

IN THE MUNICIPAL COURT OF DELAWARE COUNTY, OHIO
OVI DOCKET

The State of Ohio

vs.

Case No. _____

Defendant

PARTICIPATION AGREEMENT

This participation agreement outlines the requirements and process of the OVI Docket (Docket). By signing this form, you are in agreement with being admitted to the Docket for all further proceedings of the above captioned case. The Docket is a voluntary court program for certain individuals who have been charged with operating a vehicle under the influence of drugs or alcohol (OVI) or having physical control of a vehicle while under the influence of drugs or alcohol (PCI). The goals of the Docket are to provide accountability and support for participants to help them achieve a healthier lifestyle and to gain control over their lives and the choices they make.

Your signature represents that you are willing to participate in and fully understand the terms and expectations of the Docket. Your signature indicates that you have received a copy of the participant handbook and understand that the handbook outlines your rights and responsibilities while in the Docket and that you have reviewed it with your attorney and with Docket staff.

Elements of Agreement

1. Waiver of Rights

Participation in the Docket includes waiving certain legal rights. Each of these rights is described below. You have the ability to rescind these waivers at any time. Consequences for rescinding the waivers may include being terminated unsuccessfully from the Docket.

You are waiving the following rights by signing this agreement:

1. **Right to Remain Silent and Right Against Self Incrimination:** Participants are encouraged to be honest and self-report any violations of the Docket rules and terms of probation.
2. **Right to Freely Associate:** Participants may be restricted from access to certain persons if these persons are believed to be a barrier to the participants' success.
3. **Right Against Unlawful Search and Seizure:** The Community Control Officer may conduct searches of a participant's person, residence, and property.
4. **Contempt Hearing Waivers:** Participants waive the Right to Notice and Right to Service on Show Cause or Contempt citations to allow the Judge to impose jail sanctions in an effective and timely manner.

2. Overview of Docket Expectations

Participants in the Docket are required to complete a drug and alcohol (AOD) assessments and comply with all recommendations of the treatment provider. You must agree to use either Maryhaven, Recovery Prevention Resources (RPR), or Second Chance Counseling Services unless (a) your preferred treatment provider is certified and licensed by the Ohio Department of Mental Health and Addiction Services, (b) your preferred treatment provider agrees in writing to provide a counselor or other representative at every Team meeting and status review hearing at which you are required to attend, and (c) the Judge approves of your using a different treatment provider.

You must follow and comply with all established treatment plans, court services plan, and Docket rules and requirements.

The Docket is designed to be a minimum of twelve months in duration. There are three phases to the program. The phases are of varying length. During Phase 1, once you have completed any jail time ordered at your sentencing, you appear in front of the Judge every other week. After Phase 1, you will appear less often as you demonstrate compliance and progress. Progress through the phases is based on your compliance with treatment, the court services plan, and other Docket requirements. Substance use, missed appointments, and disobeying court orders may all lead to longer participation in or even termination from the Docket.

Your progress will be discussed by the Judge, the Community Control Officer, the Docket Coordinator, and staff from your treatment provider in treatment team meetings and at the status hearings. You have the right to have your attorney present at those meetings and hearings.

3. Assessment, Referral, and Treatment Expectations

You must be willing to attend and fully participate in all treatment and recovery activities to which you are referred. You will complete release of information forms as asked to permit communication about information regarding your attendance, compliance, and progress in treatment. You will maintain current and valid releases of information with all treatment providers throughout the duration of the program.

You will keep confidential all information regarding other Docket participants shared at group sessions, recovery activities, and status review hearings if applicable.

4. Participant Monitoring

You will be placed under reporting supervision to monitor your compliance with abstaining from substance use, attending treatment and counseling services, and other court orders. The Community Control Officer will make unscheduled, random visits to your home to monitor your compliance. You will be required to report in to the Community Control Officer's office at the Municipal Courthouse when requested. The Team will meet before every status review hearing to exchange timely and accurate information regarding your overall performance.

Participants are not permitted to use alcohol or illegal drugs under any circumstance. You are not permitted to use prescription drugs of any kind without giving a copy of the prescription to the Docket Coordinator and also giving a Notice to Physician form to the prescribing doctor. This form notifies the doctor of your involvement in the Docket. Prescription medications must be taken as prescribed. Certain prescription medication, such as opiates and benzodiazepines, are

not permitted. Finally, over-the-counter medications should be used sparingly as some may cause false-positive urine drug screen results. If over-the-counter medications are taken, they must be reported and should be taken only as indicated in the package instructions. You have the opportunity to report any prescriptions, over-the-counter medications, and illegal drugs prior to any drug screening.

Substance abuse testing will be random, frequent and observed. Drug and alcohol testing plans are individualized to meet the needs of each participant. These plans may change throughout the program based on your compliance and progress.

You are required to submit to drug and/or alcohol testing a minimum of 2 times per week. The Community Control Officer will call you and you will have 24 hours to report for the test. Be aware that the Community Control Officer may also test you when you report to Court or during a home visit.

The Community Control Officer will randomly send drug tests to the lab for detection of alcohol.

Your test results will be shared with the Team. The Team meets prior to status review hearings to exchange information about your progress and to make recommendations for incentives or sanctions.

There are immediate sanctions for not complying with Docket rules. These sanctions get more severe with the level and frequency of noncompliance. Testing positive will result in a sanction.

All urine drug testing will be directly observed by court or treatment staff of the same sex as you. Samples are observed in an effort to decrease the likelihood of tampering with the sample. The following acts will be treated as positive tests and immediately sanctioned:

- Failing to submit to drug testing as directed by the Community Control Officer or treatment provider.
- Testing positive.
- Failing to submit to drug testing within the allotted time.
- Refusing to submit to a drug test.
- Submitting the sample of another individual.
- Submitting an adulterated sample.
- Participant holding any device containing urine or synthetic urine on or in the body.
- Diluting a urine sample.

Sanctions for failing a drug test are spelled out in detail in the Participant Handbook.

There is no cost to for regular, instant and lab drug testing while you are in the Docket. If you dispute the GC/MS confirmation results from the lab, then you can submit a written request within 24 hours to the Docket Coordinator to have the specimen retested. If the test is confirmed positive, then the cost for this additional test is your responsibility. If the test is negative, then you will not be required to pay for the additional testing.

5. Successful Completion Criteria

You are eligible for successful completion if you have completed your treatment plan as recommended by your treatment provider, completed all terms your court services plan, and paid all applicable fines and fees. The minimum timeframe to successfully complete the Docket is one year (12 months). Again, progress through the phases is based on your compliance and not upon any preset time schedule.

6. Termination Criteria

You can be unsuccessfully terminated from the Docket for noncompliance with program requirements. Behaviors that may lead to unsuccessful termination include ongoing noncompliance with treatment, resistance to treatment, new serious criminal convictions, or a series of docket infraction. If you are unsuccessfully terminated from the program, then the Judge may and will impose additional sanctions.

Summary of Agreement

1. My OVI or PCI case(s) will be transferred to the Judge operating the Docket, along with any other pending misdemeanor charge(s) and/or pending alleged community control violations. I understand that I will have a jail sentence. I understand that I will be placed on a period of community control with general and specific terms that include compliance with the rules of the Docket.
2. I will be required to participate in all phases of the Docket, which will last a minimum of twelve (12) months. My time in the Docket is based upon my personal progress and not upon any other schedule. I must attend and meaningfully participate in any and all recommended treatment programs. I must follow my court services plan. I may say that I do not want to participate at any time before I am admitted to the Docket. That decision will make me ineligible for the Docket and my OVI or PCI case(s) will remain with the judge to whom the case(s) was originally assigned. If I say I do not want to participate in the Docket after I have been admitted to it, my OVI or PCI case(s) will remain with the Judge of the Docket. If I am terminated and removed from Docket for any reason, the Judge will impose final sentence in my case(s).
3. I have been evaluated for eligibility and admission to the Docket. I gave truthful and accurate answers to the questions I was asked in my eligibility screening and assessment. I understand that members of the Team, which includes the Judge, the Community Control Officer, the Docket Coordinator, and a representative of the approved treatment providers, reviewed, discussed, and shared the information I provided in the preadmission screening and assessment. I understand that Team members will share information about me to evaluate my progress as long as I am in the Docket.
4. I understand that I will appear in court before the Judge on a regular basis without my attorney to report progress in the program. The Judge or the Community Control Officer may impose sanctions on me without my attorney being present if I fail to comply with the Docket rules. I understand that I have the right to have my attorney present at all Team meetings and status hearings where my progress will be reviewed and discussed.

5. I will be required to report to the Community Control Officer on a regular basis and agree to comply with my court services plan. I agree to attend all status review hearings while I am in the Docket. In the beginning of my participation, these hearings will be held every week. As I progress through the Docket, the number of hearings I must attend will decrease.
6. I will participate in all alcohol and drug assessments and treatment services, needed counseling, or other necessary services as determined by my court services plan and any treatment plans. I agree that any information coming out of those assessments and services may be shared with the Team during my participation in the Docket. I agree to sign releases of information as requested so that the Team may have continual access to information about my progress in treatment and other areas.
7. I understand that I will be subject to frequent, random, and observed testing for drug and alcohol use. I understand that I will have eight (8) hours to submit to the required testing. I understand that if I refuse to submit to a test, this will be treated as a failed test.
8. I understand that when I complete the Docket, I will continue to be on community control as part of my original sentence.
9. I am not aware of any serious physical health condition that would keep me from participating in the Docket. I am not aware of any pending charges or detainers from any other jurisdiction that would prevent me from participating in the Docket.

I ACKNOWLEDGE THAT I HAVE READ THROUGH AND UNDERSTAND THIS AGREEMENT, THAT I FREELY AND VOLUNTARILY RELINQUISH THE RIGHTS DISCUSSED, AND THAT I AGREE TO ABIDE BY ALL THE RULES AND CONDITIONS OF THE DOCKET AS OUTLINED IN THIS AGREEMENT AND THE PARTICIPANT HANDBOOK.

Signature of Participant

Date

Attorney for Participant

Date

OVI Docket Coordinator

Date