, poppy seeds or anything labeled “not for human consumption”. Specific examples of these substances include, but are not limited to: spice, bath salts, kratom, CBD oil, products containing cannabinoids and products containing poppy seeds.
 - **Not prohibited:** I may use nicotine, caffeine and sugar while in drug court; however, I will consider my health first.
11. **Incentives, Treatment Responses and Sanctions:** I understand that I can expect to receive incentives when I progress in the program and sanctions when I do not. Various forms of positive reinforcement such as “A” Team and “A” Team with Incentive recognition, compliments from the Judge and certificates of recognition will be used by the Team to encourage me to progress in the program. Failure to attend required counseling sessions, support meetings, supervision office visits, drug tests, using alcohol or other drugs, or failure to demonstrate progress in treatment will result in a review of my case by the Drug Court Judge. Additional counseling or support groups may be a required treatment response. Sanctions may include, but are not limited to, the loss of clean days, additionally required community service hours, written assignments, tighter supervision, incarceration, wearing electronic drug detection equipment on my person, additional treatment fees or termination from the program.
12. **I agree to promptly and truthfully answer all questions asked by any member of the Drug Court Team** and understand that I must report any contact with Law Enforcement to the Court Supervision Officer either in person or by phone within twenty-four (24) hours of the contact. I agree to obey all lawful directions given to me by a Drug Court Team member.
13. **Employment and Education:** Within four weeks of advancing to Phase 2, I agree to maintain lawful employment and/or to advance my educational status in a manner that is approved by the Drug Court Team. I will not change my educational or employment status without approval of the Drug Court Team. If I do not have my high school diploma or General Education Diploma (GED), I will make a diligent effort to obtain one before graduation.

14. **I will not violate the law**, possess weapons or associate with a person engaged in criminal activity.
15. **I agree to reside locally** and to not change my address without the approval of the Drug Court Team.
16. **I will not leave Volusia County** without the advance approval of the Drug Court Team.
17. **Restitution, First Step and Cost of Supervision**: If I have been ordered to pay restitution, I will make paying it a priority. I understand that I should pay my restitution in incremental amounts or in full before paying any other fees, costs or fines and before being permitted to graduate. Within thirty (30) days of advancing to Phase 2, I agree to pay \$12.48 per case to the Florida Department of Corrections (DOC) for the purpose of funding First Step Inc., a non-profit organization that assists probationers to include drug court participants in need of basic necessities. The 'cost of supervision fee' normally paid to DOC is suspended during my participation in drug court and is waived upon successful completion. At that time, court costs and other fees, excluding restitution, may be reduced to a civil judgment. Restitution, if any, must be paid in full in order for my case to be closed.
18. **Drug Court Surcharge**: I agree to pay the drug court treatment provider a surcharge of \$1000.00 for the first twenty-four (24) months of participation in drug court. I understand that I may substitute community service hours performed at an approved site for payment of the fee at the rate of \$10.00 per hour. This surcharge may be waived or suspended or modified by the Court, at its discretion. If I am still participating in drug court beyond twenty four (24) months from my starting date, then I also agree to pay \$80.00 for each additional month, beginning on the first day of each month, thereafter until I graduate or am sentenced out of the Program.
19. **I understand that required community service work hours** must be completed at a work site that has been approved by the Drug Court Team. Although completed work hours can be used to offset the drug court surcharge, money will not be accepted in lieu of completing community service work hours.
20. **Additional Tasks**: I will complete all tasks as directed by the Drug Court Judge. Examples of such tasks may include, but are not limited to: remaining employed, staying in school, life skills education, literacy training, vocational rehabilitation, mental health services, community resource referrals, and community service work.

I understand and accept the contents of this form which I have read or have had read to me.

Defendant's Signature / Date

Defense Counsel / Date

Defendant's Complete Physical Address

Defendant's Phone Number