



**Denton County DWI Treatment Court**

**Judge Coby Waddill**

**County Criminal Court #5**

**Information Packet**

## DENTON COUNTY DWI COURT

### POLICY

An interdisciplinary team of stakeholders and criminal justice professionals work together to intervene in the lives of intoxicated drivers to promote recovery, accountability, reduced recidivism, community safety, positive behavioral changes, drug free lifestyle, and reduction of criminal activity.

Team members include: Judge, prosecutor, probation officer, defense attorneys and treatment specialist. The team will meet as needed, to discuss cases and determine the best course of action.

#### I. Participant Eligibility/Target Population

##### A. Inclusion

1. DWI, 2<sup>nd</sup> or 3<sup>rd</sup> conviction
2. Plea of guilty
3. DWI Pretrial Diversion defendants
4. History of alcohol/drug offenses
5. Alcohol/drug dependence
6. Able to participate and benefit
7. Mood disorders (Axis I, non-psychotic)
8. Denton County resident

##### B. Exclusion

1. Trial or plea of "no contest"
2. Prior DWI or Drug Court participation
3. Non-dependence on alcohol/drugs
4. Unable to participate and benefit
5. Does not reside in Denton County

#### II. Screening/Assessment Process

- A. The prosecutor will determine which cases meet legal eligibility requirements.
- B. If the prosecutor determines that the offender meets legal eligibility requirements, the DWI Court Probation Officer will interview the offender to determine appropriateness for placement in the Court.
- C. If the prosecutor determines that the offender meets legal eligibility requirements, the offender will be referred for clinical assessment. Assessments will include approved assessment instruments, such as the Addiction Severity Index (ASI,) to determine alcohol/drug dependence.
- D. The CSO will complete a TRAS assessment after an offender is placed in the program.
- E. All placements in the program will be made by court order

III. Program Components- the program consists of 3 phases over a period of approximately 12 months, unless the period is modified by the Court. Early graduation from the Court can occur at the 9 month mark, if all special terms of probation (CSR,etc.) are completed, including court requirements. HIV/AIDS education will be presented in court two times per year

A. Phase One

Duration: approximately five months

1. Report to your officer weekly, including court appearances- court is every other Thursday unless otherwise scheduled. (Officer contacts: minimum of once per week, including court appearances. Contacts will also include a field contact (other than in court) every fourth month.
2. Attend court as scheduled
3. Drug testing at least once per week
4. Deep Lung Device as ordered by the Court
5. Transdermal unit, Portable Alcohol monitoring device, Electronic monitoring (ELM) or drug patch if ordered
6. Begin Substance abuse outpatient treatment (SAOT), such as IOP- Intensive Outpatient or SOP- Supportive outpatient - complete any writing assignments that may be assigned.
7. Attend community based sober support group that is approved by your supervision officer, at least 2x/week- document attendance and work with a sponsor/accountability partner.
8. Begin Individual counseling if/as directed
9. Once SAOT is done, begin Repeat Offenders Program- ROP

Criteria for successful completion of Phase One

- a. No absences from court or CSO appointments during last 30 days
- b. Sanction free for 60 days
- c. Consistent attendance or completion of SAOT (IOP/SOP)
- d. Documented, consistent attendance at community based sober support group meetings
- e. Have temporary or permanent sponsor/accountability partner
- f. No positive UA's or any other substance related violations, 60 days of sobriety

F. Phase Two

1. Duration: approximately four months  
Report to your officer at least one time per month. Court appearances are in addition to seeing your officer one time per month. Officer contacts: once per month, in addition to court appearances. Contacts will also include a field contact (other than in court) every fifth month.
2. Attend court as scheduled
4. Drug testing at least three times per month
5. Deep Lung device as ordered by the Court

6. Transdermal unit, Portable Alcohol Monitor, Electronic monitoring (ELM) or drug patch, if ordered
7. Obtain/maintain employment as far as possible or regular participation in community service requirements listed on court order.
8. Continue in any remaining counseling and complete (SAOT/Individual)
9. Begin ROP if not already started
10. Attend community based sober support group that is approved by your supervision officer, at least 2x/week- document attendance and work with a sponsor/accountability partner.

Criteria for successful completion of Phase Two

- a. No absences from court or CSO appointments during last 30 days
- b. Sanction free for 60 days
- c. Completion of any remaining SAOT (IOP/SOP)
- d. Consistent attendance or completion of ROP
- e. Documented, consistent attendance at community based sober support group meetings
- f. Have permanent sponsor /accountability partner
- g. No positive UA's or any other substance related violations, 75 days of sobriety

G. Phase Three

1. Duration: approximately three months
2. Report to your officer at least one time per month. Court appearances are in addition to seeing your officer one time per month. Officer contacts: once per month, in addition to court appearances. Contacts will also include a field contact (other than in court) every sixth month.
3. Attend court as scheduled
4. Drug testing at least twice per month
5. Deep Lung Device as ordered by the Court
6. Transdermal unit, Portable Alcohol monitoring device, Electronic monitoring (ELM) or drug patch, if ordered
7. Obtain/maintain employment as far as possible or regular participation in community service requirements listed on court order
8. Complete ROP
9. Begin completion of other terms of probation such as CSR, GED, or other classes/programs
10. Attend community based sober support group that is approved by your supervision officer, at least 2x/week- document attendance and work with a sponsor/accountability partner.

Criteria for successful completion of Phase Three & Graduation from the Court

- a. No absences from court or CSO appointments during last 30 days
- b. Sanction free for 60 days

- c. Completion of Education programs, such as ROP. Additional counseling that has been recommended may be completed after graduation from the Court
- d. Documented, consistent attendance at community based sober support group meetings
- e. No positive UA's or any other substance related violations, 90 days of sobriety

IV. Program Sanctions and Incentives

- A. The court will be notified of program violations prior to or during the next scheduled court appearance. Possible violations include:
1. Failure to appear, or late to appear for court
  2. Failure to report to supervision officer
  3. Failure to attend counseling or other programs
  4. Positive drug test results
  5. Refusal to submit sample for drug test
  6. Alcohol/drug use
  7. Failure to seek/maintain employment
  8. Failure to attend or document attendance at 12-Step meetings
  9. Failure to obtain a 12-Step sponsor
- B. All violations will result in a sanction. Possible sanctions include:
1. Verbal reprimand by the Judge
  2. Report writing
  3. Increased reporting/drug testing
  4. Increased CSR
  5. Increased fine
  6. Attend additional Victim Impact Panel
  7. Short-term jail time
  8. SCRAM unit
  9. ELM
  10. Demotion to previous phase of the program
  11. Extension of current phase of the program
  12. Referral to additional program(s)
  13. Removal from program
  14. Residential treatment
  15. SAFPF
  16. Revocation
- C. Accomplishments and completions will be recognized and rewarded, as appropriate. Incentives include:
1. Verbal praise in court
  2. Letter of congratulations
  3. Certificates of Completion
  4. Graduation to next phase
  5. Graduation to regular caseload

V. Discharge

- A. Types of Discharge are:
1. Successful Completion
  2. Removed for Violations
  3. Inappropriate Placement
  4. Death
  5. Absconded



NAME: \_\_\_\_\_

CAUSE# \_\_\_\_\_

**D.W.I. TREATMENT COURT CONTRACT  
PARTICIPANT RESPONSIBILITIES/REQUIREMENTS**

I \_\_\_\_\_, understand that I am responsible for the following behaviors as part of my agreement and willingness to participate in the Denton County DWI Treatment Court Program:

1. I am responsible for signing a release of information and I understand the DWI Court Team will be speaking about me in staffing.
2. I am responsible for making sure that I do not consume alcohol and that I do not use any products that contain alcohol. (for example: O'Doul's, Nyquil, mouthwash)
3. I am responsible for attending all office and field contacts as scheduled by my Supervision Officer. I am responsible to report to my Supervision Officer as per the requirements of my current phase in the Court.
4. I am responsible for appearing before the Court as scheduled
5. I am responsible for attending and participating in all elements of my treatment program including but not limited to: (Substance Abuse Outpatient Treatment: IOP, SOP, Individual counseling), aftercare, education or vocational programs, health education programs, mental health programs, or life skills programs as directed by my Supervision Officer.
6. I am responsible for attending community based sober support group meetings (such as AA, NA, CR, Smart Recovery) as directed & approved by my Supervision Officer, no less than 2 times per week and for providing verification of attendance to my Supervision Officer.
7. I am responsible for obtaining a sponsor/accountability partner in the community based sober support meetings and working with this person closely in my recovery process.
8. I am responsible for my own behavior.
9. I am responsible for making recovery the first priority in my life.

10. I am responsible for being honest and forthright about my behavior (both past and present) with the Judge, my Supervision Officer, the treatment provider and the other agents of the DWI Court.
11. I am responsible for treating myself and others with respect.
12. I am responsible for providing urine specimens, as required per my Phase in the Court (as scheduled or as requested) with the understanding that I will be observed while providing the said specimen. I will call in or check in via the internet app into the IVR/TASC –urine collection system, every day: Sunday thru Saturday. I am responsible for providing urine specimens, as required per my Phase in the Court (as scheduled or as requested) with the understanding that I will be observed while providing the said specimen. I am responsible for making sure that the urine sample I provide is NOT diluted. I understand that if I produce a dilute urine sample it may be addressed with a sanction. I have been informed that ingesting an excessive amount of fluids can result in a diluted urine specimen. I understand that substituting or altering my specimen or trying in any way to modify my body fluids for the purposes of changing the drug /alcohol test results may be considered a violation of the program rules and addressed by the Court in the manner deemed appropriate by the Court.
13. I am responsible for wearing a drug patch if requested/ordered by the Court.
14. I am responsible for providing my Supervision Officer with written proof of any medications that I am taking and I am responsible for signing a release of information so that the DWI Court Team may speak to my medical providers if deemed necessary by the Court.
15. I am responsible for making myself available for my Supervision Officer to visit me at my home or elsewhere and I further understand that my Supervision Officer may make unannounced visits to my home or elsewhere.
16. I am responsible for bringing my DWI Court folder to each contact with my Supervision Officer.
17. I am responsible if ordered by the Court, to participate in an electronic monitoring program, such as a portable alcohol monitoring device or transdermal monitoring device or deep lung device and I am responsible for obeying all rules and regulations of the monitoring device and I am responsible for cooperating fully.
18. I am responsible for complying with all terms of my community supervision.



19. I am responsible for knowing the status of my driver's license and insurance. If I do not have a legal driver's license, I will not drive. If I have a legal driver's license and I'm mandated to have a deep lung device with a camera on my vehicle, I will not drive any vehicle that does not have a deep lung device.
20. I must reside in Denton County.
21. I am responsible for notifying my Supervision Officer within 24 hours of any new arrests, tickets or any law enforcement contact I have.

**I ACKNOWLEDGE THAT I RECEIVED A COPY OF THIS CONTRACT & I HAVE HAD IT EXPLAINED TO ME, AND I FULLY UNDERSTAND WHAT IS EXPECTED OF ME WHILE I AM PARTICIPATING IN THE DWI COURT OF THE DENTON COUNTY.**

\_\_\_\_\_  
Participant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervision Officer Signature

\_\_\_\_\_  
Date

**DENTON COUNTY DWI COURT PARTICIPANT CONSENT FORM**

**AN EXPLANATION REGARDING YOUR RIGHTS**

This consent form is governed by the Code of Federal Regulations, Part 2 of Title 42 concerning the confidentiality of alcohol and drug abuse patient records. Upon the participant's signature on this form, Denton County DWI Court Program Team, may disclose the participant's medical records regarding alcohol and drug abuse to those individuals within the criminal justice system who have a need for the information in connection with their duty to monitor the patient's progress, and attendees of Denton County DWI Court Program meetings who will be required to sign a confidentiality agreement pertaining to the participant's alcohol and drug abuse records. A person who receives patient information may redisclose and use it only to carry out that person's official duties.

**BY SIGNING THIS CONSENT FORM, I UNDERSTAND:**

- **I AM AUTHORIZING DENTON COUNTY DWI COURT PROGRAM TEAM TO DISCLOSE CONFIDENTIAL INFORMATION FOR THE TERM OF MY PARTICIPATION IN DENTON COUNTY DWI COURT PROGRAM, AND**
- **MY PRIVATE PATIENT RECORDS REGARDING DRUG AND ALCOHOL ABUSE MAY BE DISCUSSED IN A PUBLIC FORUM.**

I, \_\_\_\_\_, a participant in Denton County DWI Court Program authorize  
Please print your name

Denton County DWI Court Program to disclose information regarding my diagnosis, prognosis, attendance or lack of attendance at treatment sessions or designated appointments, and / or my cooperation within the treatment program to:

- a prosecuting attorney;
- probation or parole officers;
- other participants in Denton County DWI Court Program
- a court granting pretrial or post trial release
- treatment provider/s
- defense attorneys and,
- members of the public attending Denton County DWI Court sessions.

This information will be disclosed to these individuals for the purpose of providing treatment services and adequate case management and supervision. This consent is subject to revocation at any time except to the extent that Denton County DWI Court Program has already taken action in reliance on it. If not previously revoked, this consent will terminate upon the successful completion of my participation in Denton County DWI Court Program or the revocation of my probation.

This authorization **DOES NOT** include disclosure of the following: HIV/AIDS status; and genetic testing.

I have read the above explanation of my rights concerning the confidentiality of alcohol and drug abuse patient records. I also understand that any disclosure made is bound by the Code of Federal Regulations, Part 2 of Title 42 governing confidentiality of alcohol and drug abuse patient records and those recipients of this information may redisclose it only in connection with their official duties.

X \_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

DENTON COUNTY COMMUNITY SUPERVISION  
AND CORRECTIONS DEPARTMENT

Mailing Address:  
P.O. Box 1309  
Denton, Texas 76202

(972) 434-4800  
FAX (972) 434-4801



Physical Address:  
401 N. Valley Pkwy, Suite 100  
Lewisville, Texas 75067

Peggy Carr  
Director

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**INSTRUCTIONS FOR SYSTEM CALL OF URINE TESTS**

Step by step:

- ☐ Call (602) 288-5686 or 1-888-906-1694
- ☐ Press 1 for English or 2 for Spanish.
- ☐ Press your ID number assigned by your probation officer or the last 4 digits of your social security number with the symbol #.
- ☐ After entering your ID number, the system will repeat the number and you'll say "if the number is correct press the number 1, if this the wrong number press 2 ". The system will give you the opportunity to press the correct number.
- ☐ Press your birth date using 2 digits for the month, two digits for the day, and two digits for the year. And then press the # symbol. The system will repeat your date of birth and you will say "if the date is correct press the number 1, if not 2 ".

*You will hear the following message:*

*" You are required to submit to urinalysis today "*

*or*

*" You are NOT required to submit to urinalysis "*

**COST:** \$16 payable on probation appointments- 30 days from the date of each test to pay the fee.

**HOURS:** 7:00 AM – 5:30 PM

**LOCATIONS:** Denton 650 S Mayhill Rd, Denton, TX 76208 (940) 349-3300

Lewisville 401 N. Valley Pkwy #100, Lewisville, TX 75067 (972)434-4800

You can start calling at 6:00 AM.

**You must call or check in on line with the TASC App, every day: Sunday-Sunday (weekends included)**