# BARRON COUNTY FAMILY DRUG TREATMENT COURT PARTICIPANT HANDBOOK

MARCH 28, 2022

BARRON COUNTY
335 E. Monroe Ave
Barron, WI 54812

# Contents


Important Contact Information ..... 2
Introduction ..... 3
Overview ..... 3
Mission of Barron County Family Drug Treatment Court ..... 3
Goals and Objectives ..... 4
Confidentiality ..... 5
Benefits to Family Drug Treatment Court ..... 5
Eligibility Criteria ..... 5
Exclusionary Criteria ..... 5
Criminal Charges ..... 6
Drug Testing ..... 6
Program Rules and Expectations ..... 7
Courtroom Expectations ..... 8
Responding to Behavior- Incentives and Responses ..... 9
Medications ..... 9
Your FDTC Team ..... 9
Team Check-ins ..... 10
Team Staffing ..... 11
Review Hearings ..... 11
AODA Treatment ..... 11
Community Meetings ..... 11
Milestone advancement ..... 11
Milestone Components Explained ..... 16
Stages of Meth Recovery ..... 18

## Important Contact Information

Family Drug Court Coordinator: Heidi Erickson
Coordinator's Phone Number: (715) 537-6115

Family Drug Court Social Worker: Jessica Wager
Social Worker's Phone Number: (715)537-6389

Recovery Coach: Brianna Showkeir
Recovery Coach's Phone Number: (715)418-1857

Your AODA Counselor: _____
Counselor's Phone Number: _____

Your Treatment Provider: _____
Treatment Provider's Phone Number: _____

Your Attorney: _____
Attorney's Phone Number: _____

## Introduction

The Family Drug Treatment Court is a special program designed to help you safely, soberly and permanently parent your children. To reach that goal, this program will help you recover from substance abuse by referring you to a substance abuse treatment program. This court will monitor your progress in your treatment program. It will also monitor your progress in meeting the court ordered goals. This court program will make sure that you are having frequent contact with your children and help you to plan for your and your children's futures.

We hope that by working together, you can break the cycle of addiction and build a better life for yourself and your children.

To reunify your family, this program requires that you complete substance abuse treatment as well as other requirements set forth by the Court.

As you work through treatment, you will also progress through milestones of participation here at the Court. Each milestone has specific requirements for advancement. The court and your family case manager will monitor your progress and help you reach those requirements.

## Overview

FDTC participants are required to participate in substance abuse treatment and random drug testing, attend frequent court reviews, attend support group meetings/activities, complete a parenting program and/or family therapeutic services, show your ability to care for your children's needs, create a recovery plan, and demonstrate progress with any other treatment plan requirements such as mental health treatment and domestic violence treatment.

Addiction is a family disease and impacts every person in the family including your children, no matter how old they are. In addition to providing services to the participant, the FDTC team will see what services your children may need and will help you put those services in to place. This may include educational, developmental, therapeutic, medial, or mentoring supports. Your FDTC team may also provide services to help heal the relationship between you and your children.

Those requirements, along with any other orders given by the Court, will become part of your Treatment Plan. The Court will closely monitor your progress and compliance with these requirements and respond with rewards and therapeutic responses. The FDTC program consists of 5 milestones and takes a minimum of 12 months to complete.

It is very important to understand that compliance with FDTC program requirements does not guarantee that your children will be returned to you. There may be circumstances in which, even with full compliance, the Court determines that returning home is not in the best interests of the children.

## Mission of Barron County Family Drug Treatment Court

Through collaboration, with accountability and increased access to treatment opportunities, the FDTC improves the safety, well-being and permanence for children, supports the long-term recovery of their parents from alcohol and drug dependence, and strengthens the overall family function.

## Goals and Objectives

**OJJDP GRANT Goals**

Goal 1: Address youth victimization by supporting effective programs and practices
Objective 1.1: Establish policies, procedures and protocols for a new family treatment court program
Objective 1.2: Accept first participants into Family Treatment Court within nine months of grant funding
Objective 1.3: Re-evaluate policies and procedures every three months to ensure fidelity Objective 1.4: Collect data to determine the effectiveness of the program

Goal 2: Family Reunification
Objective 2.1: Reunify families, who are participants of Family Treatment Court (FTC), within 6- months of program acceptance as measured by FTC records.
Objective 2.2: Achieve a 75% reunification rate for families that participate in FTC as measured by FTC records.

Goal 3: Maintain Reunification
Objective 3.1: Maintain a 10% or less re-entry rate into out-of-home care for children who graduate FTC as measured by eWiSACWIS reports.

**Barron County Goals:**

**1) Participant Recovery**

**a. Parents access treatment more quickly and sustain their sobriety**

Related FTC Activities: Provide parents treatment services and other supports to participants and their family members. FDTC participants get priority enrollment into Intensive Outpatient AODA Treatment. If determined necessary, participants are referred to higher levels of treatment (inpatient) to have access to the necessary level of care.

**2) Remain at Home**

**a. More children remain at home throughout the program**

Related FTC Activities: FDTC cases will be staffed at internal in-home safety staffings, to determine eligibility for in-home safety planning and funded safety services through Targeted Safety Support Funding.

**3) Reunification**

**a. Children stay in foster care for fewer days and reunified within 12 months at a higher rate**

Related FTC Activities: Participants are provided comprehensive SUDs treatment with relapse prevention planning, mental health treatment, parent education, and other identified services to address safety threats and reunify children with their parents.

**4) Reduced Maltreatment**

**a. Fewer children experience subsequent maltreatment**

Related FTC Activities: Participants create a relapse prevention plan and develop a sober support network/community to support them after discharge from the program. Extended family members are

included in relapse prevention planning. Additional family members are offered participation in FDTC to address their own SUDs concerns, in an effort to create a healthy network for participants and their children. Additionally, participants are provided comprehensive SUDs treatment with relapse prevention planning, mental health treatment, parent education, and other identified services to address any co-occurring mental health or functioning concerns that impact long term child well-being.

**5) Re-entry**

**a. Fewer children who reunified returned back to foster care**

Related FTC Activities: Participants create a relapse prevention plan and develop a sober support network/community to support them after discharge from the program. Extended family members are included in relapse prevention planning. Additional family members are offered participation in FDTC to address their own SUDs concerns, in an effort to create a healthy network for participants and their children. Additionally, participants are provided comprehensive SUDs treatment with relapse prevention planning, mental health treatment, parent education, and other identified services to address any co-occurring mental health or functioning concerns that impact long term child well-being.

## Confidentiality

State and Federal law requires that your identity and privacy be protected. You will be asked to sign a release of information so that members of the Family Drug Treatment Court team and other agencies can work together to help you and your family. You will also be asked to sign a confidentiality agreement so information heard during a review hearing is kept confidential.

## Benefits to Family Drug Treatment Court

Frequent appearances before the Judge to demonstrate compliance

Expedited access to chemical dependency treatment services

Improved chance of reunification through increased accountability

Access to additional services, like individual counseling, employment and education counseling, and specialized services for you and your children

Support from other parents in FDTC going through the recovery process: You are not alone!

## Eligibility Criteria

1. Must have a CHIPS case in Barron County
2. Alcohol or other drug use must be a contributing factor on CPS screening form or petition
3. Agree to follow all program requirements

## Exclusionary Criteria

1. Individual has some history that resulted in the death of a child
2. Individual poses a safety concern to another participant or team member and cannot be safely managed in FDTC
3. Individual is incarcerated and the terms of sentence will severely hinder participation in FDTC
4. Any other factors that prevent reunification as determined by CPS

## Criminal Charges

For those participants who have an open criminal referral or case, the District Attorney's office will take into consideration a client's participation in the Family Drug Treatment Court. This does not mean there will be no prosecution of the criminal referral or case, but it does mean that the District Attorney's office will take into consideration the requirements of Family Drug Treatment Court and will prosecute the criminal referral or case in such a way as to not work against a participant who is meeting the requirements of Family Drug Treatment Court. Note: The District Attorney's office will prosecute a criminal referral or case in the same way as it would any defendant if a participant is terminated from the Family Drug Treatment Court.

## Drug Testing

Each participant is subject to random testing for the purpose of detecting the unauthorized use of alcohol or controlled substances. Testing will include utilization of sweat patches, mobilized breathalyzer, hair follicle testing and urinalysis testing.

**A. Urinalysis Tests**

Participants in all milestones may be requested to provide a random UA anytime throughout participation in the Family Drug Treatment Court program.

1. The participant agrees to be drug/alcohol tested at any time by any person designated by the Family Drug Treatment Court Team.
2. Upon request, the participant shall immediately deliver the requested sample. If a sample is not produced, is not of sufficient quantity, or is adulterated in any way, it will be treated as a positive sample for the presence of unauthorized drugs and/or alcohol.
3. Prior to delivering the sample, the participant will be asked whether or not the test will be positive. If he/she acknowledges that the test will be positive (and for what substances), it will then be considered a positive test, and the test may not take place. If the participant indicates the test will be negative but the test is found to be positive or found positive for substances that were not declared, the participant may be assessed a fee for the test, as well as appropriate sanctions to be imposed by the Family Drug Treatment Court team.
4. If the participant refutes the validity of the test, another Drug Court approved analysis may be performed at his/her own expense.
5. If a participant wishes to challenge the accuracy of a test result, the challenge MUST be made directly after receiving notice of the positive result. The participant must contact their attorney to discuss and challenge test results. The participant and/or their attorney must notify the assigned case manager if a confirmation test is being requested.

**B. Mobilized Breathalyzer (SmartStart)**

Participants may be subject to utilize a mobilized breathalyzer system known as SmartStart. Participants are required to provide up to five tests per day within the designated test windows. Please note that participants are subject to use the mobilized SmartStart device at the treatment team's discretion.

**C. Sweat Patches**

1. Participants are expected to adhere to the guidelines of the Sweat Patch Testing Agreement through Barron County Department of Health and Human Services.

2. Participants must bring a picture ID to appointments.
3. Participants are required to attend scheduled appointment to have the patch applied/removed. If participant does not attend the appointment at the scheduled time to have the patch removed and a new patch applied, this will be considered a positive test result.
4. Arrive on time for your scheduled appointment and check in on the 3rd floor when you arrive.
5. While wearing the sweat patch, do not tamper with the sweat patch. You may not remove the patch. You may not add tape, adhesive or any other substance to the exterior or interior of the patch. Tampering with the patch will result in a determination that the patch has been altered. This is considered a positive test.
6. Sweat patches that are known to be tampered with will not be sent in for confirmation. If information is received from the lab that a submitted sample was tampered with, this will be considered a positive test. Clients may be removed from sweat patch testing if there are concerns with non-compliance and/or tampering, alerting, and/or removing the sweat patch from their body.
7. Participants are able to perform normal activities (bathing, showering, participating in sports, swimming, etc.) When drying after a shower or a bath, blot the patch, do not rub a towel over the patch.
8. Participants are not able to use a hot tub, sauna, tanning bed, or sweat lodge while wearing the sweat patch.
9. If there are concerns about adhesion, you must immediately contact specimen collector.
10. Participants may also be required to submit a urine/saliva specimen at your worker's request.
11. Please direct questions about your need for testing, frequency or results to the Family Drug Treatment Court Coordinator.
12. It is the participant's responsibility to notify the Family Drug Treatment Court Coordinator of any medications or changes in medications.

## Program Rules and Expectations

Participants in the program will be expected to abide by the following rules to promote a healthy and safe environment for parents to be successful in their recovery:

- **Do not use or possess any drugs or alcohol**. Maintaining a drug free lifestyle is very important in your recovery process. Carefully choose the people with whom you associate.

- **Take prescription medications as prescribed by your doctor.**

- **If a physician prescribes medication for you:**
    - You must not take more medication than your doctor ordered or get multiple prescriptions from different doctors. The FDTC may request that your physician provide a Wisconsin Prescription Drug Monitoring summary.

- **Attend all suggested treatment**. If you are unable to attend a scheduled sessions, you MUST contact your treatment counselor BEFORE a session is missed.

- **Cooperate with your Barron County Social Worker and Family Drug Treatment Coordinator as directed.** If you have any problems making an appointment, contact your social worker or FDTC Coordinator immediately. This is especially important for requested urinalysis.

- **Be on time for visits and all treatment activities.**

- **Family Visits:** Attending visits with your child(ren) is important for bonding, attachment, and family healing and recovery from the effects of addiction. You will be required to confirm your visit the day prior or morning of depending on the time of the scheduled visit.
- **Treatment:** If you are late for treatment, you may not be allowed to attend your counseling session and will be considered non-compliant. This will be based off of each provider's policies and procedures. Contact your treatment counselor if there is a possibility you may be late.

- **Maintain appropriate behavior.** Violent or inappropriate behavior will not be tolerated and will be reported to the Court. This may result in discharge from the Family Drug Treatment Court program.

- **Attend all court hearings and plan to stay until the end**. If you must leave early, contact the FDTC Coordinator as soon as possible to allow enough time for the team to be notified.

- **Dress appropriately for Review Hearings.** Dress to make a positive impression. Clothing bearing drug or alcohol related themes or promoting or advertising alcohol or drug use or violence is considered inappropriate. Dress conservatively and in a respectful manner. Do not be too revealing or inappropriately dressed. Speak with your FDTC Coordinator if you need assistance with clothing.

- **Participate in treatment services.**

- **Confidentiality.** Anything heard in review hearings regarding other families is kept in the courtroom.

- **Be honest.** Honesty is essential to your recovery and to your success in Family Drug Treatment Court. This rule is intended to encourage and reward upfront honesty that supports sobriety and will be applied accordingly.

## Courtroom Expectations

The courtroom can be intimidating but it can also be a learning environment for everyone. This is an opportunity for you to listen to stories much like your own and observe other participants as they achieve success, struggle with relapse, and reunite with their children.

We would like you to be a part of this process. To ensure fewer distractions and a smoother court process, please be aware of the following expectations:

**DO:**
Arrive Early
Sit Quietly
Speak clearly and loud enough for the judge to hear you when it is your turn.
Listen actively and pay attention to others
Stay until the Judge dismisses the courtroom.
Dress for court.
Turn off your cellular phone.

**DON'T:**
Talk or have side conversations

Wear clothing that may be inappropriate
Leave early
Eat, drink, or chew gum
Sleep or read

## Responding to Behavior- Incentives and Responses

Each time you come to court, the Court will decide whether you will receive an incentive, a response, both, or neither. This decision depends on several factors, including your attendance and participation in treatment, drug screen results, and general progress in the program. While incentives and responses may not be the same for everyone, they will be fair, and the Judge will explain the reason for the response chosen.

When deciding on incentives and responses, the treatment team considers your ability to complete the task required, honesty, and length of time in the program.

**Incentives**

To help you stay motivated and reward your hard work, here is a list of incentives you may earn:

- Applause and praise from the FDTC Judge and Team
- Standing ovation
- Reduced Court appearances
- Phase advancement
- Certificates of Achievement
- Fishbowl drawing
- Gift cards
- "Big Deal Board"
- Graduation

**Responses**

- Writing assignments
- Individualized treatment responses
- Community support meetings/activities
- Contact with support person, team members, or designated professional
- Other personalized responses
- Termination of Parental Rights

## Medications

The participants in the Family Drug Treatment Court must be forthcoming to their medical providers regarding their addiction history. The participants of FDTC will not take narcotic or habit forming medication and will find alternative methods to manage symptoms. If there are no other alternative, and such medication is deemed necessary by the established medical provider, the participant shall provide documentation within 72 hours for each medication prescribed. Any drug test identifying the presence of narcotics or habit forming medications without this documentation will be considered a positive drug screen.

## Your FDTC Team

**Barron County Judges**- offers project leadership, direction in program policy, development, presides over FDTC hearings and pre-court staffing, and engages participants.

**Barron County Social Worker**- works to establish permanency for the child, develops the court report and case plan for the child and family, arranges and coordinates services for the child and parents to aid in their compliance with the case plan, oversees the visitation schedule and monitors parent's compliance with the court order.

**Child's Attorney**- Represents and advocates for the child in Children in Need of Protection and Services (CHIPS) action, ensures that the rights of the child are not abridged and provides counsel to the child, and assists with case-related decision making.

**Child's Guardian ad Litem (GAL) -** Represents the best interest of the child.

**County Attorney-** Represents the County, is the prosecutorial arm and submits motions, briefs, and orders on behalf of Barron County DHHS. They serve as an integral member of the drug court team and participate in all decisions applicable to the parent's involvement in drug court. The County Attorney also closely monitors ASFA and state statutory timeline requirements associated with reunification and permanency.

**Court Appointed Special Advocate (CASA**) - Represents the child's wishes, conducts an independent investigation of the case, provides reports to the courts/FDTC Coordinator and serves as a full FDTC team member.

**Family Drug Treatment Court Coordinator-** Works with the Barron County Social Worker to create a case plan, collects information about services/drug screens to report to the team, tracks milestone progress, and helps connect you to community resources.

**Parent's Attorney**- Represents and advocates for a parent in the Children in Need of Protection and Services (CHIPS) action, ensures that the rights of the parent are not abridged and provides counsel to the parent, and assists with case-related decision making.

**AODA Treatment Provider-** Provides AODA treatment based on assessments. Provides the team with recommendations regarding participant behaviors.

**Parent Aide-** Provides parent aide services including male and female parent groups. Works with individual families for individual family needs.

**Probation Agent-** Works with the team to ensure that all probation requirements are being met.

**Recovery Coach-** A recovery coach is a person who helps remove personal and environmental obstacles to recovery, links the newly recovering person to the recovering community, and serves as a personal guide and mentor in the management of personal and family recovery.

## Team Check-ins

There will be a team of people who will be supporting you throughout this process. Your FDTC coordinator will be at all team check-ins. Other team members at these check-ins may consist of your FDTC Social Worker, AODA counselor, recovery coach, parent aide, therapist, your child's therapist, and CASA representative, foster families, or your family/support person. If there is someone you would like to attend your team meeting, talk to your social worker or FDTC coordinator.

Once you are accepted into the FDTC, you will be required to participate in team check-ins every week for during Milestone 1. As you advance through milestones, you will be required to attend less often. Even in the higher milestones of the program, if the team is worried about you, or you are going through a major transition, you may be asked to participate in team meetings more often. These check-ins may be fact-to-face, on the phone, or via Zoom. These check-ins will allow the team to see how you are doing, and hold you accountable for completing steps in the milestones, and celebrating successes.

## Team Staffing

The team will staff your case every week you are scheduled for a review hearing. This will keep everyone up to date on your progress, and discuss possible rewards or treatment adjustments.

## Review Hearings

Review Hearings are held weekly. The Judges are on a rotation and you will only be seen by your Judge. During Milestone 1, you will be expected to attend every week. As you advance through milestones, you will be required to attend less often. Even in the higher milestones of the program, if the team is worried about you, or you are going through a major transition, you may be asked to attend more often. Review Hearings will take place from 3:00-4:30 pm every Tuesday.

## AODA Treatment

At the beginning of your participation in Family Drug Treatment Court, you will be expected to actively participate in an AODA assessment and follow the recommendations of the provider which may include inpatient or a community based program.

## Community Meetings

You must attend three self-help meetings per week. AODA treatment programming may count as one self-help per week. You must provide the FDTC Coordinator with verification of all self-help and treatment programming attended each week in a planner.

**Sponsor:** You will need to find a sponsor as you advance through the milestones. We know that finding a sponsor is a very personal and serious decision, and it may take time for you to find a sponsor that can really help you. The reason that we are asking you to participate in these community meetings is that you can build a healthy, stable, and sober support system. This support system will help you to develop healthier relationships and find activities within the community to help you maintain your sobriety.

Acceptable community meetings include:

- NA/AA/CMA Meetings
- Faith-Based Community Meetings
- Support Groups (for example: Mental Health, Domestic Violence, etc.)
- Parenting Groups (for example: Mommy and Me, Daddy and Me, SFP 10-14, etc.)

If you have other groups that you would like us to consider, please ask your team about it at your team meeting.

## Milestone advancement

There are five milestones in FDTC, which are listed below. Each milestone has its own purpose to support you in building your recovery and getting your children home with you. The time frames show the minimum amount of time it takes to complete each milestone. These are estimates- the actual time it takes will depend on each parent's circumstances and progress. Typically, the program takes 12-18 months to complete.

| Milestone | Length | Components | Advancement Criteria |
|---|---|---|---|
| **<u>Milestone 1</u>**<br>Target: Health, Stability, and Assessment<br><br>**Recovery Pillar - Health:** overcoming or managing one's disease(s) or symptoms and making informed, healthy choices that support physical and emotional well-being.<br><br>**Recovery Stage – Withdrawal Stage (Days 0 to 15):** The withdrawal stage is the first phase of recovery. During withdrawal, people can experience fatigue, disorientation and depression as well as shaking and heart palpitations. | 45 Days | 1. Complete Intake Paperwork/Releases with FDTC Coordinator.<br>2. Complete Bridge Assessment.<br>3. Complete LAP Assessment.<br>4. Compliance with all forms of drug testing including attending all scheduled appointments for sweat patches, hair follicle, UA, and saliva.<br>5. Check in with FDTC Coordinator weekly.<br>6. Start using planner.<br>7. Attend all visits with children.<br>8. ACE Screener completed with all participants (children and parents).<br>9. Attend FDTC Review Hearings every three weeks.<br>10. Complete AODA Assessments and follow recommendations (example: attending AODA therapy/groups, etc.)<br>11. Attend three self-help activities a week and provide documentation to FDTC Coordinator.<br>12. Schedule a medical appointment for all adults and children in program.<br>13. Start addressing any mental health symptoms.<br>14. Create Relapse Prevention Plan.<br>15. Secure a sponsor.<br>16. Attend FDTC every week. | 1. Necessary paperwork signed.<br>2. 30 days of consecutive sobriety. Consistent attendance to all scheduled drug test appointments and compliance with all forms of drug testing including sweat patches, hair follicle, UA, saliva.<br>3. Applied for insurance and/or scheduled medical appointment.<br>4. Attend FDTC Review Hearings weekly.<br>5. Attend 3 self-help activities each week. 2 must be NA/AA/CMA meetings each week.<br>6. Attend all visits with children.<br>7. Submit planner every Sunday (at least 50% of the time.)<br>8. Attend all team meetings and check-ins.<br>9. Meet with Public Heath for family planning.<br>10. Start working with Recovery Coach.<br>11. Completed health exam for children.<br>12. Compliance with probation, parole, bond conditions, and/or civil restraining orders if applicable.<br>13. Complete AODA assessments and follow treatment recommendations.<br>12. Create a recovery toolbox and present at FDTC.<br>14. Create Relapse Prevention Plan, and share with the team.<br>15. Secure a sponsor, provide contact information and sign release.<br>16. Compliance with FDTC rules and expectations. |
| | Length | Components | Advancement Criteria |
| **<u>Milestone 2</u>**<br>Target: Structure in Home and Work and Development of | 60 Days | 1. Attend FDTC Review Hearings every week.<br>2. Compliance with all forms of drug testing including attending all scheduled | 1. Attend FDTC Review Hearings weekly.<br>2. Attend all team meetings and check-ins.<br>3 Attend 3 self-help activities each week. 2 must be NA/AA/CMA meetings each week.<br>4. Attend all visits with children. |

| | | | |
|---|---|---|---|
| Organizational skills<br><br>**Recovery Pillar – Home:** Having a stable and safe place to live.<br><br>**Honeymoon Stage (Days 16 to 45):** After meth withdrawal ends, the body begins to recover. Cravings fade, energy increases, and mood, confidence and optimism improve. In some cases, however, individuals falsely believe their meth problem has ended. This causes many rehab clients to leave treatment and continue using alcohol or other drugs. | | appointments for sweat patches, hair follicle, UA, and saliva.<br>3. Check in with FDTC coordinator weekly.<br>4. Attend all visits with children.<br>5. Completion of treatment and/or aftercare.<br>6. Attend three self-help activities a week and provide documentation to FDTC Coordinator every Sunday.<br>7. Meet with parent aid for parenting assessment and recommendations.<br>8. Consistent use of planner.<br>9. Meet with Public Health to discuss family planning.<br>10. Address any housing concerns (home safety/housing stability).<br>11. Participate in education on budgeting and financial management.<br>12. If not completed in Milestone 1, must have a health and dental check.<br>13. Maintaining or obtaining gainful employment.<br>14. Begin childcare search (as needed)<br>15. Develop a plan to obtain driver's license/reliable transportation (as needed).<br>16. Weekly contact with sponsor.<br>17. Revisit Bridge Assessment. | 5. Completion of recommended treatment/recovery progress.<br>6. Parenting assessment completed.<br>7. Using planner for organization and to map out all responsibilities, appointments, work schedules, visits, self-help attendance and documentation that you are meeting expectations. Submit planner every Sunday consistently 60% of the time.<br>8. If needed, housing applications completed.<br>9. Started education on budgeting/financial management.<br>10. Completed health and/or dental exam for adults.<br>11. 45 Days of consecutive sobriety. Consistent attendance to all scheduled drug test appointments and compliance with all forms of drug testing including sweat patches, hair follicle, UA, saliva.<br>12. Compliance with probation, parole, bond conditions, and/or civil restraining orders if applicable.<br>13. Meeting with Recovery Coach as recommended.<br>14. Started Seeking Safety<br>15. Weekly contact with sponsor.<br>16. Revisit Bridge Assessment and prioritize goals.<br>17. Update relapse prevention plan and present to the team.<br>18. Update toolbox and present at advancement Review Hearing.<br>19. Compliance with FDTC rules and expectations. |
| | Length | Components | Advancement Criteria |
| **<u>Milestone 3</u>**<br>Target: Parenting, Mental Health, Support Network | 60 Days | 1. Attend FDTC Review Hearings every two weeks as scheduled.<br>2. Compliance with all forms of drug testing including attending all scheduled appointments for sweat | 3. Attend 3 self-help activities each week. 2 must be NA/AA/CMA meetings each week.<br>4. Using planner for organization and to map out all responsibilities, appointments, work schedules, visits, self-help attendance and documentation that you are meeting expectations. Submit planner every Sunday consistently 80% of the time |

| | | | |
|---|---|---|---|
| **Recovery Pillar – Purpose:** conducting meaningful daily activities and having the independence, income, and resources to participate in society.<br><br>**Recovery Stage - The Wall (Days 46 to 120):** During this stage of meth recovery, individuals are particularly vulnerable to relapse. They also find little pleasure in life and experience low energy, difficulty concentrating, irritability and insomnia. Clients often believe these symptoms are long-term problems. | | patches, hair follicle, UA, and saliva.<br>3. Check in with FDTC Coordinator twice monthly.<br>4. Attend all visits.<br>5. Attend three self-help activities a week and provide documentation to FDTC Coordinator.<br>6. Development of sober support network and relapse prevention plan staffed with team.<br>7. Continued weekly participation in parent education.<br>8. Started individual and/or family therapy as determined necessary by the team.<br>9. Weekly contact with sponsor.<br>10. Revisit Bridge Assessment<br>11. Revisit relapse prevention plan | 5. Attend all visits with children.<br>6. Completion of recommended treatment/Recovery Progress.<br>7. Safe and stable housing secured.<br>8. Has employment to meet basic family needs.<br>9. One team meeting with support network and FDTC team has occurred.<br>10. Individual and/or family therapy has started and making progress.<br>11. Completed Seeking Safety<br>12. 60 consecutive days of sobriety. Consistent attendance to all scheduled drug test appointments and compliance with all forms of drug testing including sweat patches, hair follicle, UA, saliva.<br>13. Compliance with probation, parole, bond conditions, and/or civil restraining orders if applicable.<br>14. Meet with Recovery Coach as recommended.<br>15. Weekly contact with sponsor.<br>16. Revisit Bridge Assessment and meet 1 goal of Bridge Assessment.<br>17. Update relapse prevention plan and present to the team.<br>18. Update toolbox and present at advancement Review Hearing.<br>19. Compliance with FDTC rules and expectations. |
| | Length | Components | Advancement Criteria |
| **<u>Milestone 4</u>**<br>Target: Strengthen independence and Development of pro-social activities<br><br>**Recovery Pillar – Community:** Having relationships and social networks that provide support, | 90 Days | 1. Attend FDTC Review Hearings every 2 weeks as scheduled.<br>2. Compliance with all forms of drug testing including attending all scheduled appointments for sweat patches, hair follicle, UA, and saliva.<br>3. Check in with FDTC Coordinator twice monthly. | 1. Attend all scheduled FDTC Review Hearings.<br>2. Attend all team meetings and check-ins.<br>3. Attend 2 NA/CMA/AA meetings each week<br>4. Participate in 1 self-care activity each week (church, walk, meditation, etc).<br>5. Using planner for organization and to map out all responsibilities, appointments, work schedules, visits, self-help attendance and documentation that you are meeting expectations. Submit planner every Sunday consistently 90% of the time<br>6. Attend all visits with children.<br>7. Housing remains stable. |

| | | | |
|---|---|---|---|
| friendship, love, and hope.<br><br>**Recovery Stage - Adjustment Stage (Days 121 to 180):** The risk for relapse reduces during the adjustment stage of meth recovery. During this phase, people feel accomplished and optimistic. They begin to adapt to their new lifestyle, which may include new jobs or relationships. | | 4. Attend all visits with children/scheduled home visits with assigned worker.<br>5. Attend three self-help activities a week and provide documentation to FDTC Coordinator.<br>6. Goal of Parent Education to be at least twice monthly, and secured in formal parenting support.<br>7. Continue in individual/family therapy as recommended.<br>8. Participate in two sober/family friendly activities per month.<br>9. Revisit Bridge Assessment- prioritize goals.<br>10. Revisit Relapse prevention plan. | 8. 90 days of consecutive sobriety. Consistent attendance to all scheduled drug test appointments and compliance with all forms of drug testing including sweat patches, hair follicle, UA, saliva.<br>9. Invite sober support person/ sponsor to attend one FDTC hearing.<br>10. Individual and/or family therapy has started and making progress.<br>11. Children have been reunified.<br>12. Compliance with probation, parole, bond conditions, and/or civil restraining orders if applicable.<br>13. Maintaining employment or has consistent income that is being used to meet basic needs.<br>14. Weekly contact with sponsor.<br>15. Revisit relapse prevention plan and present to the team.<br>16. Participate in two sober/family friendly activities per month.<br>17. Revisit Bridge Assessment and meet at least 1 goal.<br>18. Compliance with FDTC rules and expectations. |
| | Length | Components | Advancement Criteria |
| **<u>Milestone 5</u>**<br>Maintenance: Use the team and relapse prevention plans and work through challenges together<br><br>**Recovery Pillars:** Work on maintaining balance throughout all pillars (health, home, purpose, and community.<br><br>**Recovery Stage:** | 120 days | 1. Attend FDTC Review Hearing every once a month as scheduled.<br>2. Compliance with all forms of drug testing including attending all scheduled appointments for sweat patches, hair follicle, UA, and saliva.<br>3. Check in with FDTC Coordinator once monthly.<br>4. Participate in scheduled/unscheduled home visits with assigned worker.<br>5. Attend **three** self-help activities a week and provide documentation to FDTC Coordinator.<br>6. Complete formal Parent Education. | 1. Attend all FDTC Review Hearings.<br>2. Attend all team meetings and check-ins.<br>3. Attend 2 self-help activities each week. (IOP, NA, CMA, AA, MRT, ect.) One must be an in person NA meeting.<br>4. Using planner for organization and to map out all responsibilities, appointments, work schedules, visits, self-help attendance and documentation that you are meeting expectations. Submit planner every Sunday consistently 90% of the time<br>5. Housing remains stable.<br>6. 120 days of consecutive sobriety. Consistent attendance to all scheduled drug test appointments and compliance with all forms of drug testing including sweat patches, hair follicle, UA, saliva.<br>7. Progress in Individual and/or family therapy.<br>8. Use relapse prevention plan/sober support/sponsor in times of stress.<br>9. Appropriate management of children's basic needs including: medical appointments, school attendance, housing, etc. |

| | | | |
|---|---|---|---|
| **Resolution Stage (Day 181 onward):** The resolution stage represents six months of sobriety. By the six-month benchmark, people have transitioned from learning new skills to sustain sobriety to knowing the signs of relapse, maintaining a new lifestyle and identifying new areas of interest. | | 7. Continue in individual/family therapy as recommended and/or successful completion of therapy.<br>8. Continue pro-social/family friendly activities twice monthly.<br>9. Review relapse prevention plan at FDTC Review Hearing.<br>10. Revisit Bridge Assessment | 10. Compliance with probation, parole, bond conditions, and/or civil restraining orders if applicable.<br>11. Maintaining employment or has consistent income that is being used to meet basic needs.<br>12. Update relapse prevention plan and present to the team.<br>13. Complete final Bridge Assessment.<br>14. Complete all exit paperwork.<br>15. Compliance with FDTC rules and expectations. |

## Milestone Components Explained

**BRIDGE Assessment/Applying for Assistance Programs**

Getting and staying sober is very hard work, and it is even harder if your basic needs, like food, housing, clothing, and medical/dental care, are not being met. This is why we will ask you to complete the BRIDGE Assessment and to apply for Medicaid and other assistance programs, like food and housing programs as soon as we start working together. If you are eligible, Medicaid can help you with the costs for many medical, dental, mental health, and substance abuse treatment services. These are very helpful and important supports for you and your children, so we ask that you apply and turn in any needed documentation to ensure your Medicaid and assistance program stay active.

**Planner**

You will use your planner for organization and to map out all responsibilities, appointments, work schedules, visits, self-help attendance and documentation that you are meeting expectations. Submit planner every Sunday. The hope is that the planner will serve as a tool to keep track of everything you are doing to support your recovery. This is a visual guide for yourself and the team to show off everything you are doing to support your recovery. The expectation is that you bring your planner to check-ins, NA meetings, treatment appointments, and FDTC Review Hearings.

**Treatment**

Every participant's treatment is unique. Your AODA assessment will decide what level of treatment will help you best. This recommendation will then become your "required treatment" for FDTC. Any missed treatment could result in a response. Your success in this program and in your long-term recovery depends greatly on your progress in treatment. Because of this, treatment is expected to be your top priority. You should not schedule other appointments of any type during your treatment time.

**Other Assessments and Services**

We know that substance use disorders often involve issues other than just substance abuse. Many families in FDTC are also receiving services for mental health, domestic violence, sexual assault, physical health and dental needs, family therapy, couples counseling, and parent-child relationship therapy,

among others. We want to help you with any issues that may keep you from getting and staying sober or keep you from providing a safe and stable home for your children. Because of this, we may ask you at different times in the program to meet with certain professionals, have additional evaluations for needs other than substance abuse, or participate in services other than substance abuse treatment.

**Community Support Meetings/Activities**

Research, along with many people in long-term recovery, discuss the importance of community support meetings. FDTC wants to ensure you are connected to sober support before you complete the program. For this reason, attendance at community support meetings or activities throughout your time in FDTC is required. Talk to your FDTC Coordinator if you need help finding meetings. Community support meetings are different than prosocial activities. The team encourages you to be involved with prosocial activities, but these do not count towards your community support meeting requirements.

**Recovery Plan**

FDTC parents will develop a recovery plan throughout the case to help you understand your alcohol/drug use and work on recovery skills. You will also identify your support people who will help you stay focused on your recovery and help keep your children safe if a relapse does occur. Having a plan will help you keep recovery as your #1 priority, avoid relapse, or bounce back quickly if you do lapse. It is better to plan more than necessary, rather than not enough. This is ultimately YOUR PLAN for YOUR RECOVERY.

**Education and Employment**

Starting in Milestone 2, the team will encourage you to start looking into education and employment opportunities. Not only will continued education and/or employment help you provide stability for your family, but being engaged in education or employment will also support you in your recovery.

**Days of Sobriety (DOS)**

Your days of sobriety will be calculated based on your first clean urine screen and are determined by negative drug tests. DOS are one measurement of success in the program. Your days of sobriety will be reset to zero if you have a positive, missed, diluted, or altered screen, or with admission of use. You start earning days again on the date of your next negative test.

**Visits with Children**

The time your children have with you is so important, and the FDTC team will support you in making this time a priority in your schedule. Visits with your children may be emotional for you or your children, especially at the beginning of the case. There are a few ways to make visits go smoothly. Be on time or early if possible. Be prepared for your visit with supplies (food, toys, and diapers). Engage in activities with your children like games, meals/snacks, crafts, and homework. Please talk with your team if you feel you need more support during your visits. If the team notices the need for more support, services may be put into place during visits to support you and your children's relationship.

**Return Home**

We know that your children returning home is your goal, and it is ours too! Having your children return home, although very exciting, can also be a very stressful time for the whole family. We want to be able

to support your family before, during, and after your children return home. Because of this, **in order to advance to Milestone 5, your children must be in your care with no restrictions in place by the team.**

**Meeting Children's Needs**

Throughout your case, you will be asked to show your ability to understand and meet your children's needs, such as educational, medical, mental health, and developmental. In Milestones one, two and three, the team will work with you to understand your children's needs and how to meet them. In Milestone 4, the team wants to see you taking full responsibility to meeting your children's needs.

**Parenting Aide**

Parenting is a very hard job! We want to support you in becoming the best parent you can be. In phase 2, or earlier, you and your team will look into what type of parenting program would be helpful to you and your children. This will look different for everyone, depending on your relationship with our children, the ages of your children, and you or your team's goals. Educational parenting programs are intended to help you increase your parenting knowledge and skills. Therapeutic parenting programs are designed to help enhance and repair your relationship with your children.

**Mental health**

Due to the fact that mental health symptoms vary in degrees in which a person is affected during their stages in recovery by mental health symptoms, it may be necessary to address psychiatric (medical) and or therapy needs at any milestone.

## Stages of Meth Recovery

1. Withdrawal stage (Days 0-15)- The first stage of recovery is the withdrawal stage. During this stage, people can experience fatigue, disorientation and depression along with shaking and heart palpitations.

2. Honeymoon Stage (Days 16-45)- After the withdrawal ends, the body begins to recover. Cravings begin to fade, energy increases, and mood confidence and optimism improve. Although individuals are feeling good, their problem has not ended. This may cause individuals to leave treatment or continue using alcohol or other drugs.

3. The Wall (Days 46 to 120)- During this stage of recovery, individuals are particularly vulnerable to relapse. Individuals may find little pleasure in life and energy may being to drop. You may also experience difficulty concentrating, irritability and insomnia. This will pass!

4. Adjustment Stage (Days 121-180)- Individuals begin to feel accomplished and optimistic again. They begin to adapt to their new lifestyle. The risk for relapse reduces, but you must continue to follow your plan!

5. Resolution Stage (days 181+)- This stage represents six months of sobriety. By this time, people have transitioned from learning new skills to sustain sobriety to knowing the signs of relapse, maintaining a new lifestyle and identifying new areas of interest.

https://www.drugrehab.com/addiction/drugs/crystal-meth/recovery/

I _____ have gone over this handbook with my attorney and the FDTC Coordinator.

_____ _____

Participants Signature Date

_____ _____

Attorney Signature Date

_____ _____

FDTC Coordinator Signature Date