

WASHINGTON COUNTY VETERANS TREATMENT COURT



PARTICIPANT HANDBOOK

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**Washington County Circuit Court
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TABLE OF CONTENTS

WELCOME TO WASHINGTON COUNTY VETERANS TREATMENT COURT (VTC).....	3
PART 1: VTC TEAM	4
WHAT IS THE VTC TEAM?.....	4
WHO IS PART OF THE VTC TEAM?.....	4
PART 2: OVERVIEW OF THE VTC PROGRAM.....	6
ELIGIBILITY REQUIREMENTS.....	6
ENTRANCE PROCESS	6
PROGRAM STRUCTURE	6
COURT SESSIONS.....	7
CONFIDENTIALITY AND RELEASES OF INFORMATION	7
NOTICE OF NON-DISCRIMINATION	7
PART 3: PROGRAM POLICIES, PROTOCOLS, AND REQUIREMENTS	9
COURT ATTENDANCE AND ABSENCE	9
COURTROOM BEHAVIOR	9
SUPERVISION.....	9
FINANCIAL OBLIGATIONS.....	10
ABSTINENCE AND DRUG TESTING.....	10
PRESCRIPTION MEDICATION.....	11
INCENTIVES, SANCTIONS, AND THERAPEUTIC INTERVENTIONS.....	11
TREATMENT	12
COMPLAINTS AND GRIEVANCES	12
ANTI-HARRASSMENT POLICY	13
REQUESTS FOR ACCOMMODATIONS.....	13
TERMINATION POLICY.....	13
PART 4: PROGRAM TRACKS, PHASES, AND GRADUATION	14
HOW DO THE DIFFERENT TRACKS WORK?.....	14
HOW DO PHASES WORK?	14
HOW DO I GRADUATE?	14
ALPHA TRACK PHASES AND GRADUATION	15
BRAVO TRACK PHASES AND GRADUATION.....	20
CONTRACTUAL AGREEMENT	24
APPENDICES	25

WELCOME TO WASHINGTON COUNTY VETERANS TREATMENT COURT (VTC)

Welcome to the Washington County Veterans Treatment Court (VTC) Program. This handbook will provide you with information about VTC and our expectations of you as a participant. Please review the entire handbook carefully. It will serve as a valuable resource during your involvement with the program. If you cannot find an answer in the handbook, please contact a VTC team member for help.

This is the VTC mission statement:

The mission of our program is to enhance public safety and reduce recidivism by offering eligible justice-involved veterans a sentencing alternative through a comprehensive, judicially-supervised treatment program to address underlying substance use and/or mental health disorders. Our goal is to return healthy, law-abiding veterans to the community using best practices and evidence-based approaches.

Our team is made up of both veterans and civilians, and we all honor and appreciate your service to our country. We understand that your military service has shaped your life in many ways. Our team is here to help you regain focus on the positive lessons you learned from the military and work through challenges that your military experiences may have caused.

VTC is designed to give you an opportunity to improve the quality of your life. By choosing to participate in this program, you have shown that you are ready to do the work to make positive changes toward recovery and a law-abiding life. Change is difficult, and you are sure to face many challenges in the coming months. However, you will continue moving forward one step at a time. We will be here to provide support and assistance on your path. Our program emphasizes courage, commitment, integrity, devotion, and honor, and we hope you find these values meaningful as well.

We wish you every success in this program and beyond.

Respectfully,

The Washington County Veterans Treatment Court Team

PART 1:

VTC TEAM

WHAT IS THE VTC TEAM?

The VTC team is the group that oversees the VTC program. You will interact with all the VTC team members for various reasons, so you need to know what each person does. The goal of the VTC team is to support you and the other program participants throughout your time in the program, in order to help you succeed in your recovery and commitment to a law-abiding life.

WHO IS PART OF THE VTC TEAM?

Washington County Circuit Court Judge

The VTC Judge is the formal leader of the VTC program and presides over the VTC docket. The Judge makes all final decisions about your participation and progression in the program. The Judge will provide incentives and sanctions in response to your progress and set-backs in the program. The other VTC team members will provide the Judge with information to help inform these rewards and sanctions. The Judge meets with the VTC team regularly to get updates on all the participants, including at staffing meetings directly before Court appearances.

VTC Coordinator

The VTC Coordinator acts as the main contact person for the program, and works closely with the Judge, Probation Officer and treatment providers in overseeing the program's day-to-day operations. You can contact the VTC Coordinator if you have questions about the VTC program. If you have questions about your criminal case, you will need to contact your Defense Attorney.

Washington County Deputy District Attorney (DDA)

The VTC DDA represents the State of Oregon. The DDA is the "gatekeeper" to determine if a veteran can enter the VTC program based upon his/her criminal charges and criminal history. The DDA engages in a non-adversarial way with your Defense Attorney to support your success in the program while also ensuring public safety.

Defense Attorney

The VTC Defense Attorney will represent (or co-represent) you prior to and during your participation in the VTC program. The Defense Attorney is your advocate to the rest of the VTC team and represents your legal interests. The Defense Attorney is always present when decisions are being made about incentives, sanctions, and other actions from the Court, DDA, or Probation Officer.

Washington County Probation Officer (PO)

The VTC PO provides you with case management and supervision while you are in the VTC program. The PO updates the rest of the VTC team on your compliance with community supervision, non-VA

based treatment (e.g. domestic violence counseling, parenting classes, etc.), and important life events. When applicable, the PO will be the liaison between you and your victim(s). The PO will regularly be in contact with you via phone, email, and home visits. When you meet with the PO, you will go over additional guidelines and develop a case plan. The PO is your point of contact for requesting modifications to supervision conditions, such as travel permits and no-contact orders.

Veterans Mentor Corps Coordinator

The Veteran Mentor Coordinator supervises the volunteer veteran mentors, oversees mentor recruitment and training, matches mentors with VTC participants, and continues developing the Veteran Mentor Program in collaboration with the VTC Coordinator.

Washington County Sheriff's Deputy

The VTC Sheriff's Deputy assists the PO with providing community supervision and home visits. The Sheriff's Deputy makes sure you are law-abiding and in compliance with program rules. The Sheriff's Deputy also ensures public safety by enforcing laws and making arrests, when appropriate.

Department of Veterans' Affairs Veteran Justice Outreach Specialist (VJO)

The VJO conducts outreach with justice-involved veterans to connect them with VA healthcare, treatment, housing, and primary care. As part of the VTC team, the VJO provides referrals to the program and updates the Court on your attendance and progress at treatment. The VJO will also report your urinalysis results to the Court while you are in treatment for a mental health or substance use disorder at the VA.

Washington County Veterans' Service Officer (VSO)

The VSO can help you prepare and file federal disability claims against the VA. The VSO can help you file new claims, reopen old claims, and appeal your VA decision, as applicable. The VSO can also connect you with other available veterans' benefits and give you information on community resources.

Community Treatment and Service Providers

Each VTC participant will work with different community treatment and/or service providers. These agencies provide specific treatment or services based upon the participant's needs. This includes, but is not limited to, Domestic Violence Intervention Programming, Responsible Thinking group, sober housing, Anger Management, and Parenting classes. These treatment providers share your treatment progress with the VTC team through the PO.

PART 2:

OVERVIEW OF THE VTC PROGRAM

ELIGIBILITY REQUIREMENTS

In order to qualify for VTC, you will be screened for the following eligibility criteria:

- Washington County resident
- Veteran of the U.S. Armed Forces who received an Honorable or General Under Honorable Discharge and is eligible for VA healthcare, or OHP if not VHA eligible.
- High clinical need for substance use disorder and/or mental health treatment
- Other treatment needs, for example: domestic violence, responsible thinking, anger management, parenting classes, etc.
- Criminal behavior is linked to military experience(s) or injury.
- Most misdemeanor, Class C felony, and felony drug possession crimes are eligible for VTC entry.
- Other felony crimes will be reviewed on a case-by-case basis that ensures public safety. (Examples of these crimes include, but are not limited to, firearm-related crimes, Class A and B felony property crimes, and drug delivery crimes.)

All sex crimes are excluded from the VTC program.

ENTRANCE PROCESS

The VTC team will evaluate your eligibility based upon the criteria listed above. Your Defense Attorney will work with the VTC DDA to establish the terms and date of your entrance into the program. Entry agreements may include a deferred sentence with dismissal of some or all charges, reduction of felonies to misdemeanors, or suspended imposition of a jail or prison sentence. Each criminal case and the needs of each participant are unique. Therefore, every entry agreement will also be unique to the needs and circumstances of the individual participant.

Before entering the program, you must meet with the VTC Probation Officer (PO) to determine your track. There are two tracks: “Alpha Track” and “Bravo Track”. The tracks are discussed in detail below and in Part 4 of this handbook.

PROGRAM STRUCTURE

The VTC program is a voluntary program with two separate tracks: “Alpha Track” and “Bravo Track.” Alpha Track takes a minimum of 15 months to complete, and Bravo Track takes a minimum of 12 months to complete. Part 4 of this handbook gives more information on the different tracks. Each track is separated into phases, which are also described in detail in Part 4 of this handbook. Each phase has its own requirements, and you can apply to advance to the next phase once you have completed all the requirements of your current phase. Part 4 of this handbook describes the phase requirements and

application process for each phase. You can apply to graduate from the program once you have completed all the requirements of the final phase, as described in Part 4 of this handbook.

There are certain circumstances in which you could be terminated from the program. Please review the "Termination Policy" in Part 3 for more information.

COURT SESSIONS

VTC status hearings occur on the first three (3) Mondays of each month (though only veterans in Alpha Track - phase 1 are required to attend the 2nd Monday hearing) at 2:00 pm in the Washington County Courthouse complex in the assigned Veterans Treatment Court Judge's courtroom, unless otherwise specified. The frequency of Court attendance is based on your current phase and/or specific direction from the Judge. Occasionally, the date of a Court session will change due to holidays or other Court obligations. You will be provided advanced notice of any date changes and are required to attend in accordance with your current phase and/or direction from the Judge. More information about Court sessions can be found in Part 3 under "Court Attendance and Absence Policy."

CONFIDENTIALITY AND RELEASES OF INFORMATION

Your information is protected and will only be utilized for the intended purposes of the VTC program. You will be asked to sign a specialty court consent form for the release of confidential information for the sole purpose of VTC team communication and reports concerning your VTC participation and treatment (Appendix A). The confidentiality of your alcohol and drug treatment records are protected under the following Federal regulations:

- 42 Code of Federal Regulations (CFR) Part 2- Confidentiality of Alcohol and Drug Abuse Patient Records
- Health Insurance Portability and Accountability Act (HIPAA) of 1996- 45 CFR Parts 160, 162 and 164

You can contact your attorney or the VTC Coordinator for more information on confidentiality and your protection under the law.

Before entering VTC, you will be asked to sign the Department of Veterans' Affairs (VA) Form 10-5345 Request for and Authorization to Release Health Information (Appendix B). This will allow the VA Veteran Justice Outreach Specialist (VJO) to disclose information on your treatment progress and compliance to the rest of the VTC team. You can contact the VJO for more information on VA release of information policies.

You must sign both releases of information to participate in the VTC program.

Court status hearings are open to the public. Any information disclosed in Court will become public record.

NOTICE OF NON-DISCRIMINATION

Washington County Veterans Treatment Court complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, disability, religion, sex, gender identity, sexual

orientation, or age. Washington County Veterans Treatment Court operates its program, services, and activities in compliance with federal nondiscrimination laws.

Washington County Veterans Treatment Court receives funding from the Department of Justice, Bureau of Justice Assistance, and complies with all civil rights and nondiscrimination laws and provisions, as required by the department.

PART 3:

PROGRAM POLICIES, PROTOCOLS, AND REQUIREMENTS

COURT ATTENDANCE AND ABSENCE

As described in Part 1 under “Court Sessions”, your Court attendance schedule depends on your current phase, unless the Judge gives you different orders. If you are ever unsure about when you are supposed to attend Court, contact the VTC Coordinator to confirm. You must be on-time to every status hearing and stay in the Courtroom until the docket is completed and all VTC participants are done with their status hearings. If you have an emergency and are unable to attend Court, you must contact the VTC Coordinator and ask to be excused. If you are running late to Court for reasons beyond your control, you must take steps to contact someone on the VTC team and let them know when you expect to arrive. Unexcused lateness of more than ten minutes may result in sanctions from the Judge. If you fail to appear for Court without being excused, the Judge will issue a warrant for your arrest. Excused lateness or absences may result in additional assignments or make-up meetings with a member of the VTC team.

COURTROOM BEHAVIOR

You shall maintain appropriate behavior at all times during VTC status hearings and while in the Courthouse, including but not limited to:

- Remaining quiet while in the courtroom
- Turning off cell phones before entering the courtroom
- Not sleeping in the courtroom
- Not eating or drinking in the courtroom
- Not wearing hats or sunglasses in the courtroom
- Not wearing flip flops or shorts in the courtroom
- No gum
- No public displays of affection
- No tobacco products, e-cigarettes, or vaping products

SUPERVISION

You are required to meet with the VTC Probation Officer in addition to appearing for Court. Your current phase will determine how frequently you must meet with your Probation Officer, unless the Judge or Probation Officer give you different instructions. The Probation Officer will discuss the conditions of your supervision with you initially and as you advance through the program. The VTC Sheriff’s Deputy and Probation Officer will also make home and worksite visits on a scheduled and/or random basis, as determined by your current phase and/or individual situation.

FINANCIAL OBLIGATIONS

You will have the following financial obligations:

- With rare exception, you must pay off any Court-ordered restitution before graduating from the VTC program.
- You are still responsible for paying other Court-ordered fines and fees related to your conviction that the Judge may impose.

You will develop a budget and financial plan with your Probation Officer to ensure you pay off all balances by the end of the final phase. You can discuss any financial concerns with your Probation Officer.

You can request VTC financial assistance for specific items/expenses by completing a Financial Request Form (Appendix C) or by contacting the VTC Coordinator. The VTC Coordinator is the central point of contact for financial assistance requests. You must pursue all available community resources before requesting VTC financial assistance.

ABSTINENCE AND DRUG TESTING

You must completely abstain from the use of non-prescribed drugs and alcohol throughout your entire time in the VTC program. **This includes kratom, synthetic marijuana (e.g. “spice”) and marijuana, even for medicinal purposes.** You must also avoid using or ingesting the following items, as they have been linked to false-positive drug tests:

- Energy drinks
- Kombucha
- Poppy seeds
- THC or CBD products (bath bombs, food/beverages, lotions, etc.)
- Alcohol-based mouth wash
- Inhalants or huffing
- Non-prescription medication containing alcohol, codeine and ephedrine, such as Nyquil
- Alcohol-based hand sanitizer

You will be tested for the presence of drugs and alcohol in your system on a random basis. The frequency of drug and alcohol tests is determined by your history, your current phase, the VTC team, and/or your Probation Officer. Drug and alcohol testing will be observed. Upon entry into the program you will be referred to Solutions Group NW (SGNW), where you will enroll in their substance use testing program. You must adhere to all requirements and directives from SGNW and report all prescriptions so they have them on file in case a “false positive” is detected. You may also be required to submit to additional drug and alcohol testing at the VA or with your probation officer.

The Court may sanction you if you produce a positive test, miss a test, are late for a test, fail to produce a urine specimen, provide insufficient quantity of a urine specimen, or present a dilute sample. A dilute sample is caused by the ingestion of excessive amounts of fluids. You will be sanctioned for substituting or altering your specimen or trying in any way to modify your body fluids for the purpose of changing the drug testing results. This type of behavior may ultimately result in termination from the program. Any of these scenarios

may result in a reset of your “program sobriety date”, which could impact when you are able to advance to the next phase. Your program sobriety date might be different from what you consider your “sobriety date”, but the Court will use it as a benchmark throughout your time in the VTC program. The VTC Coordinator will keep track of your program sobriety date. Part 4 of this handbook has more information on how program sobriety dates impact your phase advancement.

You are responsible for knowing what is in the products that you use and ingest. The Court will not accept the following excuses for a positive or dilute drug or alcohol test:

“I didn’t use, I was just around it.”

“I took some medication.”

“I didn’t smoke; it was a shotgun.”

“It must be something in my sports drink.”

“The package said it only contained CBD.”

“I ate a poppy seed muffin.”

“I took an herbal supplement.”

“I drank a lot of water.”

“Someone must have put something in my drink.”

“I didn’t know it was alcohol-based.”

PRESCRIPTION MEDICATION

You must notify and provide copies of any new or existing prescriptions within 72 hours to your treatment provider, UA program provider, and Probation Officer. When you go to the doctor or dentist, make sure to bring the Physician’s Prescription Drug Letter (Appendix D) for your physician to sign, then submit the completed form to the VTC PO no later than your next Court appearance. If you undergo Medication Assisted Treatment (MAT) at any time during your participation in VTC, you must verify to the Court that your provider is a licensed physician. If an emergency room visit is necessary, it is important that you identify yourself as a VTC participant and request non-narcotic, non-alcoholic, and non-addictive medications. It is your responsibility to know what is contained in the medications you consume. You may still be sanctioned for positive drug tests that result from medications that have not been pre-approved by your physician.

You may not take any over the counter medications that contain alcohol, codeine, and ephedrine. It is your responsibility to read labels and be aware of what you consume.

The Court will sanction you if you misuse or abuse any prescribed or over-the-counter medication, deliver medication to others, and/or fail to take medication as prescribed. This type of behavior may ultimately result in termination from the program.

INCENTIVES, SANCTIONS, AND THERAPEUTIC INTERVENTIONS

VTC provides incentives to encourage your progress and recognize successes you have achieved in the VTC program. Incentives may be received for excellent participation, sober holiday time, a new job, college attendance, driver’s license reinstatement, etc. In the first phase of the program, you are expected to show up, be honest, and try your best, and you will receive incentives for those behaviors. The expectations are higher in the later phases, so at that point you will receive incentives for different types of achievements. Examples of incentives are verbal recognition from the Judge, awards, certificates, gift cards, etc.

If you fail to comply with the VTC program rules, you may be sanctioned. Being honest can positively impact or reduce the type of sanction you receive from the Court for a violation such as drug or alcohol use. Even if you have already reported drug or alcohol use or other violations to another VTC team member, you are expected to voluntarily report these violations to the Judge at each Court appearance. Failure to report violations will result in a higher sanction, such as jail. Repeated substance use will result in a sanction that may include jail. Sanctions are progressive and become stiffer for repeat violations. In higher phases, the expectation is that you will not have any sanctions; therefore, the sanctions imposed may be stiffer than for lower phases. **Sanctions are individualized to your situation and should not be compared against sanctions given to other VTC participants.** Examples of sanctions include verbal disapproval from the Judge, increased supervision requirements, written assignments, GPS monitoring, SCRAM monitoring, community service hours, jail, etc. **REMEMBER: BE UPFRONT AND HONEST!**

The Judge can also impose additional therapeutic interventions if additional treatment or support is deemed necessary. A therapeutic intervention might be combined with a sanction for a behavior such as repeated substance use. Examples of therapeutic interventions include skill development activities, higher levels of care, additional treatment referrals, additional community recovery groups, etc.

TREATMENT

Substance use disorder and mental health treatment are provided by the Department of Veterans' Affairs (VA) Veterans' Health Administration. Domestic violence and responsible thinking group interventions are primarily provided by community-based treatment providers. Sober supportive housing is also considered treatment for the purposes of this section. Your assigned treatment agency will coordinate your treatment and may refer you to additional treatment and/or mental health services if needed. After your intake session with the treatment agency, you and your provider will develop a treatment plan, which may include a combination of group counseling, individual counseling, outpatient treatment, and/or inpatient treatment. Your treatment provider will determine your schedule. Each treatment plan is individualized to best meet your needs.

You are expected to attend all scheduled appointments and follow the rules of conduct at the treatment agencies you are connected with. Your attendance and level of participation at counseling sessions will be reported to the VTC team before Court status hearings. Unexcused treatment absences and other rule violations at a treatment agency could result in sanctions.

COMPLAINTS AND GRIEVANCES

If you disagree with a Court Order or have a complaint or grievance about the VTC team or other participants, you should start by talking to the VTC Defense Attorney. The VTC Defense Attorney will discuss your options with you and take your complaint to the VTC team, as appropriate.

ANTI-HARASSMENT POLICY

You must be respectful when communicating with other VTC participants, the Judge, and all other VTC team members. You cannot use threatening language, gestures, or actions against other VTC participants or team members. Violation of this policy will result in strict sanctions from the Judge. Repeat violations may result in termination from the program.

REQUESTS FOR ACCOMMODATIONS

If you have a disability that impedes your ability to successfully participate in all requirements of the VTC program, you can request a reasonable accommodation. You must submit the “Request for Accommodations Form” (Appendix E) and a letter from your physician to the VTC Coordinator. The VTC team will review your request and determine whether the program has the resources and capacity to provide the accommodation. The VTC program is not able to provide an accommodation that would cause undue hardship to the program or other VTC participants.

TERMINATION

Repeated noncompliance, warrants, or new arrests may result in your termination from the VTC program and imposition of a final sentence on your charge(s).

Noncompliance violations which could result in termination include consistently missing drug tests or testing positive, missing treatment or supervision appointments, repeatedly breaking the program rules, and violence or threats of violence directed at members of the public, other participants, treatment staff or other VTC team members. You may be terminated from the program if you are considered a safety risk to the community.

If you are at risk of revocation or termination, you or a team member may request a Road Map Meeting.

This meeting will be an off the record opportunity for you to meet with key team members and discuss your current stance in the program, obligations, and your options moving forward either in the program or not. The goal of a Road Map Meeting is to provide you with clarity on the requirements and commitment to the program and the resources the program has left to provide, as well as what other options may entail.

PART 4:

PROGRAM TRACKS, PHASES, AND GRADUATION

HOW DO THE DIFFERENT TRACKS WORK?

Before entering the program, you must meet with the VTC Probation Officer (PO) to determine your track. There are two tracks: “Alpha Track” and “Bravo Track”. Alpha Track takes a minimum of 15 months to complete, and Bravo Track takes a minimum of 12 months to complete. Once you are assigned to a track, you will stay in that track throughout the program.

Each track has its own phases and requirements, which are described below under the sections titled “Alpha Track Phases and Graduation” and “Bravo Track Phases and Graduation.”

HOW DO PHASES WORK?

The VTC program is made up of different phases. All VTC participants begin in Phase 1. In order to advance to the next phase, you must complete all requirements described below for your current phase. Each phase has different requirements, expectations, and a minimum time requirement. **It is your responsibility to monitor your progress in each phase.** When you have completed all requirements for your phase, you must submit a “Phasing Application” to the VTC Coordinator. Appendix F includes the Phasing Applications for Alpha Track. Appendix G includes the Phasing Applications for Bravo Track. You can also request a copy of the applicable Phasing Application from the VTC Coordinator.

You might spend more than the minimum amount of time required in a phase if it takes you longer to complete all the requirements. You cannot skip phases. If you experience a relapse or other major violation within 30 days of advancing to a new phase, the VTC team may decide to temporarily return you to the previous phase. When that occurs, the team will develop a plan together with you to prepare for a successful transition into the next phase.

HOW DO I GRADUATE?

You complete the program when you have successfully completed all the phases in your track. When you have completed all requirements of the final phase, you must submit a “Graduation Application” to the VTC Coordinator. You are responsible for monitoring your progress in the final phase. Appendix F includes the Graduation Application for Alpha Track. Appendix G includes the Graduation Application for Bravo Track. You can also request a copy of the Graduation Application from the VTC Coordinator. The Judge and/or other VTC team members may have additional instructions that you must follow prior to your graduation.

ALPHA TRACK**PHASE 1: Courage**

Minimum of 90 days

The goal of Phase 1 is for participants to participate in the VTC program by showing up, being honest, following the program rules, and trying their best. In Phase 1, participants set the foundation of stability that will help them succeed in the program.

In Phase 1 participants will:

- ☐ Attend Court every 1st, 2nd, and 3rd Monday of the month at 2:00 pm,
- ☐ Work with their treatment provider(s) to develop a treatment plan,
- ☐ Show up for all appointments,
- ☐ Comply with supervision and meet with the VTC Probation Officer once a week or as instructed,
- ☐ Develop a case plan with the VTC Probation Officer,
- ☐ Re-read the entire VTC Participant Handbook,
- ☐ Develop a housing plan, if applicable, with the VTC Probation Officer or someone else on the VTC team,
- ☐ Receive random monthly home visits from the VTC Probation Officer and/or the Sheriff's Deputy, and
- ☐ Submit to random drug tests as instructed by UA testing program agency, per PO referral

Participants can advance to Phase 2 when:

- ☐ They are in Phase 1 for at least 90 days,
- ☐ They have at least 14 consecutive days from their program sobriety date immediately before they advance to Phase 2,
- ☐ They have at least 14 days without a major violation immediately before they advance to Phase 2,
- ☐ They have developed a case plan with the VTC Probation Officer,
- ☐ They have worked with the VTC Probation Officer or someone else on the VTC team to develop a housing plan, *if applicable*,
- ☐ They have scheduled and/or completed their polygraph, *if required*,
- ☐ They have had an intake appointment with their treatment provider **and** developed a treatment plan,
- ☐ They have engaged in all recommended treatment and have maintained regular attendance,
- ☐ They have identified a primary care physician and scheduled an appointment if it is part of the treatment plan,
- ☐ They have re-read the entire VTC Participant Handbook,
- ☐ They have completed the Alpha Track Application for Phase 2 and scheduled an appointment to review the application with the VTC Coordinator, and
- ☐ The Judge has approved their advancement to Phase 2.

ALPHA TRACK**PHASE 2: Commitment**

Minimum of 90 days

The goal of Phase 2 is to challenge participants to continue developing motivation, insight, and skills to continue in their recovery and avoid criminal behavior.

In Phase 2 participants will:

- ☐ Attend Court every 1st and 3rd Monday of the month at 2:00 pm,
- ☐ Actively participate in treatment and show up for all appointments,
- ☐ Comply with supervision and meet with the VTC Probation Officer bi-monthly or as instructed,
- ☐ Develop a budget and financial plan with the VTC Probation Officer to repay any restitution, Court-ordered financial obligations, and probation fees,
- ☐ Develop a plan with the VTC Probation Officer to complete any Court-ordered Community Service Work and attend the Community Service Orientation, *if applicable*,
- ☐ Be eligible for a non-offensive contact modification, *if applicable*. Level of contact will be determined on a case-by-case basis,
- ☐ Identify two weekly pro-social activities or recovery support groups that they can attend in Phase 3,
- ☐ Receive random monthly home visits from the VTC Probation Officer and/or the Sheriff's Deputy, and
- ☐ Submit to random drug tests as instructed by UA testing program agency, per PO referral.

Participants can advance to Phase 3 when:

- ☐ They are in Phase 2 for at least 90 days,
- ☐ They have at least 30 consecutive days from their program sobriety date immediately before they advance to Phase 3,
- ☐ They have at least 30 days without a major violation immediately before they advance to Phase 3,
- ☐ They have developed a budget and financial plan with the VTC Probation Officer, including a plan to repay any restitution and/or Court-ordered financial obligations,
- ☐ They have developed a written plan (minimum 1 paragraph) with the VTC Probation Officer to complete any Court-ordered Community Service Work and attended the Community Service Orientation, *if applicable*,
- ☐ They have developed a written plan (minimum 1 paragraph) to fulfill the Phase 3 requirement of attending at least two weekly pro-social activities and/or recovery support groups,
- ☐ They have completed the Alpha Track Application for Phase 3 and scheduled an appointment to review the application with the VTC Coordinator, and
- ☐ The Judge has approved their advancement to Phase 3.

ALPHA TRACK**PHASE 3: Integrity**

Minimum of 120 days

The goal of Phase 3 is for participants to concentrate on rebuilding positive social supports and coping skills.

In Phase 3 participants will:

- ☐ Attend Court on the 1st and 3rd Mondays of the month at 2:00 pm,
 - 3rd Monday can be a virtual appearance (video required) if the participant has been sanction-free since their last appearance,
- ☐ Actively participate in treatment and show up for all appointments,
- ☐ Comply with supervision and meet with the VTC Probation Officer once a month or as instructed,
- ☐ Attend at least two weekly pro-social activities and/or recovery support groups,
- ☐ Implement their financial plan to work on repaying any restitution and/or Court-ordered financial obligations,
- ☐ Implement their plan to complete any Court-ordered Community Service Work,
- ☐ Receive random home visits from the VTC Probation Officer and/or the Sheriff's Deputy, and
- ☐ Submit to random drug tests as instructed by UA testing program agency, per PO referral.

Participants can advance to Phase 4 when:

- ☐ They are in Phase 3 for at least 120 days,
- ☐ They have at least 45 consecutive days from their program sobriety date immediately before they advance to Phase 4,
- ☐ They have at least 45 days without a major violation immediately before they advance to Phase 4,
- ☐ They have begun making payments toward any restitution and/or Court-ordered financial obligations in accordance with their financial plan, *if applicable*,
- ☐ They have completed at least 8 hours of any Court-ordered Community Service Work, *if applicable*,
- ☐ They have written at least two paragraphs about (1) how they fulfilled the requirement of attending two weekly pro-social activities and/or recovery support groups, and (2) how they plan to fulfill this requirement in Phase 4,
- ☐ They have completed their narrative assignment and are prepared to present it at the next court hearing.
- ☐ They have completed the Alpha Track Application for Phase 4 and scheduled an appointment to review the application with the VTC Coordinator, and
- ☐ The Judge has approved their advancement to Phase 4.

ALPHA TRACK**PHASE 4: Devotion**

Minimum of 90 days

The goal of Phase 4 is for participants to develop meaningful change by practicing the skills they have learned.

In Phase 4 participants will:

- ☐ Attend Court on the 1st Monday of the month at 2:00 pm, and as directed by the VTC Judge,
- ☐ Actively participate in treatment and show up for all appointments,
- ☐ Comply with supervision and meet with the VTC Probation Officer once a month or as instructed,
- ☐ Attend at least two weekly pro-social activities and/or recovery support groups,
- ☐ Continue their financial plan to work on repaying any restitution and/or Court-ordered financial obligations,
- ☐ Continue their plan to complete any Court-ordered Community Service Work, *if applicable*,
- ☐ Work with a VTC team member to identify their vocational, employment, or educational goals,
- ☐ Receive random home visits from the VTC Probation Officer and/or the Sheriff's Deputy, and
- ☐ Submit to random drug tests as instructed by UA testing program agency, per PO referral.

Participants can advance to Phase 5 when:

- ☐ They are in Phase 4 for at least 90 days,
- ☐ They have at least 60 consecutive days from their program sobriety date immediately before they advance to Phase 5,
- ☐ They have at least 60 days without a major violation immediately before they advance to Phase 5,
- ☐ They have written at least two paragraphs about (1) how they fulfilled the requirement of attending two weekly pro-social activities and/or recovery support groups, and (2) how they plan to fulfill this requirement in Phase 5,
- ☐ They have written at least one paragraph identifying their vocational, employment, or educational goals with a plan to achieve those goals,
- ☐ They have completed the Alpha Track Application for Phase 5 and scheduled an appointment to review the application with the VTC Coordinator, and
- ☐ The Judge has approved their advancement to Phase 5.

ALPHA TRACK**PHASE 5: Honor**

Minimum of 60 days

The goal of Phase 5 is to complete a participant's transition into an honest, law-abiding, and healthy member of the community. The final phase is designed for minimal court intervention so that participants can become accustomed to maintaining sobriety and law-abiding behavior without the accountability of regular court appearances.

In Phase 5 participants will:

- ☐ Attend Court on the 1st Monday of the month at 2:00 pm, and as directed by the VTC Judge,
- ☐ Actively participate in treatment and show up for all appointments,
- ☐ Comply with supervision and meet with the VTC Probation Officer as instructed,
- ☐ Attend at least two weekly pro-social activities and/or recovery support groups,
- ☐ Repay all remaining restitution and/or Court-ordered financial obligations,
- ☐ Complete all remaining Court-ordered Community Service Work, if applicable,
- ☐ Develop an aftercare, relapse prevention, and wellness plan with the VTC treatment provider or a VTC team member,
- ☐ Receive random home visits from the VTC Probation Officer and/or the Sheriff's Deputy, and
- ☐ Submit to random drug tests as instructed by UA testing program agency, per PO referral.

Participants can graduate from VTC when:

- ☐ They are in Phase 5 for at least 60 days,
- ☐ They have at least 60 consecutive days from their program sobriety date immediately before they graduate,
- ☐ They have at least 60 days without a major violation immediately before they graduate,
- ☐ They have repaid all remaining balances to Court Accounting and the Probation Department,
- ☐ They have successfully completed any Court-ordered Community Service Work, *if applicable*,
- ☐ They have written an aftercare, relapse prevention, and wellness plan (minimum 3 paragraphs),
- ☐ They have completed the Alpha Track Graduation Application and scheduled an appointment to review the application with the VTC Coordinator,
- ☐ They have scheduled an exit interview with the VTC Coordinator, and
- ☐ The Judge has approved their graduation.

BRAVO TRACK

PHASE 1: Courage

Minimum of 90 days

The goal of Phase 1 is for participants to participate in the VTC program by showing up, being honest, following the program rules, and trying their best. In Phase 1, participants set the foundation of stability that will help them succeed in the program.

In Phase 1 participants will:

- ☐ Attend Court every 1st and 3rd Monday of the month at 2:00 pm,
- ☐ Work with their treatment provider to develop a treatment plan,
- ☐ Enroll and engage in UA testing program throughout entire VTC program, per PO referral
- ☐ Show up for all their appointments,
- ☐ Comply with supervision and meet with the VTC Probation Officer once a week or as instructed,
- ☐ Develop a case plan with the VTC Probation Officer,
- ☐ Re-read the entire VTC Participant Handbook,
- ☐ Develop a housing plan, if applicable, with the VTC Probation Officer or someone else on the VTC team,
- ☐ Receive random monthly home visits from the VTC Probation Officer and/or the Sheriff's Deputy, and
- ☐ Submit to random drug tests as instructed by UA testing program agency, per PO referral.

Participants can advance to Phase 2 when:

- ☐ They are in Phase 1 for at least 90 days,
- ☐ They have at least 14 consecutive days from their program sobriety date immediately before they advance to Phase 2,
- ☐ They have at least 14 days without a major violation immediately before they advance to Phase 2,
- ☐ They have developed a case plan with the VTC Probation Officer,
- ☐ They have scheduled and/or completed their polygraph, if required,
- ☐ They have worked with the VTC Probation Officer or someone else on the VTC team to develop a housing plan, if applicable,
- ☐ They have had an intake appointment with the VTC treatment provider **and** developed a treatment plan,
- ☐ They have engaged in all recommended treatment and have maintained regular attendance,
- ☐ They have identified a primary care physician and scheduled an appointment if it is part of their treatment plan,
- ☐ They have re-read the entire VTC Participant Handbook,
- ☐ They have completed the Bravo Track Application for Phase 2 and scheduled an appointment to review the application with the VTC Coordinator, and
- ☐ The Judge has approved their advancement to Phase 2.

BRAVO TRACK**PHASE 2: Commitment**

Minimum of 90 days

The goal of Phase 2 is for participants to challenge themselves to continue developing motivation, insight, and skills to continue in their recovery and avoid criminal behavior.

In Phase 2 participants will:

- ☐ Attend Court every 1st and 3rd Monday of the month at 2:00 pm,
 - The final appearance for Phase 2 can be virtual (video required),
- ☐ Actively participate in treatment and show up for all appointments,
- ☐ Comply with supervision and meet with the VTC Probation Officer bi-monthly or as instructed,
- ☐ Develop a budget and financial plan with the VTC Probation Officer to repay any restitution and/or Court-ordered financial obligations,
- ☐ Develop a plan with the VTC Probation Officer to complete any Court-ordered Community Service Work and attend the Community Service Orientation, *if applicable*,
- ☐ Be eligible for a non-offensive contact modification, *if applicable*. Level of contact will be determined on a case-by-case basis,
- ☐ Identify two weekly pro-social activities or recovery support groups that they can attend in Phase 3,
- ☐ Receive random monthly home visits from the VTC Probation Officer and/or the Sheriff's Deputy, and
- ☐ Submit to random drug tests as instructed by UA testing program agency, per PO referral.

Participants can advance to Phase 3 when:

- ☐ They are in Phase 2 for at least 90 days,
- ☐ They have at least 30 consecutive days from their program sobriety date immediately before they advance to Phase 3,
- ☐ They have at least 30 days without a major violation immediately before they advance to Phase 3,
- ☐ They have developed a budget and financial plan with the VTC Probation Officer, including a plan to repay any restitution and/or Court-ordered financial obligations,
- ☐ They have developed a plan with the VTC Probation Officer to complete any Court-ordered Community Service Work and attended the Community Service Orientation, *if applicable*,
- ☐ They have developed a written plan (minimum 1 paragraph) to fulfill the Phase 3 requirement of attending at least two weekly pro-social activities and/or recovery support groups,
- ☐ They have completed the Bravo Track Application for Phase 3 and scheduled an appointment to review the application with the VTC Coordinator, and
- ☐ The Judge has approved their advancement to Phase 3.

BRAVO TRACK**PHASE 3: Integrity**

Minimum of 120 days

The goal of Phase 3 is for participants to develop meaningful change by rebuilding their positive social supports and practicing the skills they have learned.

In Phase 3 participants will:

- ☐ Attend Court on the 3rd Monday of the month at 2:00 pm, and as directed by the Judge,
- ☐ Actively participate in treatment and show up for all appointments,
- ☐ Comply with supervision and meet with the VTC Probation Officer once a month or as instructed,
- ☐ Attend at least two weekly pro-social activities and/or recovery support groups,
- ☐ Work with a VTC team member to identify their vocational, employment, or educational goals,
- ☐ Implement their financial plan to work on repaying any restitution and/or Court-ordered financial obligations,
- ☐ Implement their plan to complete any Court-ordered Community Service Work, *if applicable*,
- ☐ Receive random home visits from the VTC Probation Officer and/or the Sheriff's Deputy, and
- ☐ Submit to random drug tests as instructed by UA testing program agency, per PO referral.

Participants can advance to Phase 4 when:

- ☐ They are in Phase 3 for at least 120 days,
- ☐ They have at least 60 consecutive days from their program sobriety date immediately before they advance to Phase 4,
- ☐ They have at least 60 days without a major violation immediately before they advance to Phase 4,
- ☐ They have begun making payments toward any restitution and/or Court-ordered financial obligations in accordance with their financial plan budget, *if applicable*,
- ☐ They have completed at least 8 hours of any Court-ordered Community Service Work,
- ☐ They have written at least two paragraphs about (1) how they fulfilled the requirement of attending two weekly pro-social activities and/or recovery support groups, and (2) how they plan to fulfill this requirement in Phase 4,
- ☐ They have written at least one paragraph identifying their vocational, employment, or educational goals with a plan to achieve those goals,
- ☐ They have completed their narrative assignment and are prepared to present it at the next court hearing,
- ☐ They have completed the Bravo Track Application for Phase 4 and scheduled an appointment to review the application with the VTC Coordinator, and
- ☐ The Judge has approved their advancement to Phase 4.

BRAVO TRACK**PHASE 4: Honor**

Minimum of 60 days

The goal of Phase 4 is to complete a participant's transition into an honest, law-abiding, and healthy member of the community. The final phase is designed for minimal court intervention so that participants can become accustomed to maintaining sobriety and law-abiding behavior without the accountability of regular court appearances.

In Phase 4 participants will:

- ☐ Attend Court on the 3rd Monday of the month at 2:00 pm, and as directed by the Judge,
- ☐ Actively participate in treatment and show up for all appointments,
- ☐ Comply with supervision and meet with the VTC Probation Officer as instructed,
- ☐ Attend at least two weekly pro-social activities and/or recovery support groups,
- ☐ Repay all remaining restitution and/or court-ordered financial obligations,
- ☐ Complete all remaining Court-ordered Community Service Work, *if applicable*,
- ☐ Develop an aftercare, relapse prevention, and wellness plan with their treatment provider or a VTC team member,
- ☐ Receive random home visits from the VTC Probation Officer and/or the Sheriff's Deputy, and
- ☐ Submit to random drug tests as instructed by UA testing program agency, per PO referral.

Participants can graduate from VTC when:

- ☐ They are in Phase 4 for at least 60 days,
- ☐ They have at least 60 consecutive days from their program sobriety date immediately before they graduate,
- ☐ They have at least 60 days without a major violation immediately before they graduate,
- ☐ They have repaid all remaining balances to Court Accounting and the Probation Department,
- ☐ They have successfully completed any Court-ordered Community Service Work, *if applicable*,
- ☐ They have written an aftercare, relapse prevention, and wellness plan (minimum 3 paragraphs),
- ☐ They have completed the Bravo Track Graduation Application and scheduled an appointment to review the application with the VTC Coordinator,
- ☐ They have scheduled an exit interview with the VTC Coordinator, and
- ☐ The Judge has approved their graduation.

CONTRACTUAL AGREEMENT: RECEIPT AND REVIEW OF PARTICIPANT HANDBOOK

Name: _____

Case No.: _____

I, _____, acknowledge the receipt of the Washington County Veterans Treatment Court Participant Handbook. By my signature below, I attest that I have been provided with a copy of the Participant Handbook, that I have reviewed it, and that I understand the guidelines of participation in the Veterans Treatment Court program. I understand that a copy of this signed contractual agreement will be stored in my file. Furthermore, I acknowledge that I have been made aware of the Veterans Treatment Court program rules and my responsibilities.

Participant Signature

Date

APPENDICES

- A. VTC Consent Form**
- B. VA Release of Information Form (VA Form 10-5345)**
- C. Financial Request Form**
- D. Physician's Prescription Drug Letter**
- E. Request for Accommodations Form**
- F. Alpha Track Phasing and Graduation Applications**
- G. Bravo Track Phasing and Graduation Applications**



WASHINGTON COUNTY VETERANS TREATMENT COURT

CONSENT FOR THE RELEASE OF CONFIDENTIAL INFORMATION

By signing this form, I, (), or my authorized representative, consent to and authorize the Washington County Veterans Treatment Court ("Program") and the following individuals and entities listed below to disclose my information and communicate with one another regarding my eligibility and/or acceptability for the Program, to monitor my progress in and compliance with substance abuse and/or mental health treatment services, and to monitor my compliance with Program requirements and directives. This includes sharing with each other my assessment results, diagnostic conclusions, prescribed medications, unprescribed substance use, screening results, referrals to treatment and other services, treatment attendance records, progress in treatment, compliance with treatment, and compliance with Program requirements and directives. My information may also be disclosed in connection with an audit or evaluation of the performance of the Program and to determine whether the Program is following best practices such as the Oregon Specialty Court Standards.

I understand that my alcohol, drug, and/or mental health treatment records are protected under applicable state and federal law and regulations including, without limitation, ORS 3.450, the federal regulations governing Confidentiality of Alcohol and Drug Abuse Patient Records, 42 C.F.R. Part 2, the Health Insurance Portability and Accountability Act of 1996 (HIPAA), and 45 C.F.R. Parts 160 & 164.

This disclosure is not intended to apply to confidential legal communications I have with my lawyer, or with the defense counsel named below. I verify that I have read and understand this (initial here) _____.

- ☐ Washington County Circuit Court
- ☐ Program Coordinator
- ☐ Veteran Mentor Coordinator
- ☐ Department of Veterans Affairs, Portland VA Healthcare System
- ☐ Harris Velázquez Gibbens, Attorneys at Law
- ☐ Washington County District Attorney's Office
- ☐ Washington County Community Corrections Department
- ☐ Washington County Sheriff's Office
- ☐ Washington County Aging, Disability and Veteran Services
- ☐ Solutions Group NW
- ☐ Cedar Counseling
- ☐ LCN Wellness

I understand that I have no legal right to participate in the Program and that this consent is required in order to participate in this Program. This consent form is used to obtain information to assess my compliance and progress toward achieving the Program's objectives. The Program is separate from treatment programs and other services I may receive while in the Program.

I understand that my treatment provider may not condition treatment, payment, enrollment, or eligibility for the treatment provider's benefits on the provision of this consent.

If I sign this consent my information will be disclosed to the people or programs listed on this form. The information disclosed to an entity covered under the HIPAA Privacy Rules may only be redisclosed with my written authorization or under other provisions of the HIPAA Privacy Rules. Information disclosed pursuant to this authorization may no longer be protected by the HIPAA Privacy Rules if it is disclosed to people or programs that are not subject to the HIPAA Privacy Rules. For example, the judge and attorneys who receive the information are not subject to the HIPAA Privacy Rules. However, the other federal regulations that protect my information will continue to apply. If my information is disclosed to a person or entity not covered by the HIPAA Privacy Rules, that person or entity may only redisclose my records with my written authorization or under other provisions of the federal regulations.

Identifying information including treatment status and compliance with Program requirements may be disclosed in the normal course of court proceedings open to the public and recorded in court data information systems available to the public, and I hereby authorize such disclosure. I understand that it is possible that an observer could make the connection between specialty court participation and substance abuse and/or mental health treatment. I understand that information disclosed during court proceedings will no longer be protected by the HIPAA Privacy Rules.

I understand that my treatment records and other treatment related information cannot be used to investigate, initiate, substantiate criminal charges against me. However, federal laws and regulations do not protect information related to the commission of a crime, or any threat to commit a crime, while on Program premises or against Program personnel. Additionally, federal laws and regulations do not protect information related to suspected child abuse or neglect from being reported under state law to appropriate state or local authorities.

I understand that I may revoke this consent at any time. I understand that this consent agreement is a condition of the Program and if I revoke my consent I will be terminated from the Program. Revoking my consent will not affect any information that was previously disclosed.

This consent will expire upon my completion of, or separation from, the Program, or upon the determination that I am not entering the Program.

Any violation of federal law and regulations is a crime and suspected violations may be reported to the U.S. Attorney for Oregon (see <https://www.justice.gov/usao-or/our-locations>) or the Substance Abuse and Mental Health Services Administration (SAMHSA)(see <https://www.samhsa.gov/about-us/contact-us>).

You may sign this Consent using either: (i) an original signature on a printed document; or (ii) an electronic signature. If using an electronic signature, you may electronically sign either by typing "s/" followed by your name (example: s/ John Doe) or by using electronic signature software that includes a Security Procedure (defined in ORS 84.004) designed to verify your electronic signature.

I have read and understand the contents of this consent. I fully understand my rights and I am signing this consent voluntarily. I understand that, by signing this consent form, I am authorizing disclosure of my protected health information, as outlined above, to the persons and/or entities listed on this form. I further understand that this consent will be in effect for the duration of time I am in the Program, or until the determination that I am not entering the Program. I am not under the influence of drugs or alcohol.

Printed Name: _____

Signature: _____

Date: _____

Witness Name: _____

Position: _____

Witness Signature: _____

Date: _____

(rev. 2/26/2024)

APPENDIX B

Department of Veterans Affairs		REQUEST FOR AND AUTHORIZATION TO RELEASE HEALTH INFORMATION
PRIVACY ACT AND PAPER WORK REDUCTION ACT INFORMATION: The Paperwork Reduction Act of 1995 requires us to notify you that this information collection is in accordance with the clearance requirements of section 3507 of the Act. We may not conduct or sponsor, and you are not required to respond to, a collection of information unless it displays a valid OMB number. We anticipate that the time expended by all individuals who must complete this form will average 2 minutes. This includes the time it will take to read the instructions, gather the necessary facts and fill out this form. The execution of this form does not authorize the release of information other than that specifically described below. The information requested on this form is solicited under Title 38 U.S.C. The form authorizes release of information in accordance with the Health Insurance Portability and Accountability Act, 45 CFR Parts 160 and 164; 5 U.S.C. 552a; and 38 U.S.C. 5701 and 7332 that you specify. Your disclosure of the information requested on this form is voluntary. However, if the information including the last four of your Social Security Number (SSN) and Date of Birth (used to locate records for release) is not furnished completely and accurately, VA will be unable to comply with the request. The Veterans Health Administration may not condition treatment, payment, enrollment or eligibility on signing the authorization. VA may disclose the information that you put on the form as permitted by law. VA may make a "routine use" disclosure of the information as outlined in the Privacy Act system of records notices identified as 24VA10P2 "Patient Medical Record - VA", 08VA05 "Employee Medical File System Records (Title 38)-VA" and in accordance with the Notice of Privacy Practices. VA may also use this information to identify veterans and person claiming or receiving VA benefits and their records, and for other purposes authorized or required by law.		
TO: DEPARTMENT OF VETERANS AFFAIRS (Name and address of VA health care facility): VA Portland Health Care System 3710 SW US Veterans Hospital Road Portland, OR 97329		
LAST NAME-FIRST NAME-MIDDLE INITIAL	LAST 4 SSN	DATE OF BIRTH
NAME AND ADDRESS OF ORGANIZATION, INDIVIDUAL, OR TITLE OF INDIVIDUAL TO WHOM INFORMATION IS TO BE RELEASED Washington County Veterans Court Team (Court Coordinator, Judge, prosecutor, defense attorney, probation/community corrections, Washington County Sheriff, and Washington County Veteran Service Officer)		
PURPOSE(S) OR NEED: Information is to be used by the organization or individual for ☐ Treatment ☐ Benefits ☐ Legal ☐ Employment ☐ Other – Please specify: _____ _____		
INFORMATION REQUESTED: Check applicable box(es) and state the extent or nature of information to be provided: ☐ Health Summary (prior 2 years) ☐ Inpatient Discharge Summary (dates): _____ ☐ Progress Notes: ☐ Specific clinics (name & date range): _____ ☐ Specific providers (name & date range): _____ ☐ Date range: _____ ☐ Operative/Clinical Procedures (name & date): _____ ☐ Lab results: ☐ Specific tests (name & date): _____ ☐ Date range: _____ ☐ Radiology Reports (name & date): _____ ☐ List of Active Medications ☐ Flu Vaccination (dose, lot number, date & location) ☒ Other (describe below): Verbal and written communication about treatment need, history, and adherence. This includes, treatment/appointment attendance, medications, UA and other testing results, program status, diagnoses, and treatment plan. _____		

LAST NAME-FIRST NAME-MIDDLE INITIAL		LAST 4 SSN	DATE OF BIRTH
SENSITIVE DIAGNOSES: REVIEW AND, IF APPROPRIATE, COMPLETE WHEN RELEASE IS FOR ANY PURPOSE OTHER THAN TREATMENT. I request and authorize the Department of Veterans Affairs to release the information pertaining to the condition(s) below for the non-treatment purpose(s) listed in this authorization: ☐ Drug Abuse ☐ Alcoholism or Alcohol Abuse ☐ Sickle Cell Anemia ☐ Human Immunodeficiency Virus (HIV) I understand that information on these sensitive diagnoses may be released for treatment purposes without me checking the above boxes, and will be released even if the boxes are unchecked <u>unless</u> I indicate by checking the box below that I do not want this information released for this specific disclosure. ☐ I do not want sensitive diagnoses released for treatment purposes under this specific authorization. I realize this does not impact other future requests unrelated to this authorization.			
AUTHORIZATION: I certify that this request has been made freely, voluntarily and without coercion, or because a condition of VA employment mandates the signing of this authorization. The information given above is accurate and complete to the best of my knowledge. I understand that I will receive a copy of this form after I sign it. I may revoke this authorization in writing, at any time except to the extent that action has already been taken to comply with it. Written revocation is effective upon receipt by the Release of Information Unit at the facility housing records. Any information disclosed per this authorization may no longer be protected by Federal confidentiality laws or regulations and may be subject to re-disclosure by the recipient. I understand that the VA health care provider's opinions and statements are not official VA decisions regarding whether I will receive other VA benefits or, if I receive VA benefits, their amount. They may, however, be considered with other evidence when these decisions are made at a VA Regional Office that specializes in benefit decisions.			
EXPIRATION: Without my express revocation, the authorization will automatically expire ☐ After one-time disclosure, if all needs are satisfied ☐ On _____ (enter a future date other than date signed by patient) ☐ Under the following condition(s): Resolution of legal charges or 3 years.			
PATIENT SIGNATURE		DATE (mm/dd/yyyy)	
LEGAL REPRESENTATIVE SIGNATURE (if applicable)		DATE (mm/dd/yyyy)	
PRINT NAME OF LEGAL REPRESENTATIVE	RELATIONSHIP TO PATIENT		
FOR VA USE ONLY			
Type and Extent of Material Released:			
Date Released:		Released by:	

APPENDIX C

WASHINGTON COUNTY VETERANS TREATMENT COURT (VTC)

FINANCIAL REQUEST FORM

Please complete this form in its entirety, except for the section labeled "For Official Use Only." The VTC team will review your request and make a determination with consideration to the following non-exclusive factors: (1) the amount of the request, (2), the nature of the request, (3) the amount of available funding, (4) whether all other available community resources have been exhausted, and (5) the urgency of the need.

REQUESTER NAME: **TODAY'S DATE:**

RECIPIENT NAME (OR N/A): **DEADLINE (OR N/A):**

DESCRIPTION OF REQUESTED ITEM/EXPENSE:

PURPOSE FOR REQUESTED ITEM/EXPENSE:

ESTIMATED COST: \$

MARK ONE: Y **ONE-TIME COST** or Y **RECURRING EXPENSE**

IF RECURRING EXPENSE, PLEASE EXPLAIN (OTHERWISE N/A):

Please return this completed form to the VTC Coordinator, Julie East.

Phone: (503) 846-8626

Email: Julianne_east@washingtoncountyor.gov

Fax: (503) 846-8612

Mail: 150 N. 1st Ave., Suite 300, MS 40, Hillsboro, OR 97124

FOR OFFICIAL USE ONLY

VTC Staff: Upon the VTC team's final determination, one team member must complete this box in its entirety. Retain a copy of this completed form for program records and return the completed form to the original requester.

DATE OF RECEIPT:

DATE OF DETERMINATION:

DETERMINATION (MARK ONE): Y **FULL APPROVAL** or Y **PARTIAL APPROVAL** or Y **DENY**

EXPLANATION FOR DETERMINATION:

NAME OF STAFF MEMBER COMPLETING THIS PORTION:

APPENDIX D

PHYSICIAN'S PRESCRIPTION DRUG LETTER

WASHINGTON COUNTY VETERANS TREATMENT COURT (VTC)

150 N. 1ST AVE.

SUITE 300, MS 40

HILLSBORO, OR 97124

Ph: (503) 846-8626

To Prescribing Physician / Psychiatrist / Dentist / Urgent Care / Other Health Care Prescriber:

Please note that your patient or prospective patient is a participant in the Washington County Veterans Treatment Court (VTC) program. If a VTC participant is prescribed any potentially addictive medication, we require that they have an honest discussion of their substance use/addiction history with you. We leave it to your discretion to either prescribe the potentially addictive medication or consider alternative non-narcotic options. Your patient is required to provide a verified list of prescribed medications to the VTC team. Please complete and sign this form and return it to your patient. If you have any questions, please contact Julie East, VTC Coordinator, at (503) 846-8626 or Julianne_east@washingtoncountyor.gov

Print Name of Participant:

Name of facility: _____ Date: _____ Time seen: _____ Time out: _____

Reason for visit: _____

Please attach a list of medication(s) used and/or prescribed today during this visit or complete the section below.

Name of Rx: _____ Quantity: _____ Dosage: _____ Refill: _____ Other: _____

Name of Rx: _____ Quantity: _____ Dosage: _____ Refill: _____ Other: _____

Name of Rx: _____ Quantity: _____ Dosage: _____ Refill: _____ Other: _____

Other general comments: _____

Prescriber to initial here _____ if the patient has disclosed to you any pertinent information, i.e. pregnancy, if they are on Medically Assisted Treatment (MAT), or if the patient has informed you of any other medications that will affect what you are prescribing today. What was disclosed?: _____

Prescriber Signature_____
Date_____
Participant Signature_____
Date

REQUEST FOR ACCOMMODATIONS FORM

WASHINGTON COUNTY VETERANS TREATMENT COURT (VTC)

150 N. 1ST AVE.
SUITE 300, MS 40
HILLSBORO, OR 97124
Ph: (503) 846-8626

PARTICIPANT NAME: _____

NATURE/TYPE OF DISABILITY: _____

REQUESTED/SUGGESTED ACCOMMODATION (Please describe the accommodation(s) that would enable you to fully participate in the requirements of the VTC program): _____

PHYSICIAN NAME: _____ **PHYSICIAN PHONE NUMBER:** _____

☐ Please attach a letter from your physician which confirms that the disability listed above prevents you from fully participating in the requirements of the VTC program.

I authorize the release of necessary information regarding my disability/disabilities to be shared with all members of the Washington County Veterans Treatment Court (VTC) team. I understand that the VTC team will review my Request for Accommodations to determine if the VTC program can reasonably provide the requested accommodation without undue hardship to the program.

Participant Signature

Date

Please return this completed form and physician's letter to the VTC Coordinator, Julie East.

Phone: (503) 846-8626

Email: Julianne_east@washingtoncountyor.gov

ALPHA TRACK: Application for Phase 2

It is your responsibility to monitor your own phase advancement and complete the appropriate phasing application when you have met all criteria for your current phase. Please contact the Veterans Treatment Court (VTC) Coordinator to schedule a time to review your completed application. After the VTC Coordinator has signed-off on your application, the rest of the VTC team will review the application. The VTC Judge will make the final determination about your phase advancement.

Name: _____ Current Address: _____

Phone: _____

Email: _____

You MUST meet the following criteria to advance to Phase 2: (place an "X" if task is completed)

- You have been in Phase 1 for a minimum of 90 days. **Date of program entrance:** _____
- You currently have a minimum of 14 days from your program sobriety date. **Program sobriety date:** _____
- You have not committed a major violation for a minimum of 14 days. (Confirm with VTC Coordinator.)
- You have identified a primary care physician, *if required*. Date of appointment: _____
- You are complying with treatment and maintaining regular attendance.
 - **Counselor/Case Manager/VA Veteran Justice Outreach Specialist verification:**
 - *Signature:* _____ *Title:* _____ *Date:* _____
- You are complying with supervision.
- You have scheduled and/or completed your polygraph, *if required*. Date of appointment: _____
Probation Officer verification: *Signature:* _____ *Date:* _____

➤ Identify 3 challenges you overcame in Phase 1:

1. _____
2. _____
3. _____

➤ Explain why you are ready for Phase 2- "Commitment":

Participant Signature _____ Date _____		VTC Coordinator Signature _____ Date _____	
Judge Signature _____ Date _____		Additional Staff Remarks _____	

ALPHA TRACK: Application for Phase 3

It is your responsibility to monitor your own phase advancement and complete the appropriate phasing application when you have met all criteria for your current phase. Please contact the Veterans Treatment Court (VTC) Coordinator to schedule a time to review your completed application. After the VTC Coordinator has signed-off on your application, the rest of the VTC team will review the application. The VTC Judge will make the final determination about your phase advancement.

Name: _____ **Current Address:** _____

Phone: _____

Email: _____

You MUST meet the following criteria to advance to Phase 3: (place an "X" if task is completed)

- You have been in Phase 2 for a minimum of 90 days. **Date entered Phase 2:** _____
- You currently have a minimum of 30 days from your program sobriety date. **Program sobriety date:** _____
- You have not committed a major violation for a minimum of 30 days. (Confirm with VTC Coordinator.)
- You are compliant and engaged with treatment and maintaining regular attendance.
 - **Counselor/Case Manager/VA Veteran Justice Outreach Specialist verification:**
 - *Signature:* _____ *Title:* _____ *Date:* _____
- You are complying with supervision.
 - **Probation Officer verification:** *Signature:* _____ *Date:* _____
- You have created a budget and financial plan, including a plan to repay any restitution and/or Court-ordered financial obligations. Please attach a copy of your financial plan to this application.
- You have developed a plan with your Probation Officer to complete any Court-ordered Community Service Work and attended the Community Service Orientation, ***if applicable***. Please attach a copy of your written plan (min. 1 paragraph).
- You have developed a plan to fulfill the Phase 3 requirement of attending a min. of 2 weekly pro-social activities and/or recovery support groups. Please attach a copy of your written plan (min. 1 paragraph).
 - Identify 3 challenges you overcame in Phase 2:
 1. _____
 2. _____
 3. _____
 - Explain why you are ready for Phase 3- "Integrity":

Participant Signature Date	VTC Coordinator Signature Date
Judge Signature Date	Additional Staff Remarks

ALPHA TRACK: Application for Phase 4

It is your responsibility to monitor your own phase advancement and complete the appropriate phasing application when you have met all criteria for your current phase. Please contact the Veterans Treatment Court (VTC) Coordinator to schedule a time to review your completed application. After the VTC Coordinator has signed-off on your application, the rest of the VTC team will review the application. The VTC Judge will make the final determination about your phase advancement.

Name: _____ Current Address: _____

Phone: _____

Email: _____

You MUST meet the following criteria to advance to Phase 4: (place an "X" if task is completed)

- ☐ You have been in Phase 3 for a minimum of 120 days. **Date entered Phase 3:** _____
 - ☐ You currently have a minimum of 45 days from your program sobriety date. **Program sobriety date:** _____
 - ☐ You have not committed a major violation for a minimum of 45 days. (Confirm with VTC Coordinator.)
 - ☐ You are compliant and engaged with treatment and maintaining regular attendance.
Counselor/Case Manager/VA Veteran Justice Outreach Specialist verification:
 Signature: _____ Title: _____ Date: _____
 - ☐ You are complying with supervision.
Probation Officer verification: Signature: _____ Date: _____
 - ☐ You have been implementing your budget and financial plan. Please attach proof that you have made payments toward any restitution and/or Court-ordered financial obligations, **if applicable**.
 - ☐ You have completed at least 8 hours of any Court-ordered Community Service Work, **if applicable**. Please attach proof that you have completed these hours.
 - ☐ **You have completed your narrative assignment and are prepared to present it at your next court hearing.**
 - ☐ You have been attending a min. of 2 weekly pro-social activities and/or recovery support groups. **Please attach a written explanation of how you met this requirement in Phase 3 (min. 1 paragraph). Also, explain your plan to meet this requirement in Phase 4 (min. 1 paragraph).**
- Identify 3 challenges you overcame in Phase 3:
1. _____
 2. _____
 3. _____
- Explain why you are ready for Phase 4- "Devotion":
- _____

Participant Signature Date

VTC Coordinator Signature Date

Judge Signature Date

Additional Staff Remarks



WASHINGTON COUNTY VETERANS TREATMENT COURT

District Attorney's Office

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www.WashingtonCountyDA.org/VTC

Application for Phase IV: VTC Narrative Assignment

This assignment is meant to serve as a template for you to share your stay with the team and participants at your phase promotion court hearing. Use the below bullet points as guides.

- *Write in whatever way works for you: bullet points, short phrases, or sentences are all okay.*
 - *Don't be afraid to get personal. Being vulnerable is difficult, but it's okay to share the honest truth about your life before, during, and after active recovery.*
 - *Do not worry about getting lost in the details.*
 - *If your family played a role in getting you into the VTC, make sure to share that. Repairing damaged relationships can be a hard path to walk, so sharing your experience may help encourage someone else to make amends with their loved ones, too.*
 - *Don't skip over any relapses. Sharing what you learned from these experiences can be therapeutic to you and valuable to others on a similar journey. Don't skip over any accomplishments, let us celebrate your wins!*
 - *Be truthful about what life is like now. We know it isn't always flowers and sunshine. It may not always be the life you envisioned for yourself. You do not have life about being happy all the time or having everything figured out. Being truthful may help others who are also struggling to be able to re-define their new reality.*
1. Introduce Yourself. What's your name, where're you from, which military branch did you serve in and when?
 2. In a few sentences or bullet points, please describe your life prior to entering the VTC court program:
 3. In a few sentences or bullet points, please describe what brought you into the VTC program:
 4. In a few sentences or bullet points, please describe what Phase I was like for you:



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5. In a few sentences or bullet points, please describe what Phase II was like for you:

6. In a few sentences or bullet points, please describe what Phase III was like for you:

7. What have been your biggest barriers or struggles so far in the program?

8. What are some things that you are proud of that you have accomplished so far?

9. What are you hoping to accomplish during the rest of the program?

10. If you could give your Phase I self or a new participant in the program some advice, what would you say?

ALPHA TRACK: Application for Phase 5

It is your responsibility to monitor your own phase advancement and complete the appropriate phasing application when you have met all criteria for your current phase. Please contact the Veterans Treatment Court (VTC) Coordinator to schedule a time to review your completed application. After the VTC Coordinator has signed-off on your application, the rest of the VTC team will review the application. The VTC Judge will make the final determination about your phase advancement.

Name: _____ **Current Address:** _____

Phone: _____

Email: _____

You MUST meet the following criteria to advance to Phase 5: (place an "X" if task is completed)

- You have been in Phase 4 for a minimum of 90 days. **Date entered Phase 4:** _____
- You currently have a minimum of 60 days from your program sobriety date. **Program sobriety date:** _____
- You have not committed a major violation for a minimum of 60 days. (Confirm with VTC Coordinator.)
- You are compliant and engaged with treatment and maintaining regular attendance.
 - **Counselor/Case Manager/VA Veteran Justice Outreach Specialist verification:**
 - **Signature:** _____ **Title:** _____ **Date:** _____
- You are complying with supervision.
 - **Probation Officer verification:** **Signature:** _____ **Date:** _____
- You have continued with your budget and financial plan. Please attach proof that you have made payments toward any restitution and/or Court-ordered financial obligations, if applicable.
- You have continued your plan to complete any Court-ordered Community Service Work, if applicable. Please attach proof that you have completed these hours in accordance with your plan.
- You have been attending a min. of 2 weekly pro-social activities and/or recovery support groups. **Please attach a written explanation of how you met this requirement in Phase 4 (min. 1 paragraph) Also, explain your plan to meet this requirement in Phase 5 (min. 1 paragraph)**
- You have identified your employment/ vocational/ educational goals. **Please attach a copy of your written plan to achieve those goals** (min. 1 paragraph).
 - Identify 3 resources, supports, or motivators that helped you succeed in Phase 4:
 1. _____
 2. _____
 3. _____
 - Explain why you are ready for Phase 5- "Honor". Remember that Phase 5 is designed for minimal court intervention so you can practice maintaining sobriety and law-abiding behavior without regular court appearances. _____

Participant Signature

Date

VTC Coordinator Signature

Date

Judge Signature

Date

Additional Staff Remarks

ALPHA TRACK: Graduation Application

It is your responsibility to monitor your own phase advancement and complete the graduation application when you have met all criteria for the final phase. Please contact the Veterans Treatment Court (VTC) Coordinator to schedule a time to review your completed application. After the VTC Coordinator has signed-off on your application, the rest of the VTC team will review the application. The VTC Judge will make the final determination about your graduation.

Name: _____ Current Address: _____

Phone: _____

Email: _____

You MUST meet the following criteria to graduate: (place an "X" if task is completed)

- You have been in Phase 5 for a minimum of 60 days. **Date entered Phase 5:** _____
- You currently have a minimum of 60 days from your program sobriety date. **Program sobriety date:** _____
- You have not committed a major violation for a minimum of 60 days. (Confirm with VTC Coordinator.)
- You have completed all treatment requirements.

Counselor/Case Manager/VA Veteran Justice Outreach Specialist verification:

Signature: _____ Title: _____ Date: _____

- You have completed all supervision requirements.

Probation Officer verification: Signature: _____ Date: _____

- You have paid all remaining balances to Court Accounting and the Probation Department. Please attach proof that you have no remaining balances.
- You have successfully completed any Court-ordered Community Service Work, if applicable. Please attach proof that you have no remaining community service.
- You have completed the attached written aftercare, relapse prevention, and wellness plan (page 2 of this application). Please submit this with your application.
- You have scheduled an exit interview with the VTC Coordinator. Interview date: _____

➤ What was your biggest challenge during VTC, and how did you overcome that challenge?

➤ What was your greatest accomplishment during VTC, and what helped you achieve that success?

➤ Identify 3 resources you can reach out to if you need additional support in the future:

1. _____
2. _____
3. _____

Participant Signature _____ Date _____

VTC Coordinator Signature _____ Date _____

Judge Signature _____ Date _____

Additional Staff Remarks _____

page 1 of 2



WASHINGTON COUNTY VETERANS TREATMENT COURT

Written Aftercare and Wellness Plan

This written plan must be completed and submitted to VTC with your graduation application.

- 1. Briefly, what were your identified needs when you entered Veterans Treatment Court? (i.e. substance use treatment, mental health needs, establishing healthy relationships, housing, etc.)**

- 2. Identify strategies you've learned during your time within VTC and/or your treatment program(s) that will assist you in the future.**

- 3. Please describe your continuing care plan. Specifically: how will you maintain your sobriety, mental health stability, and/or healthy relationships with others?**

- 4. With VTC coming to an end, who do you consider to be in your on-going "support team"? (i.e. significant other, specific family member(s), friends, primary care physician, counselor, etc.)**

- 5. What resources can you use if you need assistance in the future?**

BRAVO TRACK: Application for Phase 2

It is your responsibility to monitor your own phase advancement and complete the appropriate phasing application when you have met all criteria for your current phase. Please contact the Veterans Treatment Court (VTC) Coordinator to schedule a time to review your completed application. After the VTC Coordinator has signed-off on your application, the rest of the VTC team will review the application. The VTC Judge will make the final determination about your phase advancement.

Name: _____ Current Address: _____

Phone: _____

Email: _____

You MUST meet the following criteria to advance to Phase 2: (place an "X" if task is completed)

- ☐ You have been in Phase 1 for a minimum of 90 days. **Date of program entrance:** _____
- ☐ You currently have a minimum of 14 days from your program sobriety date. **Program sobriety date:** _____
- ☐ You have not committed a major violation for a minimum of 14 days. (Confirm with VTCCoordinator.)
- ☐ You have identified a primary care physician. Date of appointment, ***if required***: _____
- ☐ You are complying with treatment and maintaining regular attendance.

Counselor/Case Manager/VA Veteran Justice Outreach Specialist verification:

Signature: _____ Title: _____ Date: _____

- ☐ You are complying with supervision.
- ☐ You have scheduled and/or completed your polygraph, ***if required***. Date of appointment: _____

Probation Officer verification: Signature: _____ Date: _____

➤ Identify 3 challenges you overcame in Phase 1:

1. _____
2. _____
3. _____

➤ Explain why you are ready for Phase 2- "Commitment":

Participant Signature **Date**

VTC Coordinator Signature **Date**

Judge Signature **Date**

Additional Staff Remarks

BRAVO TRACK: Application for Phase 3

It is your responsibility to monitor your own phase advancement and complete the appropriate phasing application when you have met all criteria for your current phase. Please contact the Veterans Treatment Court (VTC) Coordinator to schedule a time to review your completed application. After the VTC Coordinator has signed-off on your application, the rest of the VTC team will review the application. The VTC Judge will make the final determination about your phase advancement.

Name: _____ **Current Address:** _____

Phone: _____

Email: _____

You MUST meet the following criteria to advance to Phase 3: (place an "X" if task is completed)

- You have been in Phase 2 for a minimum of 90 days. **Date entered Phase 2:** _____
- You currently have a minimum of 30 days from your program sobriety date. **Program sobriety date:** _____
- You have not committed a major violation for a minimum of 30 days. (Confirm with VTC Coordinator.)
- You are compliant and engaged with treatment and maintaining regular attendance.

Counselor/Case Manager/VA Veteran Justice Outreach Specialist verification:

Signature: _____ **Title:** _____ **Date:** _____

- You are complying with supervision.
- **Probation Officer verification:** **Signature:** _____ **Date:** _____
- You have created a budget and financial plan, including a plan to repay any restitution and/or Court-ordered financial obligations. Please attach a copy of your financial plan to this application.
- You have developed a plan with your Probation Officer to complete any Court-ordered Community Service Work and attended the Community Service Orientation, ***if applicable***. Please attach a copy of your written plan (min. 1 paragraph).
- You have developed a plan to fulfill the Phase 3 requirement of attending a min. of 2 weekly pro-social activities and/or recovery support groups. Please attach a copy of your written plan (min. 1 paragraph).

➤ Identify 3 challenges you overcame in Phase 2:

1. _____
2. _____
3. _____

➤ Explain why you are ready for Phase 3- "Integrity":

Participant Signature

Date

VTC Coordinator Signature

Date

Judge Signature

Date

Additional Staff Remarks

BRAVO TRACK: Application for Phase 4

It is your responsibility to monitor your own phase advancement and complete the appropriate phasing application when you have met all criteria for your current phase. Please contact the Veterans Treatment Court (VTC) Coordinator to schedule a time to review your completed application. After the VTC Coordinator has signed-off on your application, the rest of the VTC team will review the application. The VTC Judge will make the final determination about your phase advancement.

Name: _____ Current Address: _____

Phone: _____

Email: _____

You MUST meet the following criteria to advance to Phase 4: (place an "X" if task is completed)

- ☐ You have been in Phase 3 for a minimum of 120 days. **Date entered Phase 3:** _____
- ☐ You currently have a minimum of 60 days from your program sobriety date. **Program sobriety date:** _____
- ☐ You have not committed a major violation for a minimum of 60 days (confirm with VTC Coordinator).
- ☐ You are compliant and engaged with treatment and maintaining regular attendance.

Counselor/Case Manager/VA Veteran Justice Outreach Specialist verification:

Signature: _____ Title: _____ Date: _____

- ☐ You are complying with supervision.
- Probation Officer verification:** Signature: _____ Date: _____
- ☐ You have been implementing your budget and financial plan. Please attach proof that you have made payments toward any restitution and/or Court-ordered financial obligations, ***if applicable***.
- ☐ You have completed at least 8 hours of any Court-ordered Community Service Work, ***if applicable***. Please attach proof that you have completed these hours.
- ☐ You have identified your employment/ vocational/ educational goals. **Please attach a copy of your written plan to achieve those goals** (min. 1 paragraph).
- ☐ **You have completed your narrative assignment and are prepared to present at your next courtheating.**
- ☐ You have been attending a min. of 2 weekly pro-social activities and/or recovery support groups. **Please attach a written explanation of how you met this requirement in Phase 3** (min. 1 paragraph). **Also, explain your plan to meet this requirement in Phase 4** (min. 1 paragraph).

➤ Identify 3 challenges you overcame in Phase 3:

1. _____
2. _____
3. _____

➤ **Explain why you are ready for Phase 4- "Honor". Remember that Phase 4 is designed for minimal court intervention so you can practice maintaining sobriety and law-abiding behavior without regular court appearances (on separate page)**

Participant Signature

Date

VTC Coordinator Signature

Date

Judge Signature

Date

Additional Staff Remarks



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Application for Phase IV: VTC Narrative Assignment

This assignment is meant to serve as a template for you to share your stay with the team and participants at your phase promotion court hearing. Use the below bullet points as guides.

- *Write in whatever way works for you: bullet points, short phrases, or sentences are all okay.*
 - *Don't be afraid to get personal. Being vulnerable is difficult, but it's okay to share the honest truth about your life before, during, and after active recovery.*
 - *Do not worry about getting lost in the details.*
 - *If your family played a role in getting you into the VTC, make sure to share that. Repairing damaged relationships can be a hard path to walk, so sharing your experience may help encourage someone else to make amends with their loved ones, too.*
 - *Don't skip over any relapses. Sharing what you learned from these experiences can be therapeutic to you and valuable to others on a similar journey. Don't skip over any accomplishments, let us celebrate your wins!*
 - *Be truthful about what life is like now. We know it isn't always flowers and sunshine. It may not always be the life you envisioned for yourself. You do not have life about being happy all the time or having everything figured out. Being truthful may help others who are also struggling to be able to re-define their new reality.*
1. Introduce Yourself. What's your name, where're you from, which military branch did you serve in and when?
 2. In a few sentences or bullet points, please describe your life prior to entering the VTC court program:
 3. In a few sentences or bullet points, please describe what brought you into the VTC program:
 4. In a few sentences or bullet points, please describe what Phase I was like for you:



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5. In a few sentences or bullet points, please describe what Phase II was like for you:

6. In a few sentences or bullet points, please describe what Phase III was like for you:

7. What have been your biggest barriers or struggles so far in the program?

8. What are some things that you are proud of that you have accomplished so far?

9. What are you hoping to accomplish during the rest of the program?

10. If you could give your Phase I self or a new participant in the program some advice, what would you say?

BRAVO TRACK: Graduation Application

It is your responsibility to monitor your own phase advancement and complete the graduation application when you have met all criteria for the final phase. Please contact the Veterans Treatment Court (VTC) Coordinator to schedule a time to review your completed application. After the VTC Coordinator has signed-off on your application, the rest of the VTC team will review the application. The VTC Judge will make the final determination about your graduation.

Name: _____ Current Address: _____

Phone: _____

Email: _____

You MUST meet the following criteria to graduate: (place an "X" if task is completed)

- You have been in Phase 4 for a minimum of 60 days. **Date entered Phase 4:** _____
- You currently have a minimum of 60 days from your program sobriety date. **Program sobriety date:** _____
- You have not committed a major violation for a minimum of 60 days. (Confirm with VTC Coordinator.)
- You have completed all treatment requirements.

Counselor/Case Manager/VA Veteran Justice Outreach Specialist verification:

Signature: _____ Title: _____ Date: _____

- You have completed all supervision requirements.

Probation Officer verification: Signature: _____ Date: _____

- You have paid all remaining balances to Court Accounting and the Probation Department. Please attach proof that you have no remaining balances.
- You have successfully completed any Court-ordered Community Service Work, ***if applicable***. Please attach proof that you have no remaining community service.
- You have completed the attached written aftercare, relapse prevention, and wellness plan (page 2 of this application). **Please submit this with your application.**
- You have scheduled an exit interview with the VTC Coordinator. Interview date: _____

➤ What was your biggest challenge during VTC, and how did you overcome that challenge?

➤ What was your greatest accomplishment during VTC, and what helped you achieve that success?

➤ Identify 3 resources you can reach out to if you need additional support in the future:

1. _____
2. _____
3. _____

Participant Signature **Date**

VTC Coordinator Signature **Date**

Judge Signature **Date**

Additional Staff Remarks

page 1 of 2



WASHINGTON COUNTY VETERANS TREATMENT COURT

Written Aftercare and Wellness Plan

This written plan must be completed and submitted to VTC with your graduation application.

- 1. Briefly, what were your identified needs when you entered Veterans Treatment Court? (i.e. substance use treatment, mental health needs, establishing healthy relationships, housing, etc.)**

- 2. Identify strategies you've learned during your time within VTC and/or your treatment program(s) that will assist you in the future.**

- 3. Please describe your continuing care plan. Specifically: how will you maintain your sobriety, mental health stability, and/or healthy relationships with others?**

- 4. With VTC coming to an end, who do you consider to be in your on-going "support team"? (i.e. significant other, specific family member(s), friends, primary care physician, counselor, etc.)**

- 5. What resources can you use if you need assistance in the future?**