



## **SUMMIT COUNTY TURNING POINT PROGRAM**

### **PROGRAM DESCRIPTION**

**SUMMIT COUNTY COMMON PLEAS GENERAL DIVISION  
209 SOUTH HIGH STREET, AKRON, OHIO 44308**

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## **CHAPTER 1: POLICIES AND PROCEDURES**

### **History of Turning Point**

The Turning Point Program, originally established in 2002 as the Summit County Common Pleas Adult Drug Court, is a specialized docket established to assist substance use dependent felony offenders in Summit County on their road to recovery, by providing services and programming to address their specific needs. In 2013, during initial certification to the Ohio Supreme Court, the Presiding Judge re-titled it “Turning Point Program” to reduce the stigma for participants. The mission and objectives for Turning Point are stated herein.

### **Turning Point Advisory Board**

The Turning Point Advisory Board was developed in 2013, to support the effective operations of the Turning Point Program and assist in its certification before the Supreme Court of Ohio. This multidisciplinary team consists of key officials throughout the treatment and criminal justice system, as well as critical community stakeholders who collaborate and support the work of the Turning Point Program. The Turning Point Presiding Judge serves as the Chair of this Advisory Board, and attends annual meetings. The following topics are routinely discussed:

- Turning Point Program policies and procedures identifying goals, objectives, target population, program entry and case flow.
- Turning Point Program Participation Agreement, identifying the rights and responsibilities of each participant; and
- Turning Point Program Legal & Clinical Eligibility.

### **Roles and Responsibilities of the Turning Point Program Advisory Board**

Advisory Board Members shall serve a three-year term, renewable upon agreement with the Turning Point Presiding Judge’s approval. Committee members will meet annually and serve the following functions:

- Review and provide oversight on written policies and procedures Improve the quality and expand the quantity of available services, including assistance in the facilitation of agreements with partner agencies
- Garner political and community support for the program through involvement in community outreach and education
- Evaluate the program’s effectiveness and assist in planning for its sustainability.

### **Membership**

The Summit County Turning Point Program Advisory Committee consists of:

- Turning Point Presiding Judge

- Chief Prosecutor, Summit County
- Turning Point Program Defense Counsel
- Sheriff, Summit County
- Chief, Akron Police Department
- Member, Akron Police Department Street Narcotic Uniform Detail (SNUD) unit
- Director of Offender Services, Summit County Adult Probation
- Vocational Rehabilitation Supervisor, Opportunities for Ohioans with Disabilities
- Executive Director, Summit County Alcohol, Drug Addiction, & Mental Health Services (ADM) Board
- Vice President of Correctional Programs in Summit County, Oriana House, Inc.
- Chief Executive Officer, Community Health Center
- President, Summit Psychological Associates
- Chief Clinical Officer, IBH Addiction Recovery
- Founders, Hope United
- President, ARC Recovery Services
- Executive Director, Summit County Children's Services
- Chief Development Officer, Akron Area YMCA
- Chief of Staff, Impact & Communications, United Way Summit/Medina Counties
- Turning Point Program alumni
- Community member(s) in long term recovery

\*See Appendix A for current Advisory Committee Roster.

### **Mission Statement**

The mission of the Summit County Turning Point Program is to improve the overall quality of life in our community by providing effective court-supervision and enhanced treatment services for substance dependent felony offenders, in an effort to change their behaviors and reduce their risk to the community.

### **Diversity, Equity, and Inclusion Commitment Statement**

Summit County is a compassionate community that strives to see each citizen thrive. Through the Turning Point Program, our aim is to create meaningful and lasting change. Addiction is an equal opportunity disease. It reaches across age, race, gender, socioeconomic status, and across all facets of life and lived experiences.

Each day our focus is on people; building trust, promoting accountability, and seeing people for who they are while supporting their goals. To ensure our success, best practices in equity and inclusion will be considered in all we do – at all levels of the community and through the resources offered to all clients. This commitment allows us to establish policies and practices that lead to access, opportunity, and a chance for success.

The Turning Point Judge, staff, and all community partners are responsible for intentionally fostering an environment where each individual feels welcomed, respected, supported, and appreciated. We are committed to using our platform to remove systemic barriers that prevent full participation in our program. This can be a “turning point” in life and we are here to help.

### **Goals and Objectives-Standard 1(C)**

The goals and objectives of the Summit County Turning Point Program are as follows:

**Goal 1:** To have a successful impact on the number of Track 2 successful completions.

**Objective:** Within 12-18 months, 50% of Track 2 participations will successfully complete Turning Point.

**Goal 2:** Maintain the number of Track 1 successful completions.

**Objectives:** Within 12-18 months, 60% of Track 1 participants will successfully complete Turning Point.

**Goal 3:** Track success beyond graduation.

**Objectives:** Reduce recidivism so that 60% of Turning Point graduates will remain conviction free three years following graduation.

**Goal 4:** Overall Program Evaluation

**Objectives:** By 2026, obtain funding to commission a full process and outcome evaluation and cost-benefit analysis with an outside evaluator.

### **CHAPTER 2: TARGET POPULATION-Standard 1 (C) & 3 (A)**

#### **Target Population**

The Summit County Turning Point Program targets felony offenders for admission who are addicted to illicit drugs or alcohol and are at substantial risk for reoffending or failing to complete a less intensive disposition, such as standard Intervention in Lieu of Conviction or Community Control. These individuals will be assessed under the Ohio Risk Assessment System (ORAS), and will meet statutory criteria for community control or Intervention in Lieu of Conviction, as applicable. Substance use dependent offenders will typically require the full array of treatment and supervision services embodied in the 10 Key Components of Drug Courts; however, each participant will be screened to determine the offender’s particular risk and need level.

#### **Written Legal Criteria**

All individuals charged with a felony offense and subject to the jurisdiction of the Summit County Common Pleas Court are automatically reviewed for screen eligibility into Turning Point. Additionally, judges, pretrial and probation officers and attorneys working within

the Summit County Common Court of Common Pleas may refer defendants at any time pre and post adjudication (including active supervision, warrant status and judicial release) to determine program eligibility. Finally, treatment providers, family and community members may also seek screening referral for a particular defendant.

Eligibility determinations will use the following criteria:

- Felony offenders placed on Intervention in Lieu or Community Control for a felony offense;
- Felony offenders granted Judicial Release and placed on Community Control;
- Noncompliant Intervention in Lieu of Conviction Felony Participants where alcohol and/or drug use is directly related to noncompliance;
- Noncompliant felony Community Control Violators where alcohol and/or drug use is directly related to noncompliance;
- The offender must be assessed and diagnosed as substance use dependent by an approved alcohol and drug treatment provider and have a level of care recommendation of Intensive Outpatient Treatment or higher, which indicates a moderate to severe substance use disorder :
- The offender is determined to meet the following risk level utilizing the Ohio Risk Assessment System (ORAS):
  - Female
    - Moderate (upper level)
    - High
    - Very High
  - Male
    - Moderate (upper level)
    - High
    - Very High
- The offender must be mentally competent and have the developmental capacity to adhere to the participation requirements.

Potential participants are ineligible for admission in to the Turning Point Program if any of the following exist:

- Active work as a police informant
- Engagement in drug distribution, manufacturing, or assembly network
- Prior convictions for trafficking, manufacturing or assembly within the past 10 years \*\*
- Current violent criminal charge
- Prior convictions for crimes of violence within the past 10 years
- Registered sex offenders
- Active felony community control, post release control, or parole with another jurisdiction
- Active, pending felony charges in another jurisdiction
- Non-residents of Summit County
- Currently sentenced to a prison term in another jurisdiction

**\*\*Cases will be reviewed on an individual basis to determine the extent and circumstances surrounding disqualification factors, versus the need to participate in the program. For example, offenders whose trafficking convictions were the result of supporting a demonstrated addiction versus financial gain may be eligible**

Those offenders with significant felony or misdemeanor criminal and traffic histories will be reviewed individually to determine the offenders' situation and circumstances of record. Further, those offenders referred from active supervision in Community Control or Intervention in Lieu of Conviction will be individually reviewed to ensure that participation in Turning Point is a timely intervention.

Those cases declined for acceptance to Turning Point will be retained by the original assigned/referring Judge.

### **Written Clinical Criteria**

If the legal criteria are met, then the prospective candidate must have an alcohol and drug assessment completed by an approved alcohol and drug treatment assessor using the Non-Medical BH\ SUB Diagnostic Assessment. The drug and alcohol assessment shall include an Axis I diagnosis of substance dependence based on the DSM-IV criteria (or DSM-V equivalent) and the offender must have the developmental capacity to complete the Turning Point Program.

The assessment report shall include available collateral information to ensure its accuracy and will provide the following written information:

- History of alcohol and drug use, which includes information about current use and prescription medications
- A history of alcohol and drug treatment that includes the facility, both in-patient and outpatient treatment and length of stay
- Current diagnostic impression
- Preliminary case plan recommendations, including recommendations for appropriate level of care and other primary and secondary services needed to include housing, GED, mental health, etc.
- Information regarding the offender's environment and other life areas (i.e., education, employment, spiritual, physical and military background
- Offense information if needed from the arresting officer, probation, legal counsel and prior contacts with the Court system

The following are clinical factors that will disqualify an offender from participation in the program:

- Highly resistant to changing behavior despite previous interventions and/or punishments;
- Diagnosis of a developmental disability if this disability prohibits the offender from complying with or comprehending chemical dependency treatment

- Co-occurring mental health or medical conditions if there is no adequate treatment available (It is expected that some offenders referred to the program will have mental illness diagnoses that will not disqualify them from participation. Individuals with an Axis I mental illness may still be admitted to the program, but these admissions will be reviewed by the Turning Point Presiding Judge on a case-by-case basis).

*\*\*The written legal and clinical eligibility and termination criteria DO NOT create a right to participation. The Turning Point Presiding Judge has the ultimate discretion on admission to the program.*

### **CHAPTER 3: PROGRAM ENTRY AND CASE FLOW**

#### **Referral Process**

Cases will enter Turning Point Program via two tracks:

Track 1 consists of felony offenders who participate through statutory Intervention in Lieu of Conviction, governed by R.C. 2951.041. Those offenders will be direct referrals or current Intervention in Lieu Participants who are non-compliant because of alcohol and/or drug use.

Track 2 consists of felony offenders on Community Control. Those offenders will be direct referrals following sentence, current Community Control violators who are non-compliant because of alcohol and/or drug use, and felony offenders granted Judicial Release.

Both tracks will service offenders that have an impending violation due to continued substance use or treatment noncompliance.

The assigned supervising probation officer and/or assigned Judge may refer pending Community Control violators and non-compliant Intervention In Lieu of Conviction participants to Turning Point Program for screening by contacting the Turning Point Screening and Outreach Coordinator. The assigned Judge may refer cases that are being considered for Judicial Release.

Upon receipt of prospective participant referrals, the Turning Point Screening and Outreach Coordinator and/or supervising probation officer will provide the offender with a copy of the program handbook (*Appendix B & N*) and an application screening form (*Appendix C*) to be completed and returned to the Turning Point Screening and Outreach Coordinator prior to any recommendation to the Presiding Judge.

#### **Screening and Assessment**

#### **Legal Eligibility Screening**



Once the prospective participant has been identified at any stage of the proceeding as potentially eligible for Turning Point, (arrest, pre and/or post-adjudication, judicial release, warrant status), and requests screening, the Defendant will meet with the Turning Point Screening and Outreach Coordinator. During the meeting, the Ohio Risk Assessment System will be completed and the application packet along with the program handbook will be reviewed. Following this meeting, prospective participants will be referred for an alcohol and drug assessment using the Non-Medical BH\SUB Diagnostic Assessment Tool to be completed within seven to fourteen (7-14) days unless a current assessment is available (done within the last six months).

### **Clinical Assessment**

Potential candidates who agree to participate in the Turning Point Program will be referred by program staff to the Oriana House, Inc. Assessment Center for completion of a substance use assessment using the Non-Medical BH\SUB Diagnostic Assessment). Programs or persons who are appropriately licensed and trained to deliver such services according to the standards of the profession shall provide all screenings and assessments for treatment determinations. The clinical assessment will include treatment recommendations based on the appropriate level of care.

Potential candidates are required to sign a release of information form (*Appendix D*) to provide for communication about confidential information, participation and progress in treatment and compliance with the provisions of relevant law, including the "Health Insurance Portability and Accountability Act of 1996," 42 U.S.C. 300gg-42, as amended, Part 2 of Title 42, and sections 2151.421 and 2152.99 of the Revised Code.

All substance use dependency, mental health, and other programming assessments shall include available collateral information to ensure accuracy of the assessment. The Treatment Team will consider, but is not obligated to follow the clinical assessment or treatment recommendations.

Upon completion of the legal and clinical screening, the Turning Point Screening and Outreach Coordinator will provide the Turning Point Program Presiding Judge with a recommendation regarding admission to Turning Point. The Turning Point Presiding Judge has the discretion to decide the admission into the Program in accordance with the written criteria. If the participant is declined, the case will return to the originally assigned Judge to proceed in the traditional manner.

The candidate, defense attorney, any supervising probation officer, and assigned court will be notified by the Turning Point Screening and Outreach Coordinator of the decision regarding eligibility or ineligibility within five business days of the Turning Point Presiding Judge's decision via electronic and/or oral correspondence.

All screening referrals shall be completed within 30 days of the original referral from any source.

### **Program Admission**

Once the Turning Point Program Presiding Judge determines the potential participant is to be offered program entry, the potential participant is offered admission in the program, and advised of the right to a detailed, written participation agreement and participant handbook outlining the requirements and process of the Turning Point Program.

Entry is ordered at sentencing, post-conviction, or as a Community Control or Intervention In Lieu of Conviction sanction on the scheduled hearing date before the original assigned Judge. The Defendant is then scheduled for an Admission Hearing before the Turning Point Program Presiding Judge, who reviews the participant agreement (*Appendix E*), confirms the participant was provided with a participant handbook and explains the expectations and possible responses to compliance and non-compliance including termination criteria. The participant signs the Participant Agreement and is provided with a copy. All eligible offenders who did not retain counsel prior to the Admission hearing will be afforded counsel to explain the process and participation in Turning Point.

Participants shall engage in treatment services and/or programs promptly and are placed on supervision immediately following placement in the Turning Point Program to monitor compliance with court requirements.

### **Non-Discriminatory Practices**

Turning Point serves a population with diverse ethnic, cultural and spiritual backgrounds. Turning Point will not deny an offender admission to the specialized docket program based on race, color, religion, gender, sexual orientation, national origin, ancestry, age, citizenship, marital status, veteran's status, or any disability. Additionally, Turning Point will continually monitor whether minority participants have equal access to programming, receive equivalent services, and successfully complete programming at a rate equivalent to non-minorities; and, will remediate any detected disparities. Our Turning Point Treatment Team will attend up-to-date training events on the provision of culturally sensitive and culturally proficient services; and, will work to honor participants' individual cultural background by utilizing evidence-based treatment programs and/or community providers that support and encourage their participation in cultural, ethnic or spiritual celebrations or ceremonies.

### **Case Flow**

The following is a summary of the admission process into the Turning Point Program:

1. Defendant is identified as a potential participant by assigned Judge or Probation Officer and referred to the Turning Point Screening and Outreach Coordinator.
2. The Turning Point Screening and Outreach Coordinator will examine legal criteria to determine if admission should be offered to defendant. If legal criteria are not met, then case proceeds on traditional docket.

3. If legal criteria are met, the Turning Point Screening and Outreach Coordinator will provide Defendant with the Turning Point Program handbook and screening application form and discuss Turning Point Program requirements with the offender. If a current ORAS is not available, one will be completed.
4. If a current assessment is unavailable, the offender will be referred to Oriana House, Inc. Assessment Center for screening and clinical assessment, and determination regarding clinical criteria.
5. Clinical assessments with diagnosis and treatment recommendations are provided to the Screening and Outreach Coordinator
6. If the potential participant meets the legal and clinical criteria, the Screening and Outreach Coordinator will make a recommendation regarding whether the potential participant should enter the Turning Point Program. The Turning Point Program Presiding Judge will make the final decision to admit or deny the potential participant into the Turning Point Program.
7. If the potential participant meets the legal and clinical criteria, the Screening and Outreach Coordinator will schedule that potential participant to observe a session of the Turning Point Program if applicable.
8. Once the potential participant is advised of acceptance into the Turning Point Program, the potential participant will be required to acknowledge an understanding of the responses to compliance and noncompliance, including the criteria for termination. If the required forms have not been completed, such as the release and exchange of information and the participation agreement, the participant will also sign and complete those required forms.
9. The original sentencing Judge will officially order the participant to enter and successfully complete the Turning Point Program.
10. The participant will voluntarily enter the program at an Admission Hearing before the Turning Point Program Presiding Judge.

#### **CHAPTER 4: TREATMENT TEAM-Standard 1 (B)**

The Turning Point Program Treatment Team consists of the following individuals whose primary role is to oversee the daily operations of the Turning Point Program:

- Turning Point Presiding Judge
- Turning Point Program Manager(s) (responsible for supervision)
- Turning Point Screening & Outreach Coordinator
- Program Administrator
- Defense Counsel
- Caseworkers
- Oriana House, Inc. Licensed Substance Use Counselor
- Assistant Prosecutor
- Law Enforcement
- Recovery Coach
- Cognitive Skills Specialist
- OOD/ Opportunities for Ohioans with Disabilities

#### **Duties of Treatment Team Members**

The Treatment Team (*Appendix F*) is created by invitation of the Turning Point Program Judge. The Turning Point Program Judge acts as Chairperson of the Treatment Team and attends all Treatment Team meetings. The duties of the Treatment Team include:

1. The Treatment Team is responsible for the daily operations of the Turning Point Program.
2. All new treatment team members will undergo new staff training as identified in Appendix Q
3. Treatment team members agree to serve on the Treatment Team for a minimum of one year.
4. Treatment team members agree to work with local community leaders to ensure the best interests of the community are considered.
5. Treatment team members should engage in community outreach activities to build partnerships that will improve outcomes and support Turning Point Program sustainability.
6. Turning Point Program incorporates a non-adversarial approach while recognizing the distinct role of the prosecutor to pursue justice and protect public safety and victim's rights; and, defense counsel's distinct role in preserving the constitutional rights of the participants.
7. Treatment team members engage in on-going communication including frequent exchanges of timely and accurate information about participant's overall performance.
8. The Turning Point Program maintains on-going communication with Treatment Team members regarding participants' overall performance utilizing e-mail, phone calls, and weekly team meetings.
9. Mechanisms for decision-making and resolving conflicts among Treatment Team members have been established and are utilized.
10. Treatment team members maintain professional integrity, confidentiality, and accountability.
11. Treatment team members should make reasonable efforts to observe required Turning Point Program service provider programs in order to have confidence in services provided and to better understand the treatment and programming process.
12. The Treatment Team works with the Advisory Committee to assess the team functionality, review all policies and procedures, and assess the overall functionality of the Turning Point Program.

### **Specific Roles and Responsibilities**

The Treatment Team consists of the Turning Point Program Judge, Drug Court Program Managers, Screening and Outreach Coordinator, Program Administrator, Caseworkers, Substance Abuse Counselors, Cognitive Skills Specialist, Recovery Coach, Defense Counsel, Prosecutor, OOD, and a Law Enforcement representative.

Treatment Team members will consistently attend pre-court staff meetings to review participant progress, determine appropriate actions to improve outcomes, and prepare for status review hearings in court.

Case Managers and Program Managers, in consult with the Program Administrator are responsible to staff the Treatment Team meeting each week, with a list of individuals for review. At least 48 hours prior to the staffing, Program Managers will distribute an updated docket and progress notes for each scheduled participant. The notes will contain the participant's admission date, program track (Track 1 or Track 2), general compliance and status with treatment and supervision, drug testing results, treatment goals, symptom resolution, improvements and attainment of any ancillary or phase requirements, and associated information regarding the participant's progress in the program.

Below is a list of Treatment Team members and their responsibilities.

**Judge**

- Discretion to decide the admission into or termination from the Turning Point Program in accordance with the written legal and clinical criteria for the Turning Point Program
- Knowledgeable about treatment and programming methods and limitations;
- Leader of the Treatment Team
- Decision-maker of incentives, sanctions, phase advancement, and successful completion or termination
- Final decision-maker and resolves conflicts among Treatment Team members
- Attends all Treatment Team meetings, monitors treatment progress, enters court orders at status review hearings, issues incentives and sanctions, grants phase advancement, and approves participant's successful completion or unsuccessful termination from the Turning Point Program
- Discusses progress with the participant at status review hearings

**Turning Point Program Manager(s)**

- Conducts the legal eligibility screening
- Makes recommendation to Presiding Judge regarding participant admission
- Maintains the daily operations of the specialized docket
- Collects and maintains statistical information and other confidential records concerning participants, collects data from service providers
- Ensures that Treatment Team members follow program policies and procedures
- Plans and facilitates Advisory Committee meetings
- Responsible for overall supervision of each participant, under current Community Control and Summit County Adult Probation guidelines
- Participates in team meetings in which potential participants are reviewed
- Attends Treatment Team meetings and status review hearings
- Advises of any Turning Point Program violations
- Prior to and during Treatment Team meetings, Turning Point Caseworkers provide status reports (*Appendix G*) and status reports to the Treatment Team
- Participates in discussions about incentives, sanctions, phase advancement, successful completion, and termination
- Conducts Field Visits when appropriate

### **Program Administrator**

- Facilitates the specialized docket in accordance with the written program description
- Collects and maintains statistical information and other confidential records concerning participants and assists with creating reports for review and submission to funding sources
- Assigns client caseloads to case management staff
- Ensures case management services are provided in the absence of the assigned Caseworker
- Ensures case management services are in compliance with audit/contract/accreditation standards and Oriana House, Inc., policies and procedures
- Ensures that Treatment Team members follow program policies and procedures
- Attends Treatment Team meetings and status review hearings
- Monitors sanctions/incentives
- During Treatment Team meetings, provides recommendations to the team
- Advises of any violations
- Participates in discussions about incentives, sanctions, phase advancement, successful completion, and termination
- Maintains the daily operations of the specialized docket
- Participates in the Advisory Committee meeting
- Participates in team meetings in which potential participants are reviewed for eligibility

### **Screening & Outreach Coordinator**

- Attends arraignments of new criminal cases to identify cases which may be appropriate for the Turning Point Program. Communicates with Pretrial Services, Summit County Jail and Adult Probation staff to identify possible program candidates.
- Contacts and maintains communication with possible program candidates and provides program information including policies, procedures and benefits of participation in Turning Point Program.
- Screens potential program candidates for program eligibility.
- Develops program brochures, videos and other program promotional materials to educate participants on program participation.
- Conducts outreach to defense counsel and community partners to educate them on the benefits of participation in the Turning Point Program.
- Identifies and engages community resources and partners who can assist in promoting the benefits of program admission and participation.
- In partnership with a contract professional, coordinates a diversity audit, of the Turning Point Program to improve access and remove barriers to participation and recruitment. Recommends policy and procedure changes to implement recommendations from the diversity audit.

- In partnership with a contract professional, assess and recommend any needed modifications to screening protocols to align with NADCP standards for equity and inclusion.
- Prepares and provides reports of screening and recruitment data to program judge and staff. Assists the Turning Point Program Manager in maintaining program statistics.
- Enters relevant screening information and notes into court case management system (SCORS).
- Attends training relevant to drug court programs.
- Attends all program court sessions, staffing and advisory board meetings.
- Communicates with grant administrator to identify and requisition needed resources.
- Provides relevant program data and memoranda to facilitate maintaining certification from the Supreme Court of Ohio as a specialized docket.

#### **Defense Counsel**

- Preserve the constitutional rights of the participants
- Participates in the Advisory Committee meeting
- Participates in team meetings in which potential participants are reviewed for eligibility
- Attends Treatment Team meetings and status review hearings
- During Treatment Team meetings, discusses status reports with the Treatment Team
- Participates in discussions about incentives, sanctions, phase advancement, successful completion, and termination

#### **Turning Point Program Caseworkers**

- Assists participants in the development, utilization and coordination of the Individualized Program Plan (IPP)
- Meets with the participant on a regular basis to discuss individualized program goals and progress while in the program
- Coordinates referrals for clients to substance use treatment programming and ancillary services (i.e.: education, employment, mental health counseling, housing, cognitive skills programming) based on the client's identified needs
- Attends Treatment Team meeting and status review hearings
- Monitors compliance with individualized program plan
- Conducts random alcohol and drug tests; monitors medication compliance and reports testing results to the Treatment Team
- Monitors sanctions/incentives
- Informs the Treatment Team whether treatment plan, supervision plan, and court orders are followed
- Advises of any violations
- Provides necessary information to Program Managers for purposes of the preparation of participant status reports

- During Treatment Team meetings, discuss participants' progress, and provide recommendations to the Treatment Team
- Participates in discussions about incentives, sanctions, phase advancement, successful completion, and termination
- Participates in team meetings in which potential participants are reviewed for eligibility

### **Cognitive Skills Specialist**

- Conducts cognitive skills programming as scheduled to enhance academic learning ability
- Evaluates participants' overall progress and goal achievement and communicates the status to participants on a regular basis
- Provides participants with education about the cognitive errors that support a criminal lifestyle
- Educates and assists participants in utilizing cognitive behavioral techniques to counter act the use of destructive thinking patterns in accordance with cognitive behavioral strategies
- Coordinates services with Caseworkers and Program Manager
- Attends Treatment Team meetings and status review hearings
- Informs the Treatment Team whether curriculum and court orders are followed
- Participates in Treatment Team meetings and discussions about incentives, sanctions, phase advancement, successful completion and termination

### **Recovery Coach**

- Provides coaching and support to clients as challenges arise from everyday activities through one-on-one sessions, group meetings and telephonic contact
- Assists participants and their families to develop sobriety-based activities of daily living
- Facilitates the transition from a professionally directed substance abuse treatment plan to a participant developed and participant directed recovery wellness plan
- Engages hard-to-reach participants into recovery support group programming and matches those participants to particular support groups or 12-step meetings
- Facilitates small-group discussion with participants
- Accompanies clients to meetings, as directed
- Provides feedback to participants on recovery progress.
- Identifies areas to participants which have presented or may present roadblocks to continued abstinence
- Assists participants with identifying and resolving personal and environmental obstacles to recovery
- Is knowledgeable of links for participants to sources of sober housing, recovery-conducive employment, health and social services, and recovery support.
- Attends Treatment Team meetings and status review hearings
- Informs the Treatment Team regarding participants' behaviors and attitudes
- Participates in Treatment Team meetings and discussions about incentives, sanctions, phase advancement, successful completion and termination



### **Substance Abuse Counselors – Oriana House, Inc.**

- Anyone providing treatment for the Turning Point Program must be appropriately licensed and trained to deliver services
- Conducts diagnostic assessments, provides the clinical diagnosis, and develops the treatment plan
- Initiates referrals for substance use treatment programming
- Provides documentation on a participant's progress in treatment and compliance with treatment plans, including treatment attendance and results of alcohol and drug tests
- During Treatment Team meetings, gives treatment updates and makes recommendations regarding treatment needs
- Participates in discussions regarding incentives, sanctions, phase advancement, successful completion, and termination
- Participates in team meetings in which potential participants are reviewed for eligibility

### **Prosecutor**

- Pursue justice and protect public safety and victim's rights
- Participates in the Advisory Committee meeting
- Participates in team meetings in which potential participants are reviewed for eligibility
- Attends Treatment Team meetings and status review hearings in a non-adversarial manner
- During Treatment Team meetings, discusses status reports with the Treatment Team
- Participates in discussions about incentives, sanctions, phase advancement, successful completion, and termination
- Prepares legal documents for the program such as but not limited to time extensions and waiver of counsel

### **Law Enforcement**

- Participates in the Advisory Committee meeting
- Participates in team meetings in which potential participants are reviewed for eligibility
- Attends Treatment Team meetings and status review hearings in a non-adversarial manner
- During Treatment Team meetings, discusses status reports with the Treatment Team
- Participates in discussions about incentives, sanctions, phase advancement, successful completion, and termination
- Provides knowledge of street level drug trends
- Assists in the apprehension of Turning Point Program absconders

- Accompanies the Turning Point Program Managers in field visits

### **Specialized Docket File Maintenance & Confidentiality**

Treatment Team meetings are presumptively closed to participants and the public. A participant's status reports are confidential, although the docket is a matter of public record and status reviews are open to the public. The Judge may exercise discretion to permit an observer to the Treatment Team meetings, in combination with a signed confidentiality statement as demonstrated at Appendix R.

Further, all Treatment Team members are required to comply with Part 2 of Title 42 of the Code of Federal Regulations governing confidentiality of alcohol and drug abuse patient records and that recipients of any disclosures may only re-disclose within the scope of the signed Release of Information ("ROI"). A participant's voluntary, informed and competent waiver of confidentiality and privacy rights through a Release of Information ("ROI") will authorize disclosure of that participant's protected health information pursuant to the Health Insurance Portability and Accountability Act, 42 U.S.C. 300 gg 42, as amended, and sections 2151.421 and 2152.99 of the Ohio Revised Code; and, will permit treatment professionals and Treatment Team members to share of information related to the participant's substance use and mental health treatment. The sharing of information will be to the degree necessary to ensure that the participant is progressing adequately in treatment and complying with all other conditions of the program. The ROI will identify the scope of the data elements that may be shared, and for what authorized period of time (routinely for the period of time the participant is engaged in Turning Point).

Treatment Team members understand that they are not permitted to re-disclose the information to additional parties outside of the Drug Court.

The Turning Point Program Presiding Judge, Program Managers and case management staff will maintain case files on all Turning Point Program participants.

Case files maintained by Program Managers for their individual clients are stored in a Jeter System for five years from the year the case actually originated in the Courts. Files may contain the signed Release of Information, participation agreement, drug testing results, and orders and journal entries issued by the court. After a five-year period, the files go through a process of eliminating all unnecessary paperwork, thereby retaining only the pertinent documentation. Sealing files are microfilmed as needed. The files are pulled from the Jeter System that have been sealed for a minimum of five years.

Oriana House Inc. program case management files on all active participants will be stored in a filing cabinet located in the office of Oriana House, Inc., Nonresidential Services, accessible only to Oriana House, Inc., staff. Such files/records include intake forms, statements, waivers, case plans, receipts, photos, and other documents regarding a client's participation in Oriana House Inc., programs, and are destroyed five (5) years after termination from said programs. Additionally, client treatment records are destroyed seven (7) years after termination from Oriana House Inc. programs.

The Turning Point Program Presiding Judge will keep separate physical files for each participant. These files will be stored in a filing cabinet in judicial chambers, accessible

only to judicial staff. Said files will primarily consist of court documents, such as journal entries and case information sheets; and, will be destroyed upon conclusion of the case.

## **CHAPTER 5: PARTICIPANT MONITORING**

### **Treatment Team Meetings and Status Review Hearings**

The Turning Point Program will monitor each participant's performance and progress during weekly Treatment Team meetings on Wednesdays at 1:00 p.m. and every Tuesday prior to the status review hearings, commencing at 8:30 AM at the Summit County Court of Common Pleas, 209 South High Street, Akron Ohio 44308

Required attendees include: Turning Point Program Presiding Judge, Turning Point Program Manager, Turning Point Program Coordinator, Turning Point Program Screening & Outreach Coordinator, Turning Point Program Caseworkers, an Oriana House Inc. Substance Abuse Counselor, Assistant Prosecutor, Defense Counsel, Law Enforcement Officer(s), Cognitive Skills Specialist and a Recovery Coach.

The Participant has the right to request the attendance of defense counsel during the portion of the specialized docket Treatment Team meeting concerning themselves if they chose not to use the defense counsel provided by the program.

The Turning Point Program Program Manager prepares and distributes weekly Treatment Team schedule, and provides copies of the status report (*Appendix G*) and alcohol and drug screen results.

### **Status Review Hearings**

The Turning Point Program incorporates ongoing judicial interaction with each participant as an essential component of the Turning Point Program. All Turning Point Program participants are expected to appear at status review hearings as required per program phase so the participant is educated as to the benefits of complying with the Turning Point Program rules and consequences for noncompliance. In addition, having a significant number of participants appear at a single court session gives the opportunity to educate all the participants as to the benefits of court compliance and consequences of noncompliance. Frequent status review hearings establish and reinforce Turning Point Program policies and ensure effective and efficient supervision of the participant.

Note: Not all participants are required to appear at each status review hearing depending on their progress in the Turning Point Program. In the initial phase the Turning Point Program participant shall appear before the Turning Point Program Judge weekly or bi-weekly. Participants in a residential facility may appear biweekly to monthly, regardless of Phase, until they are discharged into the community, and will then comply within their particular Phase. Thereafter, the Turning Point Program participant regularly appears before the Turning Point Program Judge to review their progress through the Turning Point Program. Review hearing frequency is determined by phase participation:

<b>Phase I:</b>	<b>Weekly to Bi-Weekly review hearings</b>
<b>Phase II:</b>	<b>Weekly to Bi-Weekly review hearings</b>
<b>Phase III:</b>	<b>Every Three weeks or monthly review hearing</b>
<b>Phase IV:</b>	<b>Monthly review hearings</b>

Status review hearings will take place before the Turning Point Program Judge every Tuesday at 9:00 AM until conclusion at the Summit County Common Pleas 209 South High Street, Akron Ohio 44308.

### **Summary of Treatment**

#### **Substance Use Treatment**

The Turning Point Program offers a continuum of care for substance use including detoxification, residential, partial hospitalization, sober living, day treatment, intensive outpatient and outpatient services. Standardized patient placement criteria (Non-Medical BH\SUB Diagnostic Assessment) govern the level of care, with adjustments predicated on the participant's response to treatment and unrelated to Turning Point's programmatic phase structure.

#### **Complementary Services**

Additionally, Turning Point refers participants for treatment and social services to address conditions that are likely to (1) interfere with their response to treatment or other program services (responsivity needs), (2) increase criminal recidivism (criminogenic needs), or (3) diminish long term treatment gains (maintenance needs).

Depending on participant needs, complementary services may include housing assistance, mental health treatment, trauma-informed services, criminal-thinking interventions, family or interpersonal counseling, vocational or educational services, and medical or dental treatment.

#### **Cognitive Behavioral Therapy**

Participants will also receive behavioral or cognitive-behavioral counseling interventions to assist in problem-solving and the management of drug and alcohol related problems.

#### **Medically assisted treatment (MAT)**

MAT is the use of medications, in combination with counseling and behavioral therapies, to provide a whole-patient approach to the treatment of substance use disorders. Turning Point recognizes that MAT can significantly improve outcomes for addicted offenders. Specifically, medications can be an important part of effective treatment for offenders dependent on opioids, decreasing craving and withdrawal symptoms, blocking euphoria if relapse occurs, augmenting the effects of counseling, and reducing recidivism and re-

incarceration. The use of MAT when medically necessary will not prohibit any individual from gaining entry into, remaining in, or completing Turning Point.

The Turning Point Program adopted the following policies and procedures in reference to treatment services provided to Turning Point Program participants:

1. Turning Point Program participants are promptly assessed and placed as soon as possible in appropriate treatment services and programs, with consideration in the first phase for responsivity needs such as deficient housing, mental health symptoms, and substance related cravings or withdrawal.
2. Turning Point Program participants will receive a treatment plan & Individual Program Plan (IPP) based on their individual needs and provided services will incorporate evidenced-based strategies and address co-occurring disorders.
3. Turning Point Program treatment plans & IPP's take into consideration services that are gender responsive, culturally appropriate, and effectively address co-occurring disorders.
4. Provided services, including case plans, are appropriate and clinically necessary to the degree that available resources allow.
5. Turning Point Program participants shall have prompt access to a continuum of approved treatment and rehabilitation services.
6. During the interim phases of the program, participants will receive services designed to resolve criminogenic needs that co-occur frequently with substance use disorder, such as criminal thinking patterns, delinquent peer interactions, and family conflict.
7. The Turning Point Program treatment providers maintain a current treatment plan. The Turning Point Program case management staff maintain a current individual program plan (IPP) and a record of activities. Case plans continue to be developed throughout the specialized docket to reflect the participant's changing needs based on program progress.
8. During the later phases of the program, participants will receive services designed to maintain treatment gains by enhancing their long-term adaptive functioning, such as vocational or educational counseling.
9. All treatment and programming will be provided by appropriately licensed and trained programs or persons to deliver such services according to the standards of their profession.

The Summit County Turning Point Program has partnered with Oriana House, Inc., to provide the on-going case management services as well as to serve as the primary provider

of substance use treatment services. The Turning Point Program also utilizes an array of community agencies and has communication protocols in place to ensure that accurate and timely information about each participant's progress in treatment is conveyed to the Treatment Team.

Community agencies with whom we partner include, but are not limited to the following, to provide services to Turning Point Program participants:

**CHC Addiction Services:** Provides registration/intake, assessment, development of treatment plan, group therapies, individual treatment sessions, relapse prevention plans, aftercare plans and gender-specific programming to address those who have been diagnosed with co-occurring disorders. Medication-assisted treatment as well as an array of ancillary services including housing assistance and psychiatric services are provided. Residential treatment services for males and females are also available through the Community Health Center's RAMAR facility.

**Edwin Shaw – Dobkin Center:** Provides registration/intake, assessment, development of treatment plans, group therapies, individual treatment sessions, relapse prevention plans, aftercare plans and programming including medication-assisted treatment.

**OneEighty Inc.:** Provides residential treatment services to males and females, development of treatment plan, group therapies, individual treatment sessions, relapse prevention plans, aftercare plans and programming

**IBH Addiction Recovery:** Provides residential treatment services to males and females, development of treatment plan, group therapies, individual treatment sessions, relapse prevention plans, aftercare plans and programming

**Urban Minority Alcoholism and Drug Abuse Outreach Services (UMADAOP):** Provides culturally specific programming, registration/intake, assessment, development of treatment plans, group therapies, individual treatment sessions, relapse prevention plans, aftercare plans and programming

**Vantage Aging:** Serves a specific target population of older adults struggling with addiction. Services provided include: assessment, individual counseling, group counseling, case management, transportation assistance, specialized women's programming, outreach, family support and anxiety/grief/depression counseling to address those who have been diagnosed with co-occurring disorders.

**The LCADA Way:** A private, non-profit organization provides addiction and mental health treatment, education, prevention and recovery support services for residents in Lorain, Medina and surrounding counties. LCADA offers over 40 different types of alcohol, drug and gambling addiction treatment and prevention services, as well as mental health services.

**Portage Path Behavioral Health:** A professional health care company that exists to provide outpatient, inpatient, emergency, and other specialized behavioral health services to individuals of Summit County, Ohio, on a sliding fee scale. Services available include: outpatient groups, individual counseling, psychiatric services, medication clinics, intensive treatment services, 24-hour access to residential Psychiatric Emergency Services and a support hotline.

**Summit Psychological Associates:** A private agency that provides comprehensive mental health and addiction services for individuals in Summit, Stark, Medina, Seneca, and Sandusky counties. Staff utilizes evidence-based treatment to promote recovery, dignity and well-being. Services available include: outpatient, forensic, case management, and organizational.

Oriana House, Inc., case management staff will also collaborate with other Oriana House departments as well as available community agencies to provide ancillary services including, but not limited to:

- Educational and vocational training;
- Employment;
- Transportation;
- Housing;
- Cognitive Skills programming
- Trauma-informed programming
- Physical, mental, and dental health
- Mental health counseling & medication monitoring
- Family programming

Prior to placement in to the Turning Point Program, an appropriately credentialed substance use counselor from Oriana House, Inc., Central Assessment (or other appropriate substance abuse treatment agency) will conduct an evaluation of each participant's drug and/or alcohol issues, and only those individuals with a diagnosis of substance dependence will qualify for admission (Non-Medical BH\SUB Diagnostic Assessment).

As a condition of participation in the program, each participant agrees to enter into and complete the recommended treatment curriculum contained in the written evaluation submitted to the Turning Point Program Manager and Turning Point Program Administrator by the treatment agency, and to pay the treatment provider for costs not paid by governmental or other sources.

Treatment will be provided by a licensed treatment provider. Examples of treatment consist of but are not limited to intensive outpatient treatment, residential programming at a substance use inpatient facility, a Community-Based Correctional Facility (CBCF) or Halfway House, or in some instances, inpatient medical detoxification in a facility such as the ADM Crisis Center - Detox.

Some form of outpatient aftercare treatment will typically be required as an extension of the programming received by those individuals completing inpatient/residential treatment,

and will include individual counseling sessions and attendance at self-help or other programs.

All Turning Point Program participants are required to comply with the instructions of the staff of Oriana House Inc. or other appropriate treatment agency. Participants must report as scheduled for all treatment sessions, and participate in all activities of the treatment program.

Treatment team members will make a reasonable effort to observe Turning Point Program service provider programs to gain confidence in the services provided and to better understand the treatment and programming process.

The following is a brief description of the possible treatment options for Turning Point Program participants:

**Intensive Outpatient Treatment (IOP)** – several agencies, including Oriana House, Inc, Edwin Shaw Hospital, Community Health Center, Mature Services and UMADAOP provide outpatient treatment and counseling for any participant referred to their agency, and has each outpatient facilities. Each facility is staffed with credentialed treatment counselors whose goal is to assist the participant in recognizing and coping with his or her substance abuse problem, and in making the lifestyle changes necessary to avoid future criminal activity.

**The Oriana House, Inc., Clinically Managed Low-Intensity Residential Services, Partial Hospitalization, Intensive Outpatient Treatment Program (IOP) & Aftercare Programs** are gender-specific intensive group counseling for participants who have been diagnosed as substance dependent. The 3.1 programs offer at least 5 hours per week of low-intensity treatment services for substance related disorders to participants in the Halfway Houses. Included in the clinical services are individual, group, and family therapy, medication management, and psycho-education. This level of care is appropriate for individuals who need motivation and awareness of their disease of addiction as well as time and structure to practice and integrate their recovery and coping skills in a residential, supportive environment. The length of stay in the 3.1 Low-Intensity tends to be longer than in the more intensive residential levels of care (3.5 which is RAMAR and IBH). 3.1 is designed for the person that has failed treatment as an outpatient and needs a structured and more controlled environment in order to stay focused on treatment goals. The Partial Hospitalization Program (2.5) is offered through Oriana House, Inc. Participants spend four days each week participating in intensive treatment groups, mental health counseling, medication assisted treatment as needed, and meetings to further individualize recovery goals. The IOP group meets for three days per week for 180 minute sessions for a consecutive six-week period. This group is followed by the Oriana House, Inc., Aftercare Program which provides on-going outpatient group counseling for 90 minutes weekly for 6, 9 or 12 weeks based on risk level and clinical judgment. The curriculum utilized is The University of Cincinnati Cognitive Behavioral Interventions for Substance Abuse emphasizing skill building activities to assist with cognitive, social, emotional, and coping skill development. Aftercare sessions to practice relapse prevention skills; individual, conjoint, and multi-family sessions are included.

***\*\*An enhanced gender-specific Oriana House, Inc., Opiate Treatment IOP***



*and Aftercare Program is also offered to participants who meet diagnostic criteria for opioid dependence. When appropriate, medication-assisted treatment utilizing Suboxone is available as an adjunct to treatment programming.*

**Residential Treatment** varies in length, depending upon the specific facility's programming but typically is designed to be completed in two to six months, followed by a period of outpatient treatment as designated by the participant's individual treatment plan.

Male participants who are found to be in need of a residential level of care may also be referred to OneEighty Inc., New Destiny, IBH Addiction Recovery, RAMAR operated by Community Health Center, or other residential placement facilities as identified. Male participants who are determined to be appropriate candidates for placement into a community-based correctional facility will be referred to the Summit County Community Based Correctional Facility in Akron, Ohio.

Female participants who are found to be in need of a residential level of care may also be referred to OneEighty Inc., New Destiny, Interval Brotherhood Home, operated by Community Health Center, or other residential placement facilities as identified. Female participants placed into a CBCF will be referred to the Cliff Skeen Community Based Correctional Facility for Women in Akron, Ohio.

The length of the programming at a community-based correctional facility (CBCF) is between three and six months, and participants are given jail time credit for any time served in a CBCF program. During the initial 30 days, a CBCF participant is usually on "house restriction" status, and unable to leave the premises, except under specific circumstances.

The primary halfway house/work release facilities of the Turning Point Program are those of the Oriana House, Inc., specifically the Terrance Mann Residential Center (TMRC) and the Residential Institutional Probation Program (RIPP) for males and the Residential Corrections Center (RCC) for females.

Participants in a halfway house/work release program may be restricted to the premises of the facility but may also be permitted to attend certain outside obligations and appointments as well as to maintain employment and earn pass time away from the facility.

Although a participant's initial treatment plan may not include residential or inpatient programming, more intensive treatment may be ordered at any time during the Turning Point Program, based upon the recommendation of the Turning Point Program Treatment Team.

If a participant fails to comply with the treatment program, the court may utilize a review hearing to impose appropriate sanctions from a wide range of enforcement and treatment tools, which are addressed more completely later in this chapter under the heading of "Sanctions".

## **Phases**

The Turning Point Program is comprised of an orientation phase and Four (4) treatment phases. Phases are the steps in which a participant's performance and progress through the specialized docket are monitored.

1. Progression through the Turning Point Program is based on the participant's performance in the treatment plan and compliance with the Turning Point Program phases.
2. The minimum length of the program is 12 months
3. Phase advancement is not solely based on preset timelines.
4. Utilizing risk assessments, high need, high-risk participants appear at status review hearings weekly or bi-weekly in the specialized dockets initial phase.
5. At a minimum, the participant shall appear before the Turning Point Program judge at least weekly or bi-weekly in the initial phase.
6. In subsequent phases the participant shall appear as follows:

<b>Orientation Phase:</b>	<b>Week One</b>
<b>Phase I &amp; II:</b>	<b>Weekly to Bi-weekly</b>
<b>Phase III:</b>	<b>Every three weeks or monthly</b>
<b>Phase IV:</b>	<b>Monthly</b>
7. Time between status review hearings are increased or decreased based upon compliance with treatment protocols and observed progress.
8. Participants in a residential facility may appear biweekly to monthly, regardless of Phase, until they are discharged into the community, and will then comply within their particular Phase.

**General criteria for phase advancement may include a participant's sobriety, mental health, progress in treatment, compliance with court orders, demonstrated financial responsibility towards Court obligations, and team recommendation.**

The phases of the Turning Point Program are outlined below:

**Orientation Phase- Week One**

- Meeting with the participant to review and complete the participation agreement and release of information forms
- Review the participant handbook
- Attend initialized specialized docket status review hearing
- Introducing the participant to the members of the Treatment Team
- Complete and review your individualized treatment plan/assessment
- Address any issues with your transportation
- Contact with Caseworker /Program Manager as instructed

**Compliance Phase (Phase 1) - A minimum of 4-8 consecutive weeks with total compliance**

- Attend status review hearings every other week before the Turning Point Program Presiding Judge
  - Higher risk/higher need clients may be required to appear more frequently

- Meet with caseworker as instructed
- Attend self-help meetings as directed
- Attend treatment sessions and activities
- Report for substance abuse testing
  - Report for random and routine drug screens as directed
  - A minimum of two drug screens will be required per week
- Comply with referral to substance abuse treatment
- Negotiate terms of an Individual Program Plan (IPP) with Turning Point Program Caseworker
- Abide by rules of the Turning Point Program, probation, and obey all laws
- Submit verification of employment or school enrollment/GED class enrollment
- Remain drug and alcohol free for four (4) consecutive weeks
- Remain sanction free for four (4) consecutive weeks

**Program Engagement Phase (Phase 2) - A minimum of 6-8 consecutive weeks with total compliance**

- Continue status review hearings before the Turning Point Program Judge every other week
  - Higher risk/higher need clients may be required to appear more frequently
- Meet with caseworker as instructed
- Attend self-help meetings as directed
- Report for substance abuse testing
  - Report for random and routine drug screens as directed
  - A minimum of two drug screens will be required per week
- Continue to attend treatment sessions and activities
- Continue to abide by rules of the Turning Point Program, probation, and obey all laws
- Engage with housing, educational, vocational, employment, driver's license intervention, and parenting class referrals, as needed
- Establish sober support
- Establish pro-social activities
- Remain drug and alcohol free for six (6) consecutive weeks
- Remain sanction free for six (6) consecutive weeks
- Demonstrated commitment towards paying restitution, court costs, probation fees

**Growth and Development (Phase 3) - A minimum of 8-12 consecutive weeks with total compliance**

- Attend monthly status review hearings before the Turning Point Program Judge;
- Meet with caseworker as instructed
- Attend self-help meetings as directed
- Report for substance abuse testing
  - Report for random and routine drug screens as directed
  - A minimum of two drug screens will be required per week

- Continue to abide by rules of the Turning Point Program, probation, and obey all laws
- Continue to attend treatment sessions & activities
- Maintain sober support
- Attend pro-social activities
- Remain drug and alcohol free for eight (8) consecutive weeks
- Remain sanction free for eight consecutive weeks
- Follow through with results of ancillary Phase II referral

**Maintenance Phase (Phase 4) - A minimum of 8-12 consecutive weeks with total compliance**

- Attend monthly status review hearings before the Turning Point Program Judge
- Report for substance abuse testing
  - Report for random and routine drug screens as directed
  - A minimum of two drug screens will be required per week
- Continue to attend treatment programming sessions and activities
- Continue to abide by rules of the Turning Point Program, probation, and obey all laws
- Continue to participate in sober support community
- Obtain and/or maintain employment or consistently participate in other vocational activities
- Meet with Turning Point Program Caseworker as instructed
- Demonstrate a good faith effort to pay court costs and program fees by making consistent regular payments or complete community service hours
- Demonstrate stability in housing, educational, vocational or employment referrals, and driver's license
- Remain sanction free for eight (8) consecutive weeks
- Complete a participant authored statement regarding why they should graduate and changes that have been made
- Complete a community plan on action indicating what his/her plan will be after graduation to remain successful
- In Track 1: Twelve (12) consecutive months of sobriety and six (6) months crime free
- In Track 2: At least Twelve (12) consecutive months of sobriety and six (6) months crime free

**Incentives**

The Turning Point Program utilizes individual rewards and incentives as an important component for success in making lasting changes in behavior. These incentives and rewards recognize that the participant is doing well in the Turning Point Program, that the participant is following the rules and making difficult changes in his or her life. Incentives

are provided on a case-by-case basis, based on the simpler (proximal) or difficult (distal) nature of the achievement.

**Examples of rewards may include:**

- Verbal praise
- Tangible rewards (i.e.: bookmarks, bus tokens, phone cards, healthy foods, coffee mugs, birthday or holiday cards, books, planners, supplies, toiletries, clothing items, gift cards) Recognition in court
- Fishbowl Drawing
- Certificate of achievement/completion
- Reduction of your program requirements
- Advancement to next phase in program
- Travel privileges
- Symbolic rewards (i.e.: sobriety chips, sobriety key chains or tokens, etc.)
- Posted accomplishments
- Letters of commendation
- Commencement ceremony
- Legal incentives (i.e., dismissal of the charge(s) or vacation of a guilty plea, reduction in the charge and/or sentence, avoidance of jail and/or prison, reduction of community control supervision term, sealing of conviction record)

Incentives are both immediate and graduated of the program and are designed to encourage and reward positive behavior.

**Sanctions**

The Turning Point Program uses a variety sanctions to help a participant conform behavior to program requirements. Entry into the Turning Point Program requires more of a participant than if he or she were on regular probation, and is not an easy way out of one's legal problems.

All participants are subject to the imposition of sanctions by the Court, as a result of non-compliance or rule violations by the participant. Sanctions range in severity, depending on the seriousness of the participant's non-compliance or rule violation. Immediate, graduated and individualized sanctions shall govern the Turning Point Program's response to participant's non-compliance.

The imposition of sanctions is at the sole discretion of the Turning Point Program Judge, and sanctions may be modified based upon the facts of the individual situation and/or the recommendation of the Turning Point Program Treatment Team. Judgment on any sanctionable behavior is guided by an overriding consideration of whether the participant should continue in the program. Participants will be (1) given an opportunity to explain their perspectives concerning factual controversies and the imposition of sanctions, (2) treated in an equivalent manner to similar people in similar circumstances, and (3) accorded respect and dignity throughout the process. Although participants may request counsel to be present for any given sanction, The Turning Point will not impose a jail sanction for

non-compliance without automatically providing notice, a hearing, and representation by an attorney. A participant may waive the right to a hearing as long as the participant had the right to consult with an attorney, and the waiver is made knowingly, intelligently, and voluntarily. Participants do not have the right to contest the imposition of sanctions that do not impact the liberty interests. Adjustments in treatment activities and not sanctions. Further, all sanctions will be communicated in advance to team members and participants.

Sanctions may include, but are not limited to:

- Verbal admonishments
- Letters of apology
- Essay assignments
- Daily activity logs
- Journaling
- Life skills assessments
- Court observation
- Increased community restrictions
- More frequent review hearings before the Court;
- More frequent case management sessions;
- Increased testing of breath or urine for drugs or alcohol;
- Increased supervision requirements
- Community Service;
- Daily reporting
- Electronic monitoring, including house arrest
- Placement into a residential community correctional program;
- Incarceration
- Termination

The failure of the participant to attend any scheduled court appearance, treatment related appointment, or scheduled office visit with his or her caseworker may result in the issuance of a warrant for the participant's arrest, if he or she does not get prior approval by a member of the Turning Point team.

**Examples of rule violations, that may result in sanctions include, but are not limited to the following:**

- Missed Review Hearing with Judge – Unexcused
- Missed Treatment Session – Unexcused
- Missed Appointment with Program Manager or Caseworker
- Missed or Positive Substance Abuse Testing
- Improper Use of Prescribed Medication/Use of Prescribed Medication without Doctor's Verification
- Police contact
- New misdemeanor conviction
- New felony conviction

- Failure to notify Caseworker of current place of residence, employment/source of income, or violation of any conditions of supervision not specifically addressed by program requirements
- Failure to attend case management session or referral meeting
- Failure to provide verification of self-help attendance
- Falsification of self-help meeting attendance sheet
- Late to Turning Point court hearing or meeting
- Failure to comply with counselor's treatment recommendation(s)
- Tampering with urine drug screen
- Refusal to submit to a urine drug screen as instructed
- Failure to adhere to your Individual Program Plan.

Therapeutic adjustments refer to alterations to participants' treatment requirements that are intended to address unmet clinical or social service needs, and are not intended as an incentive or sanction, although may coincide with the imposition of either. Such adjustments are based on the participant's clinical needs as determined by a qualified treatment professional.

General therapeutic adjustments which may be used include, but are not limited to increased support group requirements, additional referrals to treatment, residential treatment placement, treatment plan review, and increased AA/NA meetings.

## **CHAPTER 6: PROGRAM COMPLETION**

### **Criteria for Successful Completion-Standard 3(B)**

Graduation criteria are the guidelines used to identify how participants can successfully complete the Turning Point Program. Criteria for successful completion of the Turning Point Program demonstrating acceptable behavior and compliance include, but are not limited to the following:

#### **Compliance and Behavior:**

- Demonstrated period of abstinence from alcohol and drugs;
- Track 1: Twelve (12) consecutive months of sobriety **and** six (6) months crime free;
- Track 2: Twelve (12) consecutive months of sobriety, **and** six (6) months crime free;
- Attended sober support group meetings;
- Display a change in thinking, attitude, and beliefs;
- Successfully completed treatment or programming;
- Obtain and/or maintain consistent employment;
- Demonstrated ability to identify and eliminate criminal thinking patterns;
- Good faith effort to pay all financial sanctions which include assessed fees by Oriana House (\$260 per year) and Probation Fees (\$240 per year), demonstrated by regular payment history or completion of community service. \*individuals shall

not be denied admission to the docket based on financial ability. The Turning Point Program will consider a participant's ability to pay fees and/or other financial obligations and made reasonable accommodations based on financial ability.

**Accomplishments:**

- Demonstrated abstinence from alcohol and drugs as evidenced by negative screens;
- Completion of treatment;
- Involvement in Pro-social activities;
- Completed Turning Point Program requirements;
- Paid in full restitution, fines and court costs, unless otherwise determined;
- Display responsibility for his or her behavior and
- Demonstrated stability in the community.

The Judge has the discretion to determine when the participant will successfully complete the program.

The process for determining when a participant has successfully completed the program includes:

- The Turning Point Program caseworker recommends the participant for successful completion;
- The Treatment Team reviews the compliant behavior and accomplishments of the participant;
- The Turning Point Program Judge makes the final decision to allow the participant to successfully complete the Turning Point Program and:
- The participant is awarded a certificate of completion at the graduation ceremony.

Track 2 participants will be released from Community Control upon successful completion of the Turning Point Program.

**Termination Classification**

**Unsuccessful Termination-Standard 3(B)**

The Judge on an on-going basis provides an explanation of responses to compliance and noncompliance including the criteria for termination. The Turning Point Program Judge has discretion to decide termination from the Turning Point Program in accordance with the following Turning Point Program written criteria.

- Ongoing non-compliance with treatment or resistance to treatment;
- New criminal conviction;
- Any Turning Point Program rule infraction or series of infractions;
- A Community Control violation or series of Community Control violations.

If a participant is unsuccessfully terminated from the Turning Point Program, they are subject to the following actions:

- A Community Control Violation and/or;



- The imposition of other penalties and incarceration and/or;
- Track 1 participants will be sentenced, resulting in a felony conviction.

The Turning Point Program will not terminate participants without providing notice of intent to terminate, a hearing, and representation by an attorney. Participants will have a commensurate level of rights as those required for community control revocation hearings. A participant may waive the right to a hearing as long as the participant had the right to consult with an attorney and the waiver is made knowingly, intelligently, and voluntarily.

### **Neutral Discharge-Standard 3(B)**

Participants of the Turning Point Program may receive a neutral discharge if they meet one or all of the following criteria:

- Diagnosed with a serious medical condition, which will prohibit them from participating in the Turning Point Program;
- Diagnosed with a serious mental health condition and/or mental deficit, which prevents them from effectively participating in the program;
- The participant relocates to other jurisdiction;
- Death; or
- Other factors that may keep the participant from meeting the requirements for successful completion.

If a participant receives a neutral discharge for the Turning Point Program, they are subject to the following actions:

- The case will be assigned to the appropriate Program Manager to continue with standard community control supervision;
- In the event of death, the case will be dismissed or terminated;
- If the participant relocates their community control may be transferred to the supervising authority in the appropriate jurisdiction.

### **Inactive or Suspension Status**

If any of the following criteria apply, the participant may be placed on inactive or suspension status:

- Placed in a residential facility and cannot be transported for status review hearings;
- In need of further assessment or evaluations to determine if the Turning Point Program is beneficial to the participant and the program; and
- Has an outstanding warrant for non-compliance from the specialized docket and the issue has not been resolved.

### **Participant Rights and Grievance Procedure**

The Turning Point Program believes participants should have an opportunity to express grievances in a systematic manner. A participant who is concerned about communication

or interaction with his/her Program Manager should notify the Case Worker immediately. A participant who is concerned about communication with his/her Case Worker should notify his/her Program Manager immediately. All participants are also free to express concerns to his/her legal counsel and/or the Turning Point Presiding Judge.

## **CHAPTER 7 SUBSTANCE ABUSE MONITORING-Standard 8**

Upon initially entering the Turning Point Program, each participant shall divulge all recent drug and/or alcohol use, including the date and approximate time of use, the amount and type of substance used, method of ingestion, and any other relevant information required by staff. They will also be required to sign a release of information allowing case management staff at Oriana House, Inc., to share all test results with the Summit County Turning Point Program.

At their case management intake appointment, the participant shall submit a full screen urine sample for testing to establish a baseline for the presence of drug metabolites in his or her system, and will not be sanctioned based upon the results of the initial urinalysis. Testing includes the participant's primary substance of dependence, as well as sufficient range of other common substances.

Due to the nature of THC and the time period sometimes required for THC elimination from the body, a participant will be considered to be negative after two consecutive urine samples test negative for THC. In addition, consistent positive urine drug screens for THC will be deemed a new use after positive results exceed a five (5) week residual period. Residual timeframes for other drugs will be determined by the guidelines outlined in the Oriana House, Inc., Policy #8043 – *Detection Period of Drugs (Appendix H)*.

As a condition of the Turning Point Program, each participant must agree to voluntarily report to the Court, Caseworker, and treatment agency staff, any violations of the Turning Point Program rules, including the use of alcohol, illegal or non-prescribed drugs, including, but not limited to, synthetic cannabinoids such as “K2” and “Spice”, inhaling or “huffing” of chemical vapors, and the abuse of otherwise properly prescribed medications such as Percocet, Vicodin, Adderall and Xanax, which contain a controlled substance.

Turning Point Program participants must report any and all prescribed medications to their treatment provider and assigned Caseworker. They must agree to provide verification of any prescription from their doctor, including signing a release for Turning Point Program personnel to contact their doctor. **See prescription drug policy # (Appendix I).**

If a participant tests positive for a controlled substance and has not adhered to the prescription drug policy, they shall be sanctioned immediately. A participant must take all prescribed medications strictly as directed.

Participants must also inform their Turning Point Program Caseworker and counselor of any “over-the-counter” (OTC) medications he or she may be using.

Inappropriate use of any medication, irrespective of whether it was prescribed or purchased over-the-counter, could result in termination from the Turning Point Program. If necessary, the Program Manager will utilize the Ohio Automated Rx Reporting System (OARRS) report to track a participant's prescription medications and identify any areas of concern, such as drug-seeking behaviors.

Turning Point Program participants are required to submit to random urinalysis and breath tests, as well as any additional testing that may be necessary. Substance testing shall be random, frequent and observed. All urine will be collected in accordance with the following Oriana House, Inc., policies and procedures: **#8035 – On-Site Instrument Based Testing, #8036 – Methodologies and #8041 – Instructions to Clients (Appendix J)**. All urine drug screen specimens are tracked by bar code and are sent to the Oriana House, Inc., testing lab, which is a Clinical Laboratory Improvement Amendments (CLIA) certified lab. The lab also participates in accredited proficiency testing with the American Association of Bioanalysts. The transport of specimens follows a documented Chain of Custody procedure as outlined in Oriana House, Inc., Policy **#8044 – Chain of Custody (Appendix K)**. Following testing of the sample, results are entered in the Oriana House, Inc., ORION database and are immediately accessible to case management staff. Random test selection is incorporated into individual alcohol and drug testing plans for participants taking in to account their drug of choice and drug detection periods. Participants will be tested to include their primary substance of dependence, as well as a sufficient range of common substances.

### **Frequency of testing**

Participants are subject to random alcohol and drug testing at a minimum of twice weekly for the duration of their program.

Every day participants are required to check in between the hours of 7:00am and 11:00am. This can be done by either calling the Reconnect phone line at 330-996-5077 or by downloading the mobile phone app ConnectComply. Each participant will receive a PIN to utilize for either service. If choosing to call into the Reconnect phone line, they will first dial the number, enter their PIN, state their first name and spell their last name. After this is completed, an automated message will inform the participant if they have been selected to submit a urine drug screen. If choosing the ConnectComply App, they will enter their username or phone number and PIN in order to log in. Once they are logged in, they will be prompted to take a picture of their face. Once the picture has been captured, a message box will pop up indicating if they have been selected. It is important that the participant read/listen to the entire message as the location and time frame will be given. A confirmation number will be issued indicating the check-in has been completed. If the participant has been selected for testing, it is their responsibility to report to the designated location within the timeframe indicated. Drug screens will not be accepted beyond the provided timeframe or at any other Oriana House Inc. location without authorization from their caseworker. Participants are responsible for providing case management staff with a valid phone number and an emergency contact number.

Each sample will be observed by Oriana House, Inc., staff and must register the correct temperature. If the collector has concerns regarding the validity of the specimen, creatinine concentration and specific gravity will be tested to ensure that the sample is an undiluted, correctly submitted urine specimen. The participant may then be asked to submit another sample for testing. All sample collection shall be random, frequent and observed.

If a participant fails to submit a urine specimen, tampers with or dilutes a urine specimen, or if the participant fails to produce a sufficient quantity of urine needed for analysis, the participant shall be sanctioned immediately as if he or she submitted a urine sample that tested positive for substance abuse.

Should a participant deny any use when confronted with a positive drug test result, the participant may request the sample be sent to an outside laboratory (Redwood Laboratory) for Gas Chromatography - Mass Spectrometry (GC/MS) confirmation/validation testing in accordance with Oriana House, Inc., ***Policy #8045 – Confirmations (Appendix L)***. The participant will not be sanctioned while waiting for the laboratory results. If the confirmation test result is negative for the substance tested, the confirmation fee may be credited towards your Oriana House, Inc. program fees or you may be reimbursed. However, if the confirmations test result is positive for drug use, the cost of the test will be assessed to the participant as an additional program fee and a more severe sanction may be issued for the deception in addition to the use.

Program participants are also required to undergo testing to detect alcohol consumption in accordance with Oriana House, Inc., ***Policy #8050 – Alcohol Testing Protocol (Appendix M)***. If a participant submits an initial positive alcohol breath test on the AlcoMonitor, a confirmation test will be administered after a 15 minutes. A participant may also be ordered to submit to enhanced monitoring for alcohol consumption by wearing a Secure Continuous Remote Alcohol Monitoring (SCRAM) device, and will be responsible for any fees associated with such a device, including the installation of a landline telephone in their residence, if necessary.

The court will immediately be notified when a participant tests positive, fails to submit to testing, submits an adulterated sample or the sample of another individual, or dilutes the sample. Failure to submit, submitting an adulterated sample, the sample of another individual, or a diluted sample will be treated as a positive test. Positive tests will result in a court appearance where an appropriate sanction as determined with input from the Treatment Team will be administered by the Turning Point Program Judge immediately. Tampering with a urine drug screen will result in an enhanced sanction of jail. The treatment provider will be notified immediately of the participant's positive test result by the assigned Turning Point Program Caseworker to allow for adjustment to treatment plans if necessary. Detox or an increased level of treatment will be facilitated when appropriate.

## **CHAPTER 8: PROFESSIONAL EDUCATION-Standard 11**

The Turning Point Program assures continuing interdisciplinary education of Treatment Team members to promote effective specialized docket planning, implementation and operations. Treatment team members are responsible for attending ongoing continuing education on a variety of topics such as:

- The specialized docket model;
- Specialized docket processes;
- Best practices in substance abuse and mental health services;
- Drug trends and alcohol and drug testing; and
- Training on community resources.

Treatment team members are encouraged to attend the Supreme Court of Ohio's Specialized Dockets Practitioner Network Annual Conference where training on several of the required topics is provided. While grant funding exists, several Turning Point Program team will attend the National Association of Drug Court Professionals (NADCP) National Conference. All Treatment Team members will receive the Specialized Docket Newsletter and agree to keep all contact information provided to the Supreme Court of Ohio Specialized Docket Section current.

### **New Treatment Team Members – Standard 11**

Treatment team members agree to serve for a minimum of one (1) year. No individual will be permitted to join the Treatment Team without first observing a Status Review and Treatment Team meeting to provide familiarity with the program operation.

New members agree to complete the following minimum requirements within 3 months of joining the Treatment Team, as part of their onboarding/training:

- (1) Review the Program Description, Participant Agreement and Participant Handbook and have a working knowledge of phase structure and phase requirements
- (2) Review the Courses on Treatment Courts Online ([www.treatmentcourts.org](http://www.treatmentcourts.org))
- (3) Review the following NADCP Publications:
  - a. Adult Drug Court Best Practice Standards, Volume I and II
  - b. Targeting the Right Participants for Adult Drug Court
  - c. Behavior Modification 101 for Drug Courts: Making the Most of Incentives and Sanctions
  - d. Six Steps to Improve Outcomes for Adults with Co-Occurring Disorders
- (4) Complete the Essential Elements of Adult Drug Courts online training
- (5) Sign Up for the Latest Training, Publications, Webinars and NADCP Events

At a minimum of once every two (2) years, an assessment of the Turning Point Program Treatment Team functionality, as well as a review of the policies and procedures and overall functionality of the Turning Point Program will be conducted. The Turning Point Program has prepared procedures to compensate for the transition of team members.

## **CHAPTER NINE: EFFECTIVENESS EVALUATION**

The Turning Point Program Judge will evaluate the effectiveness of the program by measuring the program goals and objectives as stated in chapter one, page two of the program description. The data will be collected and recorded by the Turning Point Program Program Manager and Turning Point Program Coordinator. A report will be presented and reviewed by the Advisory Committee during its annual meeting to evaluate the effectiveness and functionality of the Turning Point Program, Treatment Team, policies and procedures and whether the Turning Point Program is meeting its goals and objectives.

### **Supreme Court Reporting Data-Standard 12(A)**

The Turning Point Program will comply with reporting data as required by the Supreme Court. The data will be collected, maintained and tracked by the Turning Point Program coordinator in a Microsoft Excel spreadsheet. The data collected will include, but is not limited to the following:

- Number of participants referred;
- Number of participants accepted;
- Number of cases terminated;
- Number of cases neutrally discharged; and
- Number of cases successfully discharged

Participant identifiers will be precluded in the collection of data to protect the confidentiality of Turning Point Program participants.

### **On-going Data Collection-Standard 12(B)**

The Turning Point Program shall engage in on-going data collection in order to evaluate whether or not the program is meeting its goals and objectives. In order to protect the confidentiality of the participants identifying information will be precluded. The goals and objectives of the Turning Point Program are as follows:

**Goal 1:** To have a successful impact on the number of track 2 successful completions.

**Objective:** Within 12-18 months 50% of track 2 participations will successfully complete Turning Point

**Goal 2:** Maintain the number of track 1 successful completions.

**Objectives:** Within 12-18 months 60% of track 1 participants will successfully complete Turning Point.

**Goal 3:** Track success beyond graduation

**Objectives:** Reduce recidivism so that 60% of Turning Point graduates will remain conviction free three years following graduation.

**Goal 4:** Overall Program Evaluation

**Objectives:** By 2026, obtain funding to commission a full process and outcome evaluation and cost-benefit analysis with an outside evaluator.

## **Appendix**

- A. Advisory Board Roster
- B. Participant Handbook Track 1 and 2 (IILC and Probation Tracks)
- C. Application Screening Form
- D. Release of Information
- E. Participation Agreement
- F. Treatment Team Roster
- G. Participant Status Report
- H. Oriana House Inc. Policy #8043
- I. Prescription Drug Policy #8019
- J. Oriana House Inc. Policy #8035, #8036 #8041
- K. Oriana House Inc. Policy #8044
- L. Oriana House Inc. Policy #8045
- M. Oriana House Inc. Policy #8050
- N. Sanction & Incentives Grid
- O. Phase Requirements & Application
- P. Treatment Team Training Requirements
- Q. Confidentiality Statement
- R. Participant Grievance Form